Session of 2014

HOUSE BILL No. 2685

By Committee on Health and Human Services

2-13

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

1 any amendments thereto, of tasks and responsibilities defined in part (1) of 2 this subsection (d) which tasks and responsibilities are based on acceptable 3 educational preparation within the framework of supportive and restorative 4 care under the direction of a registered professional nurse, a person 5 licensed to practice medicine and surgery-or, a person licensed to practice 6 dentistry or by a person licensed to practice as an advanced practice 7 registered nurse.

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(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.

10 (f) A "practical nurse" means a person who is licensed to practice 11 practical nursing as defined in part (2) of subsection (d) of this section.

12 (g) "Advanced practice registered nurse" or "APRN" means a 13 professional nurse who holds a license from the board to function as a 14 professional nurse in an advanced role, and this advanced role shall be 15 defined by rules and regulations adopted by the board in accordance with 16 K.S.A. 65-1130, and amendments thereto.

Sec. 2. K.S.A. 2013 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.

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

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

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

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

41 (2) Establish education and qualifications necessary for licensure for 42 each-role of advanced practice registered nurse *role* established by the 43 board at a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which
 advanced practice registered nurses 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 master's or higher degree in one of the advanced
 practice registered nurse roles approved by the board of nursing.

7 (3) Define the role of advanced practice registered nurses and 8 establish limitations and restrictions on such role. The board shall adopt a 9 definition of the role under this subsection (c)(3) which is consistent with the education and qualifications required to obtain a license as an 10 advanced practice registered nurse, which protects the public from persons 11 12 performing functions and procedures as advanced practice registered nurses for which they lack adequate education and qualifications and 13 which authorizes advanced practice registered nurses to perform acts 14 15 generally recognized by the profession of nursing as capable of being 16 performed, in a manner consistent with the public health and safety, by 17 persons with postbasic education in nursing. In defining such role the 18 board shall consider: (A) The education required for a licensure as an 19 advanced practice registered nurse; (B) the type of nursing practice and 20 preparation in specialized advanced practice skills involved in each role of 21 advanced practice registered nurse established by the board; (C) the scope 22 and limitations of advanced practice nursing prescribed by national 23 advanced practice organizations; and (D) acts recognized by the nursing profession as appropriate to be performed by persons with postbasic 24 25 education in nursing; and (E) the certification standards established by an accredited national organization whose certification standards are 26 27 approved by the board as equal to or greater than the corresponding 28 standards established under this act for obtaining authorization to 29 practice as an advanced practice registered nurse in the specific role.

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

(f) The practice of nursing as an advanced practice registered nurse means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, of the process in which advanced knowledge derived from the biological, physical and behavioral sciences is applied to direct and indirect care, including, but not limited to, creating and executing a health care plan; nursing and medical diagnosis, management, treatment and prescribing; administering

pharmacologic and non-pharmocologic interventions; counseling and 1 2 health teaching of persons who are experiencing changes in the normal 3 health processes or who require assistance in the maintenance of health; or the prevention or management of illness, injury or infirmity; 4 administration, supervising or teaching within the advanced practice 5 6 registered nurse's role. Within the role of the advanced practice registered 7 nurse, an advanced practice registered nurse may serve as a primary care 8 provider and lead health care teams. 9

(d)(g) An advanced practice registered nurse may prescribe drugspursuant to a written protocol as authorized by a responsible physician. 10 Each written protocol shall contain a precise and detailed medical plan of 11 12 care for each classification of disease or injury for which the advancedpractice registered nurse is authorized to prescribe and shall specify all-13 drugs which may be prescribed by the advanced practice registered nurse 14 15 Advanced practice registered nurses are authorized to prescribe, procure 16 and administer prescription drugs and controlled substances pursuant to applicable state and federal laws. Any-written prescription order by an 17 advanced practice registered nurse shall include the name, address and 18 19 telephone number of the responsible physician advanced practice 20 registered nurse. The advanced practice registered nurse may not dispense drugs, but may request, receive and sign for professional samples and may 21 22 distribute professional samples to patients pursuant to a written protocol as 23 authorized by a responsible physician. In order to prescribe controlled substances, the advanced practice registered nurse shall: (1) Register with 24 25 the federal drug enforcement administration; and (2) notify the board of 26 the name and address of the responsible physician or physicians. In no-27 case shall the scope of authority of the advanced practice registered nurse 28 exceed the normal and customary practice of the responsible physician 29 nursing of the federal drug enforcement administration registration as prescribed by rules and regulations of the board. An advanced practice 30 registered nurse shall comply with the federal drug enforcement 31 32 administration requirements related to controlled substances. An advanced 33 practice registered nurse certified in the role of registered nurse anesthetist 34 while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 35 65-1164, inclusive, and amendments thereto, shall be subject to the 36 provisions of K.S.A. 65-1151 to 65-1164, inclusive, and amendments 37 thereto, with respect to drugs and anesthetic agents and shall not be subject 38 to the provisions of this subsection. For the purposes of this subsection, 39 "responsible physician" means a person licensed to practice medicine and 40 surgery in Kansas who has accepted responsibility for the protocol and the 41 actions of the advanced practice registered nurse when prescribing drugs. (h) An advanced practice registered nurse is accountable to patients, 42

43 the nursing profession and the board for complying with the requirements

of the nurse practice act, and any rules and regulations adopted pursuant
 thereto, and is responsible for recognizing limits of knowledge and
 experience, planning for the management of situations beyond the
 advanced practice registered nurse's expertise and referring patients to
 other health care professionals as appropriate.

6 (i) (1) The board by rules and regulations shall establish a program 7 of transition to full practice for all persons who on and after the effective 8 date of this act are granted initial licensure as an advanced practice 9 registered nurse or who have less than 2,000 hours of licensed active 10 practice as an advanced practice registered nurse in their initial roles.

11 (2) Advanced practice registered nurses who are subject to the 12 program of transition to full practice shall not prescribe medications 13 except as provided in this subsection.

(3) As part of the program of transition to full practice, an advanced 14 practice registered nurse shall complete, within two years from the 15 16 commencement of the program by the advanced practice registered nurse, a transition to full practice period of 2,000 hours while maintaining a 17 collaborative relationship for practice and for prescribing medications 18 19 with either a licensed advanced practice registered nurse with full prescriptive authority under subsection (g) or with a physician. The 20 advanced practice registered nurse shall engage in the practice of nursing 21 22 as an advanced practice registered nurse and may prescribe medications 23 as part of the collaborative relationship.

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

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

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

(7) The board may adopt rules and regulations necessary to carry out
 the provisions of this subsection.

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

40 *(j)* When a provision of law or rule and regulation requires a 41 signature, certification, verification, affidavit or endorsement by a 42 physician, that requirement may be fulfilled by a licensed advanced 43 practice registered nurse working within the scope of practice of such 1 *nurse's respective role.*

2 (k) The confidential relations and communications between an 3 advance practice registered nurse and the advance practice registered 4 nurse's patient are placed on the same basis as provided by law as those 5 between a physician and a physician's patient in K.S.A. 60-427, and 6 amendments thereto.

7 (*l*) An advanced practice registered nurse shall maintain malpractice 8 insurance coverage in effect as a condition to rendering professional service as an advanced practice registered nurse in this state and shall 9 10 provide proof of insurance at time of licensure and renewal of license. The requirements of this subsection shall not apply to an advanced practice 11 registered nurse who practices solely in an employment which results in 12 the advanced practice registered nurse being covered under the federal 13 tort claim act or state tort claims act, or who practices solely as a 14 15 charitable health care provider under K.S.A. 75-6102, and amendments 16 thereto, or who is serving on active duty in the military service of the 17 United States

18 (e)(m) As used in this section, "drug" means those articles and 19 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 20 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.

28 Sec. 3. K.S.A. 2013 Supp. 39-923 is hereby amended to read as 29 follows: 39-923. (a) As used in this act:

(1) "Adult care home" means any nursing facility, nursing facility for
mental health, intermediate care facility for people with intellectual
disability, assisted living facility, residential health care facility, home plus,
boarding care home and adult day care facility; all of which are
classifications of adult care homes and are required to be licensed by the
secretary of aging.

36 (2) "Nursing facility" means any place or facility operating 24 hours a 37 day, seven days a week, caring for six or more individuals not related 38 within the third degree of relationship to the administrator or owner by 39 blood or marriage and who, due to functional impairments, need skilled 40 nursing care to compensate for activities of daily living limitations.

(3) "Nursing facility for mental health" means any place or facility
operating 24 hours a day, seven days a week, caring for six or more
individuals not related within the third degree of relationship to the

administrator or owner by blood or marriage and who, due to functional
 impairments, need skilled nursing care and special mental health services
 to compensate for activities of daily living limitations.

4 (4) "Intermediate care facility for people with intellectual disability" 5 means any place or facility operating 24 hours a day, seven days a week, 6 caring for four or more individuals not related within the third degree of 7 relationship to the administrator or owner by blood or marriage and who, 8 due to functional impairments caused by intellectual disability or related 9 conditions, need services to compensate for activities of daily living 10 limitations.

11 (5) "Assisted living facility" means any place or facility caring for six 12 or more individuals not related within the third degree of relationship to 13 the administrator, operator or owner by blood or marriage and who, by choice or due to functional impairments, may need personal care and may 14 need supervised nursing care to compensate for activities of daily living 15 16 limitations and in which the place or facility includes apartments for 17 residents and provides or coordinates a range of services including personal care or supervised nursing care available 24 hours a day, seven 18 19 days a week, for the support of resident independence. The provision of 20 skilled nursing procedures to a resident in an assisted living facility is not 21 prohibited by this act. Generally, the skilled services provided in an 22 assisted living facility shall be provided on an intermittent or limited term 23 basis, or if limited in scope, a regular basis.

24 (6) "Residential health care facility" means any place or facility, or a 25 contiguous portion of a place or facility, caring for six or more individuals not related within the third degree of relationship to the administrator, 26 27 operator or owner by blood or marriage and who, by choice or due to 28 functional impairments, may need personal care and may need supervised nursing care to compensate for activities of daily living limitations and in 29 30 which the place or facility includes individual living units and provides or 31 coordinates personal care or supervised nursing care available on a 24-32 hour, seven-days-a-week basis for the support of resident independence. 33 The provision of skilled nursing procedures to a resident in a residential 34 health care facility is not prohibited by this act. Generally, the skilled 35 services provided in a residential health care facility shall be provided on 36 an intermittent or limited term basis, or, if limited in scope, a regular basis.

(7) "Home plus" means any residence or facility caring for not more than 12 individuals not related within the third degree of relationship to the operator or owner by blood or marriage unless the resident in need of care is approved for placement by the secretary of the department of social and rehabilitation services, and who, due to functional impairment, needs personal care and may need supervised nursing care to compensate for activities of daily living limitations. The level of care provided to residents 1 shall be determined by preparation of the staff and rules and regulations

2 developed by the department on aging. An adult care home may convert a 3 portion of one wing of the facility to a not less than five-bed and not more 4 than 12-bed home plus facility provided that the home plus facility 5 remains separate from the adult care home, and each facility must remain 6 contiguous. Any home plus that provides care for more than eight 7 individuals after the effective date of this act shall adjust staffing personnel 8 and resources as necessary to meet residents' needs in order to maintain the 9 current level of nursing care standards. Personnel of any home plus who 10 provide services for residents with dementia shall be required to take annual dementia care training. 11

12 (8) "Boarding care home" means any place or facility operating 24 13 hours a day, seven days a week, caring for not more than 10 individuals 14 not related within the third degree of relationship to the operator or owner 15 by blood or marriage and who, due to functional impairment, need 16 supervision of activities of daily living but who are ambulatory and 17 essentially capable of managing their own care and affairs.

