

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman James Barnett at 1:30 P.M. on January 31, 2007 in Room 231-N of the Capitol.

All members were present except:
Vicki Schmidt- excused

Committee staff present:
Emalene Correll, Kansas Legislative Research Department
Terri Weber, Kansas Legislative Research Department
Jim Wilson, Office of Revisor of Statutes
Nobuko Folmsbee, Office of Revisors of Statutes
Morgan Dreyer, Committee Secretary

Conferees appearing before the committee:
Jerry Slaughter
Derek Hein
Jane Conroy, Nurse Practitioner from Emporia and President of the Kansas State Board of Nursing
Carolyn Middendorf, M.S.N., R.N, Kansas State Nurses Association
Terri Roberts, JD, R.N., Kansas State Nurses Association

Others attending:
See attached list.

Upon calling the meeting to order, Chairman Barnett asked that the Committee review the Minutes for January 25, 2007 for approval at the end of the meeting.

Then Chair then asked the Committee to look at requested materials from Emalene Correll regarding consent forms. A copy of this information is (Attachment 1) attached hereto and incorporated into the Minutes as referenced.

Introduction of Bills

The Chair called upon Jerry Slaughter who introduced a bill proposing an act concerning the Kansas healing arts act; prohibiting billing for anatomic pathology services in certain circumstances. A copy of the draft is (Attachment 2) attached hereto and incorporated into the Minutes as referenced.

The motion was made by Senator Jordan to adopt the introduced bill. It was seconded by Senator Palmer and the motion carried.

Chairman Barnett then called upon Derek Hein who introduced a bill proposing an act concerning radiologic technologists practices act. A copy of the draft is (Attachment 3) attached hereto and incorporated into the Minutes as referenced.

The motion was made by Senator Wagle to adopt the introduced bill. It was seconded by Senator Journey and the motion carried.

Chairman Barnett introduced a bill concerning the age of dependent to be 25. No draft was available at the time of the meeting.

The motion was made by Senator Brungardt to adopt the introduced bill. It was seconded by Senator Jordan and the motion carried.

Chairman Barnett introduced a bill concerning the Kansas Health Policy Authority clean up bill. No draft was available at the time of the meeting.

CONTINUATION SHEET

MINUTES OF THE Senate Public Health and Welfare Committee at 1:30 P.M. on January 31, 2007 in Room 231-N of the Capitol.

The motion was made by Senator Palmer to adopt the introduced bill. It was seconded by Senator Wagle and the motion carried.

Chairman Barnett introduced a bill concerning tobacco prevention and dedication of the April 2008 funds. No draft was available at the time of the meeting.

The motion was made by Senator Brungardt to adopt the introduced bill. It was seconded by Senator Palmer and the motion carried.

Continued Presentation on Kansas Department of Health and Environment Overview

Dr. Howard Rodenberg and Susan Kang from KDHE continued the presentation from the January 25, 2007 meeting. They referred back to the handout from Roderick Bremby in the Committee members folders.

The Chair called upon Emalene Correll to read and explain **SB 104** and **SB 105**. Chairman Barnett then announced that the next order of business was to open the hearing on **SB 104**.

Hearing on SB 104 – An act concerning the board of nursing; membership thereon

The Fiscal Note for SB 104 was available for the Committee to view. A copy of the fiscal note is (Attachment 4) attached hereto and incorporated into the Minutes as referenced.

The Chair then called upon proponent conferee, Jane Conroy, Nurse Practitioner from Emporia and President of Kansas State Board of Nursing who stated, her support of the bill on behalf of the KSBN and that they would fill the vacant position on the Board with a public member who has not been involved in providing health care. A copy of her testimony is (Attachment 5) attached hereto and incorporated into the Minutes as referenced.

No questions came from the Committee.

The Chair then called upon proponent conferee, Carolyn Middendorf, M.S.N., R.N., Kansas State Nurses Association who stated her support for the bill and would recommend filling the vacant position on the board with a R.N. A copy of her testimony is (Attachment 6) attached hereto and incorporated into the Minutes as referenced.

Questions came from Senator Barnett regarding the thoughts on having different choices to fill the Board position.

With no more questions and no more conferee, Chairman Barnett closed the hearing on **SB 104**. Chairman Barnett then announced that the next order of business was to open the hearing on **SB 105**.

Hearing on SB 105 – An act concerning the board of nursing

The Fiscal Note for SB 105 was available for the Committee to view. A copy of the fiscal note is (Attachment 7) attached hereto and incorporated into the Minutes as referenced.

The Chair then called upon proponent conferee, Jane Conroy, Nurse Practitioner from Emporia and President of Kansas State Board of Nursing who stated, her support of the bill on behalf of the KSBN with the request of three changes. A copy of her testimony is (Attachment 8) attached hereto and incorporated into the Minutes as referenced.

Questions came from Senators Haley, Journey, Barnett, and Emalene Correll regarding a list of misdemeanors for the Committee, appeals, final conviction, and rules and regulations for the Board.

The Chair then called upon the proponent conferee, Terri Roberts, JD, R.N., Kansas State Nurses Association who stated, proposed changes in order for the KSNA to support the bill. A copy of her testimony is

CONTINUATION SHEET

MINUTES OF THE Senate Public Health and Welfare Committee at 1:30 P.M. on January 31, 2007 in Room 231-N of the Capitol.