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

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

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

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

40 (13) "Resident" means all individuals kept, cared for, treated, boarded 41 or otherwise accommodated in any adult care home.

42 (14) "Person" means any individual, firm, partnership, corporation,43 company, association or joint-stock association, and the legal successor

1 thereof.

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

7 8 (16) "Licensing agency" means the secretary of aging.(17) "Skilled nursing home" means a nursing facility.

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

10 (19) "Apartment" means a private unit which includes, but is not 11 limited to, a toilet room with bathing facilities, a kitchen, sleeping, living 12 and storage area and a lockable door.

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

16 (21) "Operator" means an individual who operates an assisted living facility or residential health care facility with fewer than 61 residents, a 17 18 home plus or adult day care facility and has completed a course approved 19 by the secretary of health and environment on principles of assisted living 20 and has successfully passed an examination approved by the secretary of 21 health and environment on principles of assisted living and such other 22 requirements as may be established by the secretary of health and 23 environment by rules and regulations.

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

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

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

33 (25) "Kitchen" means a food preparation area that includes a sink,
34 refrigerator and a microwave oven or stove.

(26) The term "intermediate personal care home" for purposes of
 those individuals applying for or receiving veterans' benefits means
 residential health care facility.

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

1 or licensed practical nurse.

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

6 (b) The term "adult care home" shall not include institutions operated 7 by federal or state governments, except institutions operated by the Kansas 8 commission on veterans affairs, hospitals or institutions for the treatment 9 and care of psychiatric patients, child care facilities, maternity centers, 10 hotels, offices of physicians or hospices which are certified to participate in the medicare program under 42 code of federal regulations, chapter IV, 11 section 418.1 et seq., and amendments thereto, and which provide services 12 13 only to hospice patients.

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

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

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

(f) The licensing agency may by rule and regulation change the name of the different classes of homes when necessary to avoid confusion in terminology and the agency may further amend, substitute, change and in a manner consistent with the definitions established in this section, further define and identify the specific acts and services which shall fall within the respective categories of facilities so long as the above categories for adult care homes are used as guidelines to define and identify the specific acts.

Sec. 4. K.S.A. 2013 Supp. 39-1401 is hereby amended to read as follows: 39-1401. As used in this act:

37 (a) "Resident" means:

38 (1) Any resident, as defined by K.S.A. 39-923, and amendments39 thereto; or

40 (2) any individual kept, cared for, treated, boarded or otherwise 41 accommodated in a medical care facility; or

42 (3) any individual, kept, cared for, treated, boarded or otherwise 43 accommodated in a state psychiatric hospital or state institution for people 1 with intellectual disability.

(b) "Adult care home" has the meaning ascribed thereto in K.S.A. 39-2 3 923, and amendments thereto.

(c) "In need of protective services" means that a resident is unable to 4 5 perform or obtain services which are necessary to maintain physical or 6 mental health, or both.

7 "Services which are necessary to maintain physical and mental (d) 8 health" include, but are not limited to, the provision of medical care for 9 physical and mental health needs, the relocation of a resident to a facility or institution able to offer such care, assistance in personal hygiene, food, 10 clothing, adequately heated and ventilated shelter, protection from health 11 12 and safety hazards, protection from maltreatment the result of which 13 includes, but is not limited to, malnutrition, deprivation of necessities or physical punishment and transportation necessary to secure any of the 14 15 above stated needs, except that this term shall not include taking such 16 person into custody without consent, except as provided in this act.

17 (e) "Protective services" means services provided by the state or other governmental agency or any private organizations or individuals which are 18 19 necessary to prevent abuse, neglect or exploitation. Such protective 20 services shall include, but not be limited to, evaluation of the need for 21 services, assistance in obtaining appropriate social services and assistance 22 in securing medical and legal services.

23 (f) "Abuse" means any act or failure to act performed intentionally or 24 recklessly that causes or is likely to cause harm to a resident, including:

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(1) Infliction of physical or mental injury;

(2) any sexual act with a resident when the resident does not consent 26 27 or when the other person knows or should know that the resident is 28 incapable of resisting or declining consent to the sexual act due to mental 29 deficiency or disease or due to fear of retribution or hardship;

30 (3) unreasonable use of a physical restraint, isolation or medication 31 that harms or is likely to harm a resident;

32 (4) unreasonable use of a physical or chemical restraint, medication 33 or isolation as punishment, for convenience, in conflict with a physician's 34 or advanced practice registered nurse's orders or as a substitute for 35 treatment, except where such conduct or physical restraint is in furtherance 36 of the health and safety of the resident or another resident;

37 (5) a threat or menacing conduct directed toward a resident that 38 results or might reasonably be expected to result in fear or emotional or 39 mental distress to a resident; 40

(6) fiduciary abuse; or

41 (7) omission or deprivation by a caretaker or another person of goods 42 or services which are necessary to avoid physical or mental harm or 43 illness.

1 (g) "Neglect" means the failure or omission by one's self, caretaker or 2 another person with a duty to provide goods or services which are 3 reasonably necessary to ensure safety and well-being and to avoid physical 4 or mental harm or illness.

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

8 (i) "Exploitation" means misappropriation of resident property or 9 intentionally taking unfair advantage of an adult's physical or financial 10 resources for another individual's personal or financial advantage by the 11 use of undue influence, coercion, harassment, duress, deception, false 12 representation or false pretense by a caretaker or another person.

(j) "Medical care facility" means a facility licensed under K.S.A. 65 425 et seq., and amendments thereto, but shall not include, for purposes of
 this act, a state psychiatric hospital or state institution for people with
 intellectual disability, including Larned state hospital, Osawatomie state
 hospital and Rainbow mental health facility, Kansas neurological institute
 and Parsons state hospital and training center.

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

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

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

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

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

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

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

41 (r) "Governmental assistance provider" means an agency, or 42 employee of such agency, which is funded solely or in part to provide 43 assistance within the Kansas senior care act, K.S.A. 75-5926 et seq., and 1 amendments thereto, including medicaid and medicare.

2 No person shall be considered to be abused, neglected or exploited or 3 in need of protective services for the sole reason that such person relies 4 upon spiritual means through prayer alone for treatment in accordance 5 with the tenets and practices of a recognized church or religious 6 denomination in lieu of medical treatment.

7 Sec. 5. K.S.A. 2013 Supp. 39-1430 is hereby amended to read as 8 follows: 39-1430. As used in this act:

9 (a) "Adult" means an individual 18 years of age or older alleged to be 10 unable to protect their own interest and who is harmed or threatened with harm, whether financial, mental or physical in nature, through action or 11 inaction by either another individual or through their own action or 12 13 inaction when: (1) Such person is residing in such person's own home, the home of a family member or the home of a friend₅; (2) such person resides 14 in an adult family home as defined in K.S.A. 39-1501, and amendments 15 16 thereto;; or (3) such person is receiving services through a provider of 17 community services and affiliates thereof operated or funded by the 18 department of social and rehabilitation services or the department on aging 19 Kansas department for children and families or the Kansas department for 20 aging and disability services or a residential facility licensed pursuant to 21 K.S.A. 75-3307b, and amendments thereto. Such term shall not include 22 persons to whom K.S.A. 39-1401 et seq., and amendments thereto, apply.

23 (b) "Abuse" means any act or failure to act performed intentionally or 24 recklessly that causes or is likely to cause harm to an adult, including:

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(1) Infliction of physical or mental injury;

(2) any sexual act with an adult when the adult does not consent or 26 27 when the other person knows or should know that the adult is incapable of 28 resisting or declining consent to the sexual act due to mental deficiency or 29 disease or due to fear of retribution or hardship;

30 (3) unreasonable use of a physical restraint, isolation or medication 31 that harms or is likely to harm an adult;

(4) unreasonable use of a physical or chemical restraint, medication 32 33 or isolation as punishment, for convenience, in conflict with a physician's 34 or advanced practice registered nurse's orders or as a substitute for 35 treatment, except where such conduct or physical restraint is in furtherance 36 of the health and safety of the adult;

37 (5) a threat or menacing conduct directed toward an adult that results 38 or might reasonably be expected to result in fear or emotional or mental 39 distress to an adult; 40

(6) fiduciary abuse; or

41 (7) omission or deprivation by a caretaker or another person of goods or services which are necessary to avoid physical or mental harm or 42 43 illness.

1 (c) "Neglect" means the failure or omission by one's self, caretaker or 2 another person with a duty to supply or provide goods or services which 3 are reasonably necessary to ensure safety and well-being and to avoid 4 physical or mental harm or illness.

5 (d) "Exploitation" means misappropriation of an adult's property or 6 intentionally taking unfair advantage of an adult's physical or financial 7 resources for another individual's personal or financial advantage by the 8 use of undue influence, coercion, harassment, duress, deception, false 9 representation or false pretense by a caretaker or another person.

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

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

17 (g) "Services which are necessary to maintain physical or mental 18 health or both" include, but are not limited to, the provision of medical 19 care for physical and mental health needs, the relocation of an adult to a facility or institution able to offer such care, assistance in personal 20 21 hygiene, food, clothing, adequately heated and ventilated shelter, 22 protection from health and safety hazards, protection from maltreatment 23 the result of which includes, but is not limited to, malnutrition, deprivation 24 of necessities or physical punishment and transportation necessary to 25 secure any of the above stated needs, except that this term shall not include 26 taking such person into custody without consent except as provided in this 27 act

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

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

(j) "Secretary" means the secretary of social and rehabilitation
 services for the Kansas department for children and families.

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

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

1 crimes or is limited to specific crimes.

(m) "Involved adult" means the adult who is the subject of a report of 2 3 abuse, neglect or exploitation under this act.

(n) "Legal representative," "financial institution" and "governmental 4 assistance provider" shall have the meanings ascribed thereto in K.S.A. 5 6 39-1401, and amendments thereto.

7 No person shall be considered to be abused, neglected or exploited or 8 in need of protective services for the sole reason that such person relies upon spiritual means through prayer alone for treatment in accordance 9 with the tenets and practices of a recognized church or religious 10 denomination in lieu of medical treatment 11

Sec. 6. K.S.A. 2013 Supp. 39-1504 is hereby amended to read as 12 13 follows: 39-1504. The secretary shall administer the adult family home registration program in accordance with the following requirements: 14

(a) (1) The home shall meet health standards and safety regulations of 15 16 the community and the provisions of chapter 20 of the national fire 17 protection association, life safety code, pamphlet no. 101, 1981 edition.

18 (2) The home shall have a written plan to get persons out of the home 19 rapidly in case of fire, tornado or other emergency. 20

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

21 (4) The home shall have adequate living and sleeping space for 22 clients.

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

24 (6) Electric fans shall be made available to reduce the temperature if there is no air conditioning. Rooms shall be heated, lighted, ventilated and 25 26 available

27 28 (7) Sleeping rooms shall have space for personal items.

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

29 (9) Lavatory and toilet facilities shall be accessible, available and in 30 working order.

31 (10) The kitchen shall be clean with appliances in good working 32 order.

33 (b) (1) A healthy and safe environment shall be maintained for 34 clients.

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

36 (3) The provider may assist a client with the taking of medications 37 when the medication is in a labeled bottle which clearly shows a 38 physician's orders or an advanced practice registered nurse's orders and 39 when the client requires assistance because of tremor, visual impairment, 40 or similar reasons due to health conditions. The provider may assist or perform for the client such physical activities which do not require daily 41 supervision such as assistance with eating, bathing and dressing, help with 42 43 brace or walker and transferring from wheelchairs.

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1 (4) There shall be no use of corporal punishment, restraints or 2 punitive measures.

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

4 (6) Meals shall be planned and prepared for adequate nutrition, and 5 for diets if directed by a physician.

6 (c) (1) The provider shall be at least 18 years of age and in good 7 health at the time of initial application for registration. A written statement 8 must be received from a physician, nurse practitioner, or physician 9 assistant stating that the applicant and the members of the applicant's 10 household are free of any infectious or communicable disease or health 11 condition and are physically and mentally healthy. Such statements shall 12 be renewed every two years.

13 (2) The provider shall not be totally dependent on the income from14 the clients for support of the provider or the provider's family.

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

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

(5) The provider is responsible for encouraging the client to seek andutilize available services when needed.

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

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

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

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

(10) The provider shall inform the social worker immediately of anyunscheduled client absence from the home.

40 (11) The provider is responsible for helping clients maintain their 41 clothing.

42 (12) The provider shall furnish or help clients arrange for 43 transportation. 1 (13) The provider shall help a client arrange for emergency and 2 regular medical care when necessary.

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

5 Sec. 7. K.S.A. 40-4602 is hereby amended to read as follows: 40-6 4602. As used in this act:

7 (a) "Emergency medical condition" means the sudden and, at the 8 time, unexpected onset of a health condition that requires immediate 9 medical attention, where failure to provide medical attention would result 10 in serious impairment to bodily functions or serious dysfunction of a 11 bodily organ or part, or would place the person's health in serious jeopardy.

12 (b) "Emergency services" means ambulance services and health care 13 items and services furnished or required to evaluate and treat an 14 emergency medical condition, as directed or ordered by a physician *or an* 15 *advanced practice registered nurse*.

(c) "Health benefit plan" means any hospital or medical expense 16 17 policy, health, hospital or medical service corporation contract, a plan 18 provided by a municipal group-funded pool, a policy or agreement entered 19 into by a health insurer or a health maintenance organization contract 20 offered by an employer or any certificate issued under any such policies, 21 contracts or plans. "Health benefit plan" does not include policies or 22 certificates covering only accident, credit, dental, disability income, long-23 term care, hospital indemnity, medicare supplement, specified disease, vision care, coverage issued as a supplement to liability insurance, 24 25 insurance arising out of a workers compensation or similar law, automobile medical-payment insurance, or insurance under which benefits 26 27 are payable with or without regard to fault and which is statutorily 28 required to be contained in any liability insurance policy or equivalent 29 self-insurance.

(d) "Health insurer" means any insurance company, nonprofit medical
and hospital service corporation, municipal group-funded pool, fraternal
benefit society, health maintenance organization; or any other entity which
offers a health benefit plan subject to the Kansas Statutes Annotated.

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

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

40 (g) "Provider" means a physician, *advanced practice registered* 41 *nurse*, hospital or other person which is licensed, accredited or certified to 42 perform specified health care services.

(h) "Provider network" means those participating providers who have

entered into a contract or agreement with a health insurer to provide items
 or health care services to individuals covered by a health benefit plan
 offered by such health insurer.

4 (i) "Physician" means a person licensed by the state board of healing 5 arts to practice medicine and surgery.

6 Sec. 8. K.S.A. 59-2976 is hereby amended to read as follows: 59-7 2976. (a) Medications and other treatments shall be prescribed, ordered 8 and administered only in conformity with accepted clinical practice. 9 Medication shall be administered only upon the written order of a physician or an advanced practice registered nurse or upon a verbal order 10 noted in the patient's medical records and subsequently signed by the 11 12 physician or an advanced practice registered nurse. The attending physician or an advanced practice registered nurse shall review regularly 13 14 the drug regimen of each patient under the physician's or an advanced 15 practice registered nurse's care and shall monitor any symptoms of 16 harmful side effects. Prescriptions for psychotropic medications shall be 17 written with a termination date not exceeding 30 days thereafter but may 18 be renewed.

19 (b) During the course of treatment the responsible physician-or, 20 advanced practice registered nurse, psychologist or such person's designee 21 shall reasonably consult with the patient, the patient's legal guardian, or a 22 minor patient's parent and give consideration to the views the patient, legal 23 guardian or parent expresses concerning treatment and any alternatives. No medication or other treatment may be administered to any voluntary 24 25 patient without the patient's consent, or the consent of such patient's legal 26 guardian or of such patient's parent if the patient is a minor.

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

30 (d) Whenever any patient is receiving treatment pursuant to K.S.A. 59-2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and 31 32 amendments thereto, and the treatment facility is administering to the 33 patient any medication or other treatment which alters the patient's mental 34 state in such a way as to adversely affect the patient's judgment or hamper 35 the patient in preparing for or participating in any hearing provided for by 36 this act, then two days prior to and during any such hearing, the treatment 37 facility may not administer such medication or other treatment unless such 38 medication or other treatment is necessary to sustain the patient's life or to 39 protect the patient or others. Prior to the hearing, a report of all such medications or other treatment which have been administered to the 40 41 patient, along with a copy of any written consent(s) which the patient may 42 have signed, shall be submitted to the court. Counsel for the patient may 43 preliminarily examine the attending physician regarding the administration

1 of any medication to the patient within two days of the hearing with regard 2 to the affect that medication may have had upon the patient's judgment or 3 ability to prepare for or participate in the hearing. On the basis thereof, if 4 the court determines that medication or other treatment has been 5 administered which adversely affects the patient's judgment or ability to 6 prepare for or participate in the hearing, the court may grant to the patient 7 a reasonable continuance in order to allow for the patient to be better able 8 to prepare for or participate in the hearing and the court shall order that such medication or other treatment be discontinued until the conclusion of 9 10 the hearing, unless the court finds that such medication or other treatment 11 is necessary to sustain the patient's life or to protect the patient or others, in 12 which case the court shall order that the hearing proceed.

13 (e) Whenever a patient receiving treatment pursuant to K.S.A. 59-2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and amendments 14 thereto, objects to taking any medication prescribed for psychiatric 15 16 treatment, and after full explanation of the benefits and risks of such 17 medication continues their objection, the medication may be administered 18 over the patient's objection; except that the objection shall be recorded in 19 the patient's medical record and at the same time written notice thereof 20 shall be forwarded to the medical director of the treatment facility or the 21 director's designee. Within five days after receiving such notice, excluding 22 Saturdays, Sundays and legal holidays, the medical director or designee 23 shall deliver to the patient and the patient's physician the medical director's 24 or designee's written decision concerning the administration of that 25 medication, and a copy of that decision shall be placed in the patient's 26 medical record.

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

Sec. 9. K.S.A. 2013 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.

43 (c) "Mid-level practitioner" means a physician assistant or advanced

practice registered nurse who has entered into a written protocol with a
 rural health network physician.

3 (d) "Advanced practice registered nurse" means an advanced 4 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 5 amendments thereto, and who has authority to prescribe drugs in 6 accordance with K.S.A. 65-1130, and amendments thereto.

7 (e) "Physician" means a person licensed to practice medicine and 8 surgery.

9 "Rural health network" means an alliance of members including (e)(f) 10 at least one critical access hospital and at least one other hospital which has developed a comprehensive plan submitted to and approved by the 11 12 secretary of health and environment regarding patient referral and transfer; 13 the provision of emergency and nonemergency transportation among members; the development of a network-wide emergency services plan; 14 and the development of a plan for sharing patient information and services 15 between hospital members concerning medical staff credentialing, risk 16 17 management, quality assurance and peer review.

18 (f)(g) "Critical access hospital" means a member of a rural health 19 network which makes available twenty-four hour emergency care services; 20 provides not more than 25 acute care inpatient beds or in the case of a 21 facility with an approved swing-bed agreement a combined total of 22 extended care and acute care beds that does not exceed 25 beds; provides 23 acute inpatient care for a period that does not exceed, on an annual average 24 basis, 96 hours per patient; and provides nursing services under the 25 direction of a licensed professional nurse and continuous licensed 26 professional nursing services for not less than 24 hours of every day when 27 any bed is occupied or the facility is open to provide services for patients 28 unless an exemption is granted by the licensing agency pursuant to rules 29 and regulations. The critical access hospital may provide any services 30 otherwise required to be provided by a full-time, on-site dietician, 31 pharmacist, laboratory technician, medical technologist and radiological 32 technologist on a part-time, off-site basis under written agreements or 33 arrangements with one or more providers or suppliers recognized under 34 medicare. The critical access hospital may provide inpatient services by a 35 physician assistant, advanced practice registered nurse or a elinical nurse 36 specialist subject to the oversight of a physician who need not be present 37 in the facility or by an advanced practice registered nurse. In addition to 38 the facility's 25 acute beds or swing beds, or both, the critical access 39 hospital may have a psychiatric unit or a rehabilitation unit, or both. Each 40 unit shall not exceed 10 beds and neither unit will count toward the 25-bed 41 limit, nor will these units be subject to the average 96-hour length of stay 42 restriction.

(g)(h) "Hospital" means a hospital other than a critical access hospital

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1 which has entered into a written agreement with at least one critical access

2 hospital to form a rural health network and to provide medical or
3 administrative supporting services within the limit of the hospital's
4 capabilities.

5 Sec. 10. K.S.A. 2013 Supp. 65-1626 is hereby amended to read as 6 follows: 65-1626. For the purposes of this act:

7 (a) "Administer" means the direct application of a drug, whether by
8 injection, inhalation, ingestion or any other means, to the body of a patient
9 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 presenceof the practitioner; or

(3) a pharmacist as authorized in K.S.A. 65-1635a, and amendmentsthereto.

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

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

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

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

41 (g) "Brand name" means the registered trademark name given to a 42 drug product by its manufacturer, labeler or distributor.

43 (h) "Chain pharmacy warehouse" means a permanent physical

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

5 (i) "Co-licensee" means a pharmaceutical manufacturer that has 6 entered into an agreement with another pharmaceutical manufacturer to 7 engage in a business activity or occupation related to the manufacture or 8 distribution of a prescription drug and the national drug code on the drug 9 product label shall be used to determine the identity of the drug 10 manufacturer.

11 (j) "DEA" means the U.S. department of justice, drug enforcement 12 administration.

(k) "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.

16 (1) "Direct supervision" means the process by which the responsible 17 pharmacist shall observe and direct the activities of a pharmacy student or 18 pharmacy technician to a sufficient degree to assure that all such activities 19 are performed accurately, safely and without risk or harm to patients, and 20 complete the final check before dispensing.

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

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

26 (o) "Distribute" means to deliver, other than by administering or 27 dispensing, any drug.

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

(q) "Drop shipment" means the sale, by a manufacturer, that 29 manufacturer's co-licensee, that manufacturer's third party logistics 30 31 provider, or that manufacturer's exclusive distributor, of the manufacturer's prescription drug, to a wholesale distributor whereby the wholesale 32 33 distributor takes title but not possession of such prescription drug and the 34 wholesale distributor invoices the pharmacy, the chain pharmacy 35 warehouse, or other designated person authorized by law to dispense or 36 administer such prescription drug, and the pharmacy, the chain pharmacy 37 warehouse, or other designated person authorized by law to dispense or 38 administer such prescription drug receives delivery of the prescription 39 drug directly from the manufacturer, that manufacturer's co-licensee, that 40 manufacturer's third party logistics provider, or that manufacturer's 41 exclusive distributor, of such prescription drug. Drop shipment shall be part of the "normal distribution channel." 42

43 (r) "Drug" means: (1) Articles recognized in the official United States

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pharmacopoeia, or other such official compendiums of the United States, 1 2 or official national formulary, or any supplement of any of them; (2) 3 articles intended for use in the diagnosis, cure, mitigation, treatment or 4 prevention of disease in man or other animals; (3) articles, other than food, 5 intended to affect the structure or any function of the body of man or other 6 animals; and (4) articles intended for use as a component of any articles 7 specified in clause (1), (2) or (3) of this subsection; but does not include 8 devices or their components, parts or accessories, except that the term 9 "drug" shall not include amygdalin (laetrile) or any livestock remedy, if 10 such livestock remedy had been registered in accordance with the provisions of article 5 of chapter 47 of the Kansas Statutes Annotated, 11 12 prior to its repeal.

"Durable medical equipment" means technologically sophisticated 13 (s) 14 medical devices that may be used in a residence, including the following: (1) Oxygen and oxygen delivery system; (2) ventilators; (3) respiratory 15 16 disease management devices; (4) continuous positive airway pressure 17 (CPAP) devices; (5) electronic and computerized wheelchairs and seating 18 systems; (6) apnea monitors; (7) transcutaneous electrical nerve stimulator 19 (TENS) units; (8) low air loss cutaneous pressure management devices; (9) 20 sequential compression devices; (10) feeding pumps; (11) home 21 phototherapy devices; (12) infusion delivery devices; (13) distribution of 22 medical gases to end users for human consumption; (14) hospital beds; 23 (15) nebulizers; or (16) other similar equipment determined by the board 24 in rules and regulations adopted by the board.

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

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

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

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

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

(y) "Exclusive distributor" means any entity that: (1) Contracts with a

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1 manufacturer to provide or coordinate warehousing, wholesale distribution 2 or other services on behalf of a manufacturer and who takes title to that 3 manufacturer's prescription drug, but who does not have general 4 responsibility to direct the sale or disposition of the manufacturer's 5 prescription drug; (2) is registered as a wholesale distributor under the 6 pharmacy act of the state of Kansas; and (3) to be considered part of the 7 normal distribution channel, must be an authorized distributor of record.

8 "Facsimile transmission" or "fax transmission" means the (z)transmission of a digital image of a prescription from the prescriber or the 9 prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 10 is not limited to, transmission of a written prescription between the 11 prescriber's fax machine and the pharmacy's fax machine; transmission of 12 an electronically prepared prescription from the prescriber's electronic 13 prescription application to the pharmacy's fax machine, computer or 14 15 printer; or transmission of an electronically prepared prescription from the 16 prescriber's fax machine to the pharmacy's fax machine, computer or 17 printer.

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

20 (bb) (1) "Institutional drug room" means any location where 21 prescription-only drugs are stored and from which prescription-only drugs 22 are administered or dispensed and which is maintained or operated for the 23 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

32 (E) persons receiving inpatient hospice services.

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

34 (A) Any registered pharmacy;

35 (B) any office of a practitioner; or

36 (C) a location where no prescription-only drugs are dispensed and no
 37 prescription-only drugs other than individual prescriptions are stored or
 38 administered.

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

42 (dd) "Intracompany transaction" means any transaction or transfer43 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.

3 (ee) "Medical care facility" shall have the meaning provided in 4 K.S.A. 65-425, and amendments thereto, except that the term shall also 5 include facilities licensed under the provisions of K.S.A. 75-3307b, and 6 amendments thereto, except community mental health centers and 7 facilities for people with intellectual disability.

8 (ff) "Manufacture" means the production, preparation, propagation, 9 compounding, conversion or processing of a drug either directly or indirectly by extraction from substances of natural origin, independently 10 by means of chemical synthesis or by a combination of extraction and 11 12 chemical synthesis and includes any packaging or repackaging of the drug or labeling or relabeling of its container, except that this term shall not 13 14 include the preparation or compounding of a drug by an individual for the 15 individual's own use or the preparation, compounding, packaging or 16 labeling of a drug by:

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

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

(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.

26 (gg) "Manufacturer" means a person licensed or approved by the27 FDA to engage in the manufacture of drugs and devices.

(hh) "Mid-level practitioner" means-an-advanced practice registered 28 29 nurse issued a license pursuant to K.S.A. 65-1131, and amendmentsthereto, who has authority to prescribe drugs pursuant to a written protocol 30 31 with a responsible physician under K.S.A. 65-1130, and amendments-32 thereto, or a physician assistant licensed pursuant to the physician assistant 33 licensure act who has authority to prescribe drugs pursuant to a written 34 protocol with a responsible physician under K.S.A. 65-28a08, and 35 amendments thereto

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

42 (1) A pharmacy to a patient or to other designated persons authorized43 by law to dispense or administer such drug to a patient;

1 (2) a wholesale distributor to a pharmacy to a patient or other 2 designated persons authorized by law to dispense or administer such drug 3 to a patient;

4 (3) a wholesale distributor to a chain pharmacy warehouse to that 5 chain pharmacy warehouse's intracompany pharmacy to a patient or other 6 designated persons authorized by law to dispense or administer such drug 7 to a patient; or

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

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

(kk) "Pharmacist" means any natural person licensed under this act topractice pharmacy.

16 (1) "Pharmacist-in-charge" means the pharmacist who is responsible 17 to the board for a registered establishment's compliance with the laws and regulations of this state pertaining to the practice of pharmacy, 18 19 manufacturing of drugs and the distribution of drugs. The pharmacist-in-20 charge shall supervise such establishment on a full-time or a part-time 21 basis and perform such other duties relating to supervision of a registered 22 establishment as may be prescribed by the board by rules and regulations. 23 Nothing in this definition shall relieve other pharmacists or persons from 24 their responsibility to comply with state and federal laws and regulations.

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

(nn) "Pharmacy," "drugstore" or "apothecary" means premises, 30 31 laboratory, area or other place: (1) Where drugs are offered for sale where 32 the profession of pharmacy is practiced and where prescriptions are 33 compounded and dispensed; or (2) which has displayed upon it or within it 34 the words "pharmacist," "pharmaceutical chemist," "pharmacy," "apothecary," "drugstore," "druggist," "drugs," "drug sundries" or any of 35 36 these words or combinations of these words or words of similar import 37 either in English or any sign containing any of these words; or (3) where 38 the characteristic symbols of pharmacy or the characteristic prescription 39 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 40 by the licensee in the conduct of the business registered by the board at the 41 42 address for which the registration was issued.

43 (oo) "Pharmacy prescription application" means software that is used

to process prescription information, is installed on a pharmacy's computers
 or servers, and is controlled by the pharmacy.

3 (pp) "Pharmacy technician" means an individual who, under the 4 direct supervision and control of a pharmacist, may perform packaging, 5 manipulative, repetitive or other nondiscretionary tasks related to the 6 processing of a prescription or medication order and who assists the 7 pharmacist in the performance of pharmacy related duties, but who does 8 not perform duties restricted to a pharmacist.

9 (qq) "Practitioner" means a person licensed to practice medicine and 10 surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 11 12 amendments thereto, and who has authority to prescribe drugs in accordance with K.S.A. 65-1130, and amendments thereto, or scientific 13 investigator or other person authorized by law to use a prescription-only 14 drug in teaching or chemical analysis or to conduct research with respect 15 16 to a prescription-only drug.

(rr) "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.

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

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

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

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

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

43 (xx) "Professional incompetency" means:

1 (1) One or more instances involving failure to adhere to the 2 applicable standard of pharmaceutical care to a degree which constitutes 3 gross negligence, as determined by the board;

4 5 6 (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

7 (3) a pattern of pharmacy practice or other behavior which 8 demonstrates a manifest incapacity or incompetence to practice pharmacy.

9 (yy) "Readily retrievable" means that records kept by automatic data 10 processing applications or other electronic or mechanized record-keeping 11 systems can be separated out from all other records within a reasonable 12 time not to exceed 48 hours of a request from the board or other authorized 13 agent or that hard-copy records are kept on which certain items are 14 asterisked, redlined or in some other manner visually identifiable apart 15 from other items appearing on the records.

16 (zz) "Retail dealer" means a person selling at retail nonprescription 17 drugs which are prepackaged, fully prepared by the manufacturer or 18 distributor for use by the consumer and labeled in accordance with the 19 requirements of the state and federal food, drug and cosmetic acts. Such 20 nonprescription drugs shall not include: (1) A controlled substance; (2) a 21 prescription-only drug; or (3) a drug intended for human use by 22 hypodermic injection.

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

(bbb) "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.

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(ccc) "Unprofessional conduct" means:(1) Fraud in securing a registration or permit;

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(1) Fraud in securing a registration of perint, (2) intentional adulteration or mislabeling of any drug, medicine,

34 chemical or poison;

35 (3) causing any drug, medicine, chemical or poison to be adulterated 36 or mislabeled, knowing the same to be adulterated or mislabeled;

(4) intentionally falsifying or altering records or prescriptions;

38 (5) unlawful possession of drugs and unlawful diversion of drugs to39 others;

40 (6) willful betrayal of confidential information under K.S.A. 65-1654, 41 and amendments thereto;

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

43 (8) making a false or misleading statement regarding the licensee's

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1 professional practice or the efficacy or value of a drug;

2 (9) commission of any act of sexual abuse, misconduct or 3 exploitation related to the licensee's professional practice; or

4 (10) performing unnecessary tests, examinations or services which 5 have no legitimate pharmaceutical purpose.

6 (ddd) "Vaccination protocol" means a written protocol, agreed to by a 7 pharmacist and a person licensed to practice medicine and surgery by the 8 state board of healing arts, which establishes procedures and 9 recordkeeping and reporting requirements for administering a vaccine by 10 the pharmacist for a period of time specified therein, not to exceed two 11 years.

12 (eee) "Valid prescription order" means a prescription that is issued for 13 a legitimate medical purpose by an individual prescriber licensed by law to 14 administer and prescribe drugs and acting in the usual course of such 15 prescriber's professional practice. A prescription issued solely on the basis 16 of an internet-based questionnaire or consultation without an appropriate 17 prescriber-patient relationship is not a valid prescription order.

18 (fff) "Veterinary medical teaching hospital pharmacy" means any 19 location where prescription-only drugs are stored as part of an accredited 20 college of veterinary medicine and from which prescription-only drugs are 21 distributed for use in treatment of or administration to a nonhuman.

22 "Wholesale distributor" means any person engaged in (ggg) 23 wholesale distribution of prescription drugs or devices in or into the state, 24 including, but not limited to, manufacturers, repackagers, own-label 25 distributors, private-label distributors, jobbers, brokers, warehouses, including manufacturers' and distributors' warehouses, co-licensees, 26 exclusive distributors, third party logistics providers, chain pharmacy 27 28 warehouses that conduct wholesale distributions, and wholesale drug 29 warehouses, independent wholesale drug traders and retail pharmacies that conduct wholesale distributions. Wholesale distributor shall not include 30 31 persons engaged in the sale of durable medical equipment to consumers or 32 patients.

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

40 (1) The sale, purchase or trade of a prescription drug or device, an 41 offer to sell, purchase or trade a prescription drug or device or the 42 dispensing of a prescription drug or device pursuant to a prescription;

43 (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 (3) intracompany transactions, as defined in this section, unless in 4 violation of own use provisions;

5 (4) the sale, purchase or trade of a prescription drug or device or an 6 offer to sell, purchase or trade a prescription drug or device among 7 hospitals, chain pharmacy warehouses, pharmacies or other health care 8 entities that are under common control;

9 (5) the sale, purchase or trade of a prescription drug or device or the 10 offer to sell, purchase or trade a prescription drug or device by a charitable 11 organization described in 503(c)(3) of the internal revenue code of 1954 to 12 a nonprofit affiliate of the organization to the extent otherwise permitted 13 by law;

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

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

(8) the sale, purchase or trade of blood and blood componentsintended for transfusion;

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

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

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

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

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

41 Sec. 11. K.S.A. 65-1660 is hereby amended to read as follows: 65-42 1660. (a) Except as otherwise provided in this section, the provisions of 43 the pharmacy act of the state of Kansas shall not apply to dialysates, devices or drugs which are designated by the board for the purposes of this
 section relating to treatment of a person with chronic kidney failure
 receiving dialysis and which are prescribed or ordered by a physician, *an advanced practice registered nurse* or a mid-level practitioner for
 administration or delivery to a person with chronic kidney failure if:

6 (1) The wholesale distributor is registered with the board and 7 lawfully holds the drug or device; and

8 (2) the wholesale distributor: (A) Delivers the drug or device to: (i) A 9 person with chronic kidney failure for self-administration at the person's 10 home or specified address; (ii) a physician for administration or delivery to 11 a person with chronic kidney failure; or (iii) a medicare approved renal 12 dialysis facility for administering or delivering to a person with chronic 13 kidney failure; and (B) has sufficient and qualified supervision to 14 adequately protect the public health.

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

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

(d) As used in this section, "physician" means a person licensed to 20 practice medicine and surgery; "mid-level practitioner" means mid-level 21 22 practitioner as such term is defined-in subsection (ii) of by K.S.A. 65-23 1626, and amendments thereto; "advanced practice registered nurse" 24 means an advanced practice registered nurse who is licensed pursuant to 25 K.S.A. 65-1131, and amendments thereto, and who has authority to prescribe drugs in accordance with K.S.A. 65-1130, and amendments 26 27 thereto.

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

30 Sec. 12. K.S.A. 2013 Supp. 65-1682 is hereby amended to read as 31 follows: 65-1682. As used in this act, unless the context otherwise 32 requires:

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

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

37 (1) A licensed hospital pharmacy that distributes such substances for38 the purpose of inpatient hospital care;

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

42 (3) a registered wholesale distributor of such substances;

43 (4) a veterinarian licensed by the Kansas board of veterinary

examiners who dispenses or prescribes a scheduled substance or drug of
 concern; or

3 (5) a practitioner who has been exempted from the reporting 4 requirements of this act in rules and regulations promulgated by the board.

5 (c) "Drug of concern" means any drug that demonstrates a potential 6 for abuse and is designated as a drug of concern in rules and regulations 7 promulgated by the board.

8 (d) "Patient" means the person who is the ultimate user of a drug for 9 whom a prescription is issued or for whom a drug is dispensed, or both.

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

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

(g) "Scheduled substance" means controlled substances included in
schedules II, III or IV of the schedules designated in K.S.A. 65-4107, 654109 and 65-4111, and amendments thereto, respectively, or the federal
controlled substances act (21 U.S.C. § 812).

22 Sec. 13. K.S.A. 2013 Supp. 65-2837a is hereby amended to read as 23 follows: 65-2837a. (a) It shall be unlawful for any person licensed to 24 practice medicine and surgery to prescribe, order, dispense, administer, 25 sell, supply or give or for any person licensed as an advanced practice registered nurse or for a mid-level practitioner as defined in subsection (ii) 26 27 of by K.S.A. 65-1626, and amendments thereto, to prescribe, administer, 28 supply or give any amphetamine or sympathomimetic amine designated in 29 schedule II, III or IV under the uniform controlled substances act, except 30 as provided in this section. Failure to comply with this section by a 31 licensee shall constitute unprofessional conduct under K.S.A. 65-2837, 32 and amendments thereto.

33 (b) When any licensee prescribes, orders, dispenses, administers, 34 sells, supplies or gives or when any advanced practice registered nurse or 35 any mid-level practitioner as defined-in subsection (ii) of by K.S.A. 65-36 1626, and amendments thereto, prescribes, administers, sells, supplies or 37 gives any amphetamine or sympathomimetic amine designated in schedule 38 II, III or IV under the uniform controlled substances act, the patient's 39 medical record shall adequately document the purpose for which the drug 40 is being given. Such purpose shall be restricted to one or more of the 41 following:

(1) The treatment of narcolepsy.

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43 (2) The treatment of drug-induced brain dysfunction.

- (3) The treatment of hyperkinesis.
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The differential diagnostic psychiatric evaluation of depression. (4)

3 (5) The treatment of depression shown by adequate medical records 4 and documentation to be unresponsive to other forms of treatment.

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(6) The clinical investigation of the effects of such drugs or 6 compounds, in which case, before the investigation is begun, the licensee 7 shall, in addition to other requirements of applicable laws, apply for and 8 obtain approval of the investigation from the board of healing arts.

9 (7) The treatment of obesity with controlled substances, as may be defined by rules and regulations adopted by the board of healing arts. 10

(8) The treatment of any other disorder or disease for which such 11 12 drugs or compounds have been found to be safe and effective by competent scientific research which findings have been generally accepted 13 by the scientific community, in which case, the licensee, before 14 prescribing, ordering, dispensing, administering, selling, supplying or 15 16 giving the drug or compound for a particular condition, or the licensee before authorizing a mid-level practitioner to prescribe the drug or 17 compound for a particular condition, or the advanced practice registered 18 19 nurse before prescribing, ordering, administering or giving the drug for a 20 particular condition, shall obtain a determination from the board of 21 healing arts that the drug or compound can be used for that particular 22 condition.

23 Sec. 14. K.S.A. 65-2892 is hereby amended to read as follows: 65-24 2892. Any physician or advanced practice registered nurse, upon 25 consultation by any person under-eighteen (18) 18 years of age as a patient, may, with the consent of such person who is hereby granted the 26 27 right of giving such consent, make a diagnostic examination for venereal 28 disease and prescribe for and treat such person for venereal disease, including prophylactic treatment for exposure to venereal disease 29 whenever such person is suspected of having a venereal disease or contact 30 31 with anyone having a venereal disease. All such examinations and 32 treatment may be performed without the consent of, or notification to, the 33 parent, parents, guardian or any other person having custody of such 34 person. Any physician or advanced practice registered nurse examining or 35 treating such person for venereal disease may, but shall not be obligated to, 36 in accord with his opinion of what will be most beneficial for such person, 37 inform the spouse, parent, custodian, guardian or fiance of such person as 38 to the treatment given or needed without the consent of such person. Such 39 informing shall not constitute libel or slander or a violation of the right of privacy or privilege or otherwise subject the physician or advanced 40 41 practice registered nurse to any liability whatsoever. In any such case, the physician or advanced practice registered nurse shall incur no civil or 42 43 criminal liability by reason of having made such diagnostic examination or

rendered such treatment, but such immunity shall not apply to any
 negligent acts or omissions. The physician *or advanced practice registered nurse* shall incur no civil or criminal liability by reason of any adverse
 reaction to medication administered, provided reasonable care has been
 taken to elicit from such person under <u>eighteen (18)</u> 18 years of age any
 history of sensitivity or previous adverse reaction to the medication.

7 Sec. 15. K.S.A. 2013 Supp. 65-2921 is hereby amended to read as 8 follows: 65-2921. (a) Except as otherwise provided in subsection (d), a 9 physical therapist may evaluate and initiate physical therapy treatment on 10 a patient without referral from a licensed health care practitioner. If treating a patient without a referral from a licensed health care practitioner 11 12 and the patient is not progressing toward documented treatment goals as 13 demonstrated by objective, measurable or functional improvement, or any 14 combination thereof, after 10 patient visits or in a period of 15 business 15 days from the initial treatment visits following the initial evaluation visit, 16 the physical therapist shall obtain a referral from an appropriate licensed 17 health care practitioner prior to continuing treatment.

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

(c) 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).

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

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

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

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

1 Sec. 16. K.S.A. 2013 Supp. 65-4101 is hereby amended to read as 2 follows: 65-4101. As used in this act: (a) "Administer" means the direct 3 application of a controlled substance, whether by injection, inhalation, 4 ingestion or any other means, to the body of a patient or research subject 5 by:

6 (1) A practitioner or pursuant to the lawful direction of a practitioner; 7 or

8 (2) the patient or research subject at the direction and in the presence 9 of the practitioner.

10 (b) "Agent" means an authorized person who acts on behalf of or at 11 the direction of a manufacturer, distributor or dispenser. It does not include 12 a common carrier, public warehouseman or employee of the carrier or 13 warehouseman.

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

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

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

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

24 (g) (1) "Controlled substance analog" means a substance that is 25 intended for human consumption, and:

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

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

(C) with respect to a particular individual, which such 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.

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

42 (A) A controlled substance;

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

1 or

2 (C) a substance with respect to which an exemption is in effect for 3 investigational use by a particular person under section 505 of the federal 4 food, drug and cosmetic act, 21 U.S.C. § 355, to the extent conduct with 5 respect to the substance is permitted by the exemption.

6 (h) "Counterfeit substance" means a controlled substance which, or 7 the container or labeling of which, without authorization bears the 8 trademark, trade name or other identifying mark, imprint, number or 9 device or any likeness thereof of a manufacturer, distributor or dispenser 10 other than the person who in fact manufactured, distributed or dispensed 11 the substance.

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

14 (j) "DEA" means the U.S. department of justice, drug enforcement 15 administration.

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

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

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

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

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

28 "Drug" means: (1) Substances recognized as drugs in the official (p) 29 United States pharmacopoeia, official homeopathic pharmacopoeia of the United States or official national formulary or any supplement to any of 30 31 them; (2) substances intended for use in the diagnosis, cure, mitigation, 32 treatment or prevention of disease in man or animals; (3) substances (other 33 than food) intended to affect the structure or any function of the body of 34 man or animals; and (4) substances intended for use as a component of any 35 article specified in clause (1), (2) or (3) of this subsection. It does not 36 include devices or their components, parts or accessories.

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

(r) "Electronic prescription" means an electronically prepared

prescription that is authorized and transmitted from the prescriber to the
 pharmacy by means of electronic transmission.

3 (s) "Electronic prescription application" means software that is used 4 to create electronic prescriptions and that is intended to be installed on the 5 prescriber's computers and servers where access and records are controlled 6 by the prescriber.

7 (t) "Electronic signature" means a confidential personalized digital 8 key, code, number or other method for secure electronic data transmissions 9 which identifies a particular person as the source of the message, 10 authenticates the signatory of the message and indicates the person's 11 approval of the information contained in the transmission.

12 (u) "Electronic transmission" means the transmission of an electronic 13 prescription, formatted as an electronic data file, from a prescriber's 14 electronic prescription application to a pharmacy's computer, where the 15 data file is imported into the pharmacy prescription application.

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

"Facsimile transmission" or "fax transmission" means the 18 (w) transmission of a digital image of a prescription from the prescriber or the 19 prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 20 21 is not limited to, transmission of a written prescription between the 22 prescriber's fax machine and the pharmacy's fax machine; transmission of 23 an electronically prepared prescription from the prescriber's electronic 24 prescription application to the pharmacy's fax machine, computer or 25 printer; or transmission of an electronically prepared prescription from the prescriber's fax machine to the pharmacy's fax machine, computer or 26 27 printer.

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

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

(z) "Manufacture" means the production, preparation, propagation, 32 33 compounding, conversion or processing of a controlled substance either 34 directly or indirectly or by extraction from substances of natural origin or 35 independently by means of chemical synthesis or by a combination of 36 extraction and chemical synthesis and includes any packaging or 37 repackaging of the substance or labeling or relabeling of its container, 38 except that this term does not include the preparation or compounding of a 39 controlled substance by an individual for the individual's own lawful use 40 or the preparation, compounding, packaging or labeling of a controlled 41 substance.

42 (1) By a practitioner or the practitioner's agent pursuant to a lawful 43 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

3 (2) by a practitioner or by the practitioner's authorized agent under 4 such practitioner's supervision for the purpose of or as an incident to 5 research, teaching or chemical analysis or by a pharmacist or medical care 6 facility as an incident to dispensing of a controlled substance.

7 (aa) "Marijuana" means all parts of all varieties of the plant Cannabis whether growing or not, the seeds thereof, the resin extracted from any 8 part of the plant and every compound, manufacture, salt, derivative, 9 mixture or preparation of the plant, its seeds or resin. It does not include 10 the mature stalks of the plant, fiber produced from the stalks, oil or cake 11 made from the seeds of the plant, any other compound, manufacture, salt, 12 derivative, mixture or preparation of the mature stalks, except the resin 13 extracted therefrom, fiber, oil, or cake or the sterilized seed of the plant 14 15 which is incapable of germination.

16 (bb) "Medical care facility" shall have the meaning ascribed to that 17 term in K.S.A. 65-425, and amendments thereto.

18 (cc) "Mid-level practitioner" means-an-advanced practice registered-19 nurse issued a license pursuant to K.S.A. 65-1131, and amendments-20 thereto, who has authority to prescribe drugs pursuant to a written protocol 21 with a responsible physician under K.S.A. 65-1130, and amendments-22 thereto, or a physician assistant licensed under the physician assistant 23 licensure act who has authority to prescribe drugs pursuant to a written 24 protocol with a responsible physician under K.S.A. 65-28a08, and 25 amendments thereto.

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

30 (1) Opium and opiate and any salt, compound, derivative or31 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 paragraph (1) but not including the isoquinoline
alkaloids of opium;

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(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.

42 (ee) "Opiate" means any substance having an addiction-forming or 43 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.

6 (ff) "Opium poppy" means the plant of the species Papaver 7 somniferum l. except its seeds.

8 (gg) "Person" means an individual, corporation, government, or 9 governmental subdivision or agency, business trust, estate, trust, 10 partnership or association or any other legal entity.

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

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

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

(kk) "Poppy straw" means all parts, except the seeds, of the opiumpoppy, after mowing.

24 (1) "Practitioner" means a person licensed to practice medicine and 25 surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 26 amendments thereto, and who has authority to prescribe drugs in 27 28 accordance with K.S.A. 65-1130, and amendments thereto, or scientific 29 investigator or other person authorized by law to use a controlled substance in teaching or chemical analysis or to conduct research with 30 31 respect to a controlled substance.

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

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

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

42 (pp) "Ultimate user" means a person who lawfully possesses a 43 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.

Sec. 17. K.S.A. 2013 Supp. 65-4116 is hereby amended to read as follows: 65-4116. (a) Every person who manufactures, distributes or dispenses any controlled substance within this state or who proposes to engage in the manufacture, distribution or dispensing of any controlled substance within this state shall obtain annually a registration issued by the board in accordance with the uniform controlled substances act and with rules and regulations adopted by the board.

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

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

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

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

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

(4) persons licensed and registered by the board under the provisions 26 27 of the acts contained in article 16 of chapter 65 of the Kansas Statutes 28 Annotated, and amendments thereto, to manufacture, dispense or distribute 29 drugs are considered to be in compliance with the registration provision of the uniform controlled substances act without additional proceedings 30 31 before the board or the payment of additional fees, except that 32 manufacturers and distributors shall complete and file the application form required under the uniform controlled substances act; 33

34 (5) any person licensed by the state board of healing arts under the35 Kansas healing arts act;

- 36
- (6) any person licensed by the state board of veterinary examiners;(7) any person licensed by the Kansas dental board;
- 37 38
- (8) a mid-level practitioner; and

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

arrested, charged or convicted of criminal offenses or in the state security
 hospital; and

3 (10) any person licensed as an advanced practice registered nurse 4 under K.S.A. 65-1131, and amendments thereto, and who has authority to 5 prescribe drugs in accordance with K.S.A. 65-1130, and amendments 6 thereto.

7 (d) (1) The board may waive by rules and regulations the requirement 8 for registration of certain manufacturers, distributors or dispensers if the 9 board finds it consistent with the public health and safety, except that 10 licensure of any person by the state board of healing arts to practice any branch of the healing arts, Kansas dental board-or, the state board of 11 12 veterinary examiners or the board of nursing of advanced practice registered nurses shall constitute compliance with the registration 13 requirements of the uniform controlled substances act by such person for 14 15 such person's place of professional practice.

16 (2) Evidence of abuse as determined by the board relating to a person 17 licensed by the state board of healing arts shall be submitted to the state 18 board of healing arts and the attorney general within 60 days. The state 19 board of healing arts shall, within 60 days, make findings of fact and take 20 such action against such person as it deems necessary. All findings of fact 21 and any action taken shall be reported by the state board of healing arts to 22 the board of pharmacy and the attorney general.

23 (3) Evidence of abuse as determined by the board relating to a person 24 licensed by the state board of veterinary examiners shall be submitted to 25 the state board of veterinary examiners and the attorney general within 60 days. The state board of veterinary examiners shall, within 60 days, make 26 27 findings of fact and take such action against such person as it deems 28 necessary. All findings of fact and any action taken shall be reported by the 29 state board of veterinary examiners to the board of pharmacy and the 30 attorney general.

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

(5) Evidence of abuse as determined by the board relating to an advanced practice registered nurse licensed by the board of nursing shall be submitted to the board of nursing and the attorney general within 60 days. The board of nursing shall, within 60 days, make findings of fact and take such action against such advanced practice registered nurse as it deems necessary. All findings of fact and any action taken shall be 1 reported by the board of nursing to the board of pharmacy and the 2 attorney general.

3 (e) A separate annual registration is required at each place of business 4 or professional practice where the applicant manufactures, distributes or 5 dispenses controlled substances.

6 (f) The board may inspect the establishment of a registrant or 7 applicant for registration in accordance with the board's rules and 8 regulations.

9 (g) (1) The registration of any person or location shall terminate when such person or authorized representative of a location dies, ceases legal 10 existence, discontinues business or professional practice or changes the 11 location as shown on the certificate of registration. Any registrant who 12 13 ceases legal existence, discontinues business or professional practice, or changes location as shown on the certificate of registration, shall notify the 14 board promptly of such fact and forthwith deliver the certificate of 15 16 registration directly to the secretary or executive secretary of the board. In 17 the event of a change in name or mailing address the person or authorized representative of the location shall notify the board promptly in advance of 18 19 the effective date of this change by filing the change of name or mailing address with the board. This change shall be noted on the original 20 21 application on file with the board.

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

26 Sec. 18. K.S.A. 65-4134 is hereby amended to read as follows: 65-27 4134. A practitioner engaged in medical practice or research, a 28 practitioner who is an advanced practice registered nurse acting in the usual course of such practitioner's practice or a mid-level practitioner 29 acting in the usual course of such mid-level practitioner's practice is not 30 31 required or compelled to furnish the name or identity of a patient or 32 research subject to the board, nor may such practitioner or mid-level 33 practitioner be compelled in any state or local civil, criminal, 34 administrative, legislative or other proceedings to furnish the name or identity of an individual that the practitioner or mid-level practitioner is 35 36 obligated to keep confidential.

Sec. 19. K.S.A. 2013 Supp. 65-4202 is hereby amended to read as
follows: 65-4202. As used in this act: (a) "Board" means the state board of
nursing.

40 (b) The "practice of mental health technology" means the
41 performance, under the direction of a physician licensed to practice
42 medicine and surgery or registered professional nurse, of services in caring
43 for and treatment of the mentally ill, emotionally disturbed, or people with

1 intellectual disability for compensation or personal profit, which services:

2 (1) Involve responsible nursing and therapeutic procedures for 3 patients with mental illness or intellectual disability requiring interpersonal 4 and technical skills in the observations and recognition of symptoms and 5 reactions of such patients, the accurate recording of such symptoms and 6 reactions and the carrying out of treatments and medications as prescribed 7 by a licensed physician, a licensed advanced practice registered nurse or a 8 mid-level practitioner as defined-in subsection (ii) of by K.S.A. 65-1626, 9 and amendments thereto; and

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

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

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

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

27 Sec. 20. K.S.A. 2013 Supp. 65-5402 is hereby amended to read as 28 follows: 65-5402. As used in K.S.A. 65-5401 to 65-5417, inclusive, and 29 K.S.A. 65-5418 to 65-5420, inclusive, and amendments thereto:

30

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

31 "Practice of occupational therapy" means the therapeutic use of (b) 32 purposeful and meaningful occupations (goal-directed activities) to 33 evaluate and treat, pursuant to the referral, supervision, order or direction 34 of a physician, a licensed podiatrist, a licensed dentist, a licensed physician 35 assistant, or a licensed advanced practice registered nurse-working-36 pursuant to the order or direction of a person licensed to practice medicine 37 and surgery, a licensed chiropractor, or a licensed optometrist, individuals 38 who have a disease or disorder, impairment, activity limitation or 39 participation restriction that interferes with their ability to function 40 independently in daily life roles and to promote health and wellness. 41 Occupational therapy intervention may include:

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

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

4 (3) disability prevention methods and techniques that facilitate the 5 development or safe application of performance skills; and

6 (4) health promotion strategies and practices that enhance 7 performance abilities.

8

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

9 (1) Evaluating, developing, improving, sustaining, or restoring skills 10 in activities of daily living (ADL), work or productive activities, including 11 instrumental activities of daily living (IADL) and play and leisure 12 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;

20 (5) applying physical agent modalities as an adjunct to or in 21 preparation for engagement in occupations;

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

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

26 (8) consulting with groups, programs, organizations or communities27 to provide population-based services.

28 (d) "Occupational therapist" means a person licensed to practice
 29 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, unincorporatedorganization or corporation.

(g) "Physician" means a person licensed to practice medicine andsurgery.

(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.

41 Sec. 21. K.S.A. 2013 Supp. 65-5418 is hereby amended to read as 42 follows: 65-5418. (a) Nothing in the occupational therapy practice act is 43 intended to limit, preclude or otherwise interfere with the practices of other health care providers formally trained and licensed, registered,
 credentialed or certified by appropriate agencies of the state of Kansas.

3 (b) The practice of occupational therapy shall not be construed to 4 include the following:

5 6 (1) Persons rendering assistance in the case of an emergency;

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

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

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

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

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

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

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

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

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

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

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

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

1 (14) physical therapists practicing their profession when licensed and 2 practicing in accordance with K.S.A. 65-2901 et seq., and amendments 3 thereto;

4 (15) physician assistants practicing their profession when licensed 5 and practicing in accordance with the physician assistant licensure act;

6 (16) athletic trainers practicing their profession when licensed and 7 practicing in accordance with the athletic trainers licensure act;

8

(17) manufacturers of prosthetic devices;

9 any person performing occupational therapy services, if these (18)10 services are performed for no more than 45 days in a calendar year in association with an occupational therapist licensed under the occupational 11 12 therapy practice act so long as (A): The person is registered or licensed under the laws of another state which has licensure requirements at least as 13 14 stringent as the licensure requirements of this act₋; or (B) the person meets 15 the requirements for certification as an occupational therapist registered 16 (OTR) or a certified occupational therapy assistant (COTA) established by 17 the national board for certification in occupational therapy (NBCOT).

18 (c) Any patient monitoring, assessment or other procedures designed 19 to evaluate the effectiveness of prescribed occupational therapy must be 20 performed by or pursuant to the delegation of a licensed occupational 21 therapist or other health care provider.

22 (d) Education related therapy services provided by an occupational 23 therapist to school systems or consultation regarding prevention, 24 ergonomics and wellness within the occupational therapy scope of practice 25 shall not require a referral, supervision, order or direction of a physician, an advanced practice registered nurse, a licensed podiatrist, a licensed 26 27 dentist or a licensed optometrist. However, when in the course of 28 providing such services an occupational therapist reasonably believes that 29 an individual may have an underlying injury, illness, disease, disorder or impairment, the occupational therapist shall refer the individual to a 30 31 physician, an advanced practice registered nurse, a licensed podiatrist, a 32 licensed dentist or a licensed optometrist, as appropriate.

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

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

40 Sec. 22. K.S.A. 65-5502 is hereby amended to read as follows: 65-41 5502. As used in K.S.A. 65-5501 to 65-5517, inclusive, and amendments 42 thereto:

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

"Respiratory therapy" is a health care profession whose therapists 1 (b) 2 practice under the supervision of a qualified medical director and with the 3 prescription of a licensed physician or an advanced practice registered 4 *nurse* providing therapy, management, rehabilitation, respiratory 5 assessment and care of patients with deficiencies and abnormalities which 6 affect the pulmonary system and associated other systems functions. The 7 duties which may be performed by a respiratory therapist include:

8 (1) Direct and indirect respiratory therapy services that are safe, 9 aseptic, preventative and restorative to the patient.

10 (2) Direct and indirect respiratory therapy services, including but not 11 limited to, the administration of pharmacological and diagnostic and 12 therapeutic agents related to respiratory therapy procedures to implement a 13 treatment, disease prevention or pulmonary rehabilitative regimen 14 prescribed by a physician *or an advanced practice registered nurse*.

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

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

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

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

(d) "Person" means any individual, partnership, unincorporatedorganization or corporation.

(e) "Physician" means a person who is licensed by the board topractice medicine and surgery.

31 "Oualified medical director" means the medical director of any (f)32 inpatient or outpatient respiratory therapy service, department or home 33 care agency. The medical director shall be a physician who has interest and 34 knowledge in the diagnosis and treatment of respiratory problems. This 35 physician shall be responsible for the quality, safety and appropriateness of 36 the respiratory services provided and require that respiratory therapy be 37 ordered by a physician or an advanced practice registered nurse who has 38 medical responsibility for the patient. The medical director shall be readily 39 accessible to the respiratory therapy practitioner.

40 (g) "Advanced practice registered nurse" means an advanced 41 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 42 amendments thereto, and who has authority to prescribe drugs in 43 accordance with K.S.A. 65-1130, and amendments thereto. 1 Sec. 23. K.S.A. 2013 Supp. 65-6112 is hereby amended to read as 2 follows: 65-6112. As used in this act:

3 (a) "Administrator" means the executive director of the emergency 4 medical services board.

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

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

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

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

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

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

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

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

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

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

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

1 (m) "Emergency medical responder" means a person who holds an 2 emergency medical responder certificate issued pursuant to this act.

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

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

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

9

(q) "Medical director" means a physician.

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

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

(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 tooperate an ambulance service in the state of Kansas.

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

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

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

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

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

42 (bb) "Provider of training" means a corporation, partnership, 43 accredited postsecondary education institution, ambulance service, fire 1 department, hospital or municipality that conducts training programs that 2 include, but are not limited to, initial courses of instruction and continuing

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, coordinate or both, initial courses of instruction for first
responders or emergency medical responders and continuing education as
prescribed by the board.

10 Sec. 24. K.S.A. 2013 Supp. 65-6119 is hereby amended to read as 11 follows: 65-6119. (a) Notwithstanding any other provision of law, mobile 12 intensive care technicians may:

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

15 (2) when voice contact or a telemetered electrocardiogram is 16 monitored by a physician, physician assistant where authorized by a 17 physician, an advanced practice registered nurse where authorized by a 18 physician or licensed professional nurse where authorized by a physician 19 and direct communication is maintained, and upon order of such person 10 may administer such medications or procedures as may be deemed 11 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.

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

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

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

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

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

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

Sec. 25. K.S.A. 2013 Supp. 65-6120 is hereby amended to read as follows: 65-6120. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-intermediate may:

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

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

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

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

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

original application for certification as an advanced emergency medical
 technician under this act.

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

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

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

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

29 (1) Perform any of the activities identified by K.S.A. 65-6121, and30 amendments thereto; and

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

sample; (F) initiation and maintenance of intravenous infusion or saline 1 lock: (G) initiation of intraosseous infusion; (H) nebulized therapy; (I) 2 3 manual defibrillation and cardioversion; (J) cardiac monitoring; (K) 4 electrocardiogram interpretation; (L) administration of generic or trade 5 name medications by one or more of the following methods: (i) 6 Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v) 7 rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix) 8 sublingual.

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

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

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

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

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medical technician transition requirements, an emergency medical

7 following activities: 8 (1) Patient assessment and vital signs; 9 (2) airway maintenance including the use of: (A) Oropharyngeal and nasopharyngeal airways; 10 esophageal obturator airways with or without gastric suction (B) device: 13 (C) multi-lumen airway; and (D) oxygen demand valves. 14 (3) Oxygen therapy; 15 16 (4) oropharyngeal suctioning; (5) cardiopulmonary resuscitation procedures; 17 (6) control accessible bleeding; 19 (7) apply pneumatic anti-shock garment; 20 (8) manage outpatient medical emergencies; (9) extricate patients and utilize lifting and moving techniques; 21 22 (10) manage musculoskeletal and soft tissue injuries including dressing and bandaging wounds or the splinting of fractures, dislocations, sprains or strains: (11) use of backboards to immobilize the spine; (12) administer activated charcoal and glucose; 26 (13) monitor intravenous line delivering intravenous fluids during interfacility transport with the following restrictions: technician. (B) no medications or nutrients have been added to the intravenous fluids: and shut off the flow of intravenous fluid; 35 (14) use automated external defibrillators: (15) administer epinephrine auto-injectors provided that: 36 (A) The emergency medical technician successfully completes a course of instruction approved by the board in the administration of epinephrine: (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

- technician transition course or the emergency medical responder transition 2 course will result in loss of certification. 3 Sec. 26. K.S.A. 2013 Supp. 65-6121 is hereby amended to read as 4 follows: 65-6121. (a) Notwithstanding any other provision of law to the 5 contrary, an emergency medical technician may perform any of the 6
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 - 29 (A) The physician approves the transfer by an emergency medical 30
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 - 33 (C) the emergency medical technician may monitor, maintain and 34

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1 protocols;

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

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

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

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

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

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

(f) Upon transition, notwithstanding any other provision of law to the
contrary, an emergency medical technician may perform any activities
identified in K.S.A. 65-6144, and amendments thereto, and any of the
following interventions, by use of the devices, medications and equipment,
or any combination thereof, after successfully completing an approved
course of instruction, local specialized device training and competency
validation and when authorized by medical protocols, or upon order when

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direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse-when authorized by a physician or a licensed professional nurse when authorized by a physician, upon order of such person:

- (1) Airway maintenance including use of:
- (A) Single lumen airways as approved by the board;
- 8 (B) multi-lumen airways;
- 9 (C) ventilator devices;
- 10 (D) forceps removal of airway obstruction;
- 11 (E) CO2 monitoring;
- 12 (F) airway suctioning;
- 13 (2) apply pneumatic anti-shock garment;
- 14 (3) assist with childbirth;
- 15 (4) monitoring urinary catheter;
- 16 (5) capillary blood sampling;
- 17 (6) cardiac monitoring;
- 18 (7) administration of patient assisted medications as approved by the19 board;

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

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

24 Sec. 27. K.S.A. 2013 Supp. 65-6123 is hereby amended to read as 25 follows: 65-6123. (a) Notwithstanding any other provision of law to the 26 contrary, an emergency medical technician-defibrillator may:

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

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

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

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

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

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

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

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

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

Sec. 28. K.S.A. 2013 Supp. 65-6124 is hereby amended to read as follows: 65-6124. (a) No physician, physician assistant, advanced practice registered nurse or licensed professional nurse, who gives emergency instructions to an attendant as defined by K.S.A. 65-6112, and amendments thereto, during an emergency, shall be liable for any civil damages as a result of issuing the instructions, except such damages which may result from gross negligence in giving such instructions. 1 (b) No attendant as defined by K.S.A. 65-6112, and amendments 2 thereto, who renders emergency care during an emergency pursuant to 3 instructions given by a physician, *an advanced practice registered nurse*,

4 the responsible physician for a physician assistant, advanced practice-5 registered nurse or licensed professional nurse shall be liable for civil 6 damages as a result of implementing such instructions, except such 7 damages which may result from gross negligence or by willful or wanton 8 acts or omissions on the part of such attendant as defined by K.S.A. 65-9 6112, and amendments thereto.

10 (c) No person certified as an instructor-coordinator and no training 11 officer shall be liable for any civil damages which may result from such 12 instructor-coordinator's or training officer's course of instruction, except 13 such damages which may result from gross negligence or by willful or 14 wanton acts or omissions on the part of the instructor-coordinator or 15 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.

20 Sec. 29. K.S.A. 2013 Supp. 65-6144 is hereby amended to read as 21 follows: 65-6144. (a) A first responder may perform any of the following 22 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;

- 26 (2) cardiopulmonary resuscitation and airway management;
- 27 (3) control of bleeding;
 - (4) extremity splinting excluding traction splinting;

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

31 (6) oxygen therapy;

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32 (7) use of oropharyngeal airways;

33 (8) use of bag valve masks;

(9) use automated external defibrillators; and

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

(b) An individual who holds a valid certificate as a first responder, once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to become an emergency medical responder. Alternatively, upon application for renewal of such certificate, such individual shall be deemed to hold a certificate as an emergency medical responder under this act, provided such individual has completed all continuing education hour requirements inclusive of a
 transition course and such individual shall not be required to file an
 original application for certification as an emergency medical responder.

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

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

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

Sec. 30. K.S.A. 2013 Supp. 65-7003 is hereby amended to read as follows: 65-7003. As used in K.S.A. 65-7001 through 65-7015, and amendments thereto:

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

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

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

42 (c) "agent or representative" means a person who is authorized to 43 receive, possess, manufacture or distribute or in any other manner control 2

1 or has access to a regulated chemical on behalf of another person;

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

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

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

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

12 (h) "distribute" means to deliver other than by administering or 13 dispensing a regulated chemical;

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

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

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

(j) "person" means individual, corporation, business trust, estate,
trust, partnership, association, joint venture, government, governmental
subdivision or agency, or any other legal or commercial entity;

(k) "practitioner" means a person licensed to practice medicine and 30 31 surgery, pharmacist, dentist, podiatrist, veterinarian, optometrist, advanced 32 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 33 amendments thereto, and who has authority to prescribe drugs accordance with K.S.A. 65-1130, and amendments thereto, or scientific 34 35 investigator or other person authorized by law to use a controlled 36 substance in teaching or chemical analysis or to conduct research with 37 respect to a controlled substance;

(1) "regulated chemical" means a chemical that is used directly or indirectly to manufacture a controlled substance or other regulated chemical, or is used as a controlled substance analog, in violation of the state controlled substances act or this act. The fact that a chemical may be used for a purpose other than the manufacturing of a controlled substance or regulated chemical does not exempt it from the provisions of this act.

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- 1 Regulated chemical includes:
 - (1) Acetic anhydride (CAS No. 108-24-7);
- 3 (2) benzaldehyde (CAS No. 100-52-7);
- 4 (3) benzyl chloride (CAS No. 100-44-7);
- 5 (4) benzyl cyanide (CAS No. 140-29-4);
 - (5) diethylamine and its salts (CAS No. 109-89-7);
- (6) ephedrine, its salts, optical isomers and salts of optical isomers
 (CAS No. 299-42-3), except products containing ephedra or ma huang,
 which do not contain any chemically synthesized ephedrine alkaloids, and
 are lawfully marketed as dietary supplements under federal law;
 - (7) hydriodic acid (CAS No. 10034-85-2);
- 12 (8) iodine (CAS No. 7553-56-2);
 - (9) lithium (CAS No. 7439-93-2);
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- 14 (10) methylamine and its salts (CAS No. 74-89-5); 15 (11) nitroethane (CAS No. 79-24-3);
- 16 (12) chloroephedrine, its salts, optical isomers, and salts of optical 17 isomers (CAS No. 30572-91-9);
 - (13) phenylacetic acid, its esters and salts (CAS No. 103-82-2);
- (14) phenylpropanolamine, its salts, optical isomers, and salts ofoptical isomers (CAS No. 14838-15-4);
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- (15) piperidine and its salts (CAS No. 110-89-4);
- (16) pseudoephedrine, its salts, optical isomers, and salts of optical
 isomers (CAS No. 90-82-4);
- 24 (17) red phosphorous (CAS No. 7723-14-0);
- 25 (18) sodium (CAS No. 7440-23-5); and
 - (19) thionylchloride (CAS No. 7719-09-7);
- (20) gamma butyrolactone (GBL), including butyrolactone;
 butyrolactone gamma; 4-butyrolactone; 2(3H)-furanone dihydro; dihydro2(3H)-furanone; tetrahydro-2-furanone; 1,2-butanolide; 1,4-butanolide; 4butanolide; gamma-hydroxybutyric acid lactone; 3-hydroxybutyric acid
 lactone and 4-hydroxybutanoic acid lactone; CAS No. 96-48-0; and
- (21) 1,4 butanediol, including butanediol; butane-1,4-diol; 1,4butylene glycol; butylene glycol; 1,4-dihydroxybutane; 1,4-tetramethylene
 glycol; tetramethylene glycol; tetramethylene 1,4-diol; CAS No. 110-63-4;
- (m) "regulated chemical distributor" means any person subject to the
 provisions of the Kansas chemical control act who manufactures or
 distributes a regulated chemical;
- 38 (n) "regulated chemical retailer" means any person who sells
 39 regulated chemicals directly to the public;
- 40 (o) "regulated chemical transaction" means the manufacture of a 41 regulated chemical or the distribution, sale, exchange or other transfer of a 42 regulated chemical within or into the state or from this state into another 43 state; and

(p) "secretary" means the secretary of health and environment.

2 Sec. 31. K.S.A. 2013 Supp. 65-7302 is hereby amended to read as 3 follows: 65-7302. As used in this act:

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

5 (b) "Ionizing radiation" means x-rays, gamma rays, alpha and beta 6 particles, high speed electrons, protons, neutrons and other nuclear 7 particles capable of producing ions directly or indirectly in its passage 8 through matter.

9 (c) "License" means a certificate issued by the board authorizing the 10 licensee to perform radiologic technology procedures on humans for 11 diagnostic or therapeutic purposes.

(d) "Licensed practitioner" means a person licensed to practice
 medicine and surgery, dentistry, podiatry-or, chiropractic or advanced
 practice registered nursing in this state.

15 (e) "Licensure" and "licensing" mean a method of regulation by 16 which the state grants permission to persons who meet predetermined 17 qualifications to engage in a health related occupation or profession.

(f) "Nuclear medicine technologist" means a person who uses radiopharmaceutical agents on humans for diagnostic or therapeutic purposes.

20 (g) "Nuclear medicine technology" means the use of radio nuclides 21 on human beings for diagnostic or therapeutic purposes.

(h) "Radiation therapist" means a person who applies radiation tohumans for therapeutic purposes.

(i) "Radiation therapy" means the use of any radiation procedure or
 article intended for the cure, mitigation or prevention of disease in
 humans.

(j) "Radiographer" means a person who applies radiation to humansfor diagnostic purposes.

(k) "Radiography" means the use of ionizing radiation on humanbeings for diagnostic purposes.

(1) "Radiologic technologist" means any person who is a
 radiographer, radiation therapist or nuclear medicine technologist.

(m) "Radiologic technology" means the use of radioactive substance or equipment emitting or detecting ionizing radiation on humans for diagnostic or therapeutic purposes upon prescription of a licensed practitioner. The term includes the practice of radiography, nuclear medicine technology and radiation therapy, but does not include echocardiography, diagnostic sonography and magnetic resonance imaging.

40 (n) This section shall take effect on and after July 1, 2005.

41 Sec. 32. K.S.A. 2013 Supp. 72-5213 is hereby amended to read as 42 follows: 72-5213. (a) Every board of education shall require all employees 43 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 1 the secretary of health and environment and signed by a person licensed to 2 3 practice medicine and surgery under the laws of any state, or by a person 4 who is licensed as a physician assistant under the laws of this state when 5 such person is working at the direction of or in collaboration with a person 6 licensed to practice medicine and surgery, or by a person holding a license 7 to practice as an advanced practice registered nurse under the laws of this 8 state when such person is working at the direction of or in collaboration 9 with a person licensed to practice medicine and surgery. The certification shall include a statement that there is no evidence of *a* physical condition 10 that would conflict with the health, safety, or welfare of the pupils; and 11 12 that freedom from tuberculosis has been established by chest x-ray or 13 negative tuberculin skin test. If at any time there is reasonable cause to 14 believe that any such employee of the school district is suffering from an 15 illness detrimental to the health of the pupils, the school board may require 16 a new certification of health.

17 (b) Upon presentation of a signed statement by the employee of a 18 school district, to whom the provisions of subsection (a) apply, that the 19 employee is an adherent of a religious denomination whose religious 20 teachings are opposed to physical examinations, the employee shall be 21 permitted to submit, as an alternative to the certification of health required 22 under subsection (a), certification signed by a person licensed to practice 23 medicine and surgery under the laws of any state, or by a person who is 24 licensed as a physician assistant under the laws of this state when such 25 person is working at the direction of or in collaboration with a person 26 licensed to practice medicine and surgery, or by a person holding a license to practice as an advanced practice registered nurse under the laws of this 27 28 state-when such person is working at the direction of or in collaboration 29 with a person licensed to practice medicine and surgery that freedom of the 30 employee from tuberculosis has been established.

31 (c) Every board of education may require persons, other than 32 employees of the school district, to submit to the same certification of 33 health requirements as are imposed upon employees of the school district 34 under the provisions of subsection (a) if such persons perform or provide 35 services to or for a school district which require such persons to come in 36 regular contact with the pupils of the school district. No such person shall 37 be required to submit a certification of health if the person presents a 38 signed statement that the person is an adherent of a religious denomination 39 whose religious teachings are opposed to physical examinations. Such 40 persons shall be permitted to submit, as an alternative to a certification of 41 health, certification signed by a person licensed to practice medicine and 42 surgery under the laws of any state, or by a person who is licensed as a 43 physician assistant under the laws of this state when such person is

working at the direction of or in collaboration with a person licensed to
 practice medicine and surgery, or by a person holding a license to practice
 as an advanced practice registered nurse under the laws of this state when
 such person is working at the direction of or in collaboration with a person
 licensed to practice medicine and surgery that freedom of such persons
 from tuberculosis has been established.

7 (d) The expense of obtaining certifications of health and certifications8 of freedom from tuberculosis may be borne by the board of education.

9 Sec. 33. K.S.A. 2013 Supp. 75-7429 is hereby amended to read as follows: 75-7429. (a) As used in this section, "medical home" means a 10 health care delivery model in which a patient establishes an ongoing 11 12 relationship with a physician or other personal care provider in a 13 physician-directed team, or with an advanced practice registered nurse to provide comprehensive, accessible and continuous evidence-based primary 14 and preventive care, and to coordinate the patient's health care needs 15 16 across the health care system in order to improve quality and health 17 outcomes in a cost effective manner

(b) The department of health and environment shall incorporate theuse of the medical home delivery system within:

(1) The Kansas program of medical assistance established in
accordance with title XIX of the federal social security act, 42 U.S.C. §
1396 et seq., and amendments thereto;

(2) the health benefits program for children established under K.S.A.
38-2001 et seq., and amendments thereto, and developed and submitted in
accordance with federal guidelines established under title XXI of the
federal social security act, section 4901 of public law 105-33, 42 U.S.C. §
1397aa et seq., and amendments thereto; and

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(3) the state mediKan program.

29 (c) The Kansas state employees health care commission established under K.S.A. 75-6502, and amendments thereto, shall incorporate the use 30 31 of a medical home delivery system within the state health care benefits 32 program as provided in K.S.A. 75-6501 through 75-6523, and amendments 33 thereto. Except that compliance with a medical home delivery system shall 34 not be required of program participants receiving treatment in accordance 35 with a religious method of healing pursuant to the provisions of K.S.A. 36 2013 Supp. 75-6501, and amendments thereto.

37Sec. 34.K.S.A. 40-4602, 59-2976, 65-1660, 65-2892, 65-4134 and3865-5502 and K.S.A. 2013 Supp. 39-923, 39-1401, 39-1430, 39-1504, 65-39468, 65-1113, 65-1130, 65-1626, 65-1682, 65-2837a, 65-2921, 65-4101,4065-4116, 65-4202, 65-5402, 65-5418, 65-6112, 65-6119, 65-6120, 65-416121, 65-6123, 65-6124, 65-6144, 65-7003, 65-7302, 72-5213 and 75-7429 are hereby repealed.

43 Sec. 35. This act shall take effect and be in force from and after July

HB 2685

1 1, 2015, and its publication in the statute book.