(Attachment 9) attached hereto and incorporated into the Minutes as referenced.

Questions came from Senator Haley regarding more information needed for the Committee.

Adjournment

As there was no further business, the meeting was adjourned at 2:30 p.m.

The next meeting is scheduled for Thursday, February 1, 2007.

Senate Public Health and Welfare Committee

Please Sign In

1/31/07

Michelle Peterson

Karl Wenger

Alice Blynn

Patty Braun

Mary Bleeker

Jan Conroy

Nancy Ogg

Judith Al-Sunbary RN, BSN

Diane Smith

Carolyn Mullendorf

John Davis

Habreille Skillman

Lisa Bugner RN

Chad Austin

TERRI ROBERTS

Capitol Strategies

Kearney + Associates

KSBW

KSBW

KSBW

KSBW

Rep. Debra Garcia

MRHC/Mankatten - WU grad student

SFHC / WU grad student

KS ST NS ~~person~~

Sen. Jim Barone

Sen. Phil Journey Shadow

KS Hosp Assoc

KSNA

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January 29, 2007

To: Senate Committee on Public Health and Welfare
From: Emalene Correll, Research Associate
Re: Consent Forms

Subsequent to the distribution of the various consent forms furnished by Stormont-Vail Health, I received comparable material from St. Francis Health Center in Topeka. The enclosed materials include:

- Attachment 1: A general consent form which includes as item 12 a general consent for newborn screening;
- Attachment 2: A specific consent for newborn screening, including hearing;
- Attachment 3: A specific declination of one or more newborn screening tests;
- Attachment 4: A specific consent for Hepatitis B immunization;
- Attachment 5: A specific declination of Hepatitis B vaccine; and
- Attachment 6: A form given to mothers whose infants may leave the hospital prior to 24 hours following birth.

Several of the forms reference information given to the parent in regard to the purpose and importance of newborn screening. St. Francis Health Center uses information prepared by the Department of Health and Environment entitled "Newborn Screening for Your Baby's Health" and "Sound Beginnings: The Kansas Newborn Hearing Screening Program" to help mothers understand the purpose and importance of screening.

Enclosures

Senate Public Health and Welfare
Committee
Attachment #1
January 31, 2007

Patient Name:

ATTACHED 1

Account Number:

INSURANCE ASSIGNMENT

I assign all benefits payable under the terms of my insurance policy or policies to St. Francis Health Center (SFHC) and my physician(s), Topeka, Kansas. This assignment authorizes my insurance company or companies to make payments directly to SFHC, and my physician(s). I agree not to revoke this assignment without written notice to SFHC, and my physician(s), and any such revocation attempted will not be effective without notice from the insurance company to SFHC, and my physician(s). I understand I am financially responsible to SFHC and my physician(s) for charges not covered by this assignment. A copy shall be as valid as the original. Upon dismissal, I will be responsible for this account in full, or I will pay that portion not covered by approved insurance.

CONSENT TO AND CONDITIONS OF ADMISSION TO ST. FRANCIS HEALTH CENTER

- 1. Knowing that I have a condition requiring health care, I hereby consent to such health care, including any x-ray examination, laboratory tests, blood transfusions, administration of drugs, and any other diagnostic or medical and surgical procedure, operations, and anesthetics, which my physician(s) may consider necessary or advisable in the treatment of my case. If any anesthetic is necessary, I authorize it to be given by anesthesiologist/anesthetist chosen by my physician(s).
2. I understand that SFHC is not responsible for loss or damage to clothing, jewelry, or other valuables retained by me. Valuables may be submitted to SFHC for safekeeping. I further understand that SFHC is NOT responsible for bridgework, false teeth, plates, eyeglasses, contact lenses, hearing aids, or like items retained in my possession while at SFHC. This includes any items brought to SFHC following my admission by friends or relatives. In the event an employee is exposed to any of my blood or body fluids, I hereby consent to testing for, but not limited to, HIV and hepatitis.
3. Use and Disclosure of Information for Treatment, Payment, and Healthcare Operations; I understand that federal regulations permit SFHC to use and disclose my protected health information for treatment, payment, and healthcare operations as explained in the Health Center's Notice of Privacy Practices. My consent or authorization is not needed for these uses or disclosures.
4. In the event I receive diagnostic procedures or treatment relating to cancer during this health center encounter, I authorize SFHC to obtain outcome data from my subsequent treating physicians or institutions as is necessary to satisfy federal or state rules, regulations, statutes, or registry requirements.
5. I certify that the information given by me in applying for payment under Title XVIII or Title XIX of the Social Security Act is correct. I request that payment of authorized benefits be made on my behalf. I assign the benefits payable for physician services to the physician or organization furnishing the services or authorize such physician or organization to submit a claim to Medicare for payment to me.
6. I understand that some emergency room services may not meet Medicaid criteria for medical necessity and may be considered non-emergent. If services are denied by Medicaid, I will be held personally responsible for non-covered charges.
7. SFHC provides only general duty nursing care except in its Critical Care and Infant Nursery departments. Under a general duty nursing care system, nurses are called to the bedside of the patient by a signal system. If a patient is not in the Critical Care or Infant Nursery department and is in such condition as to need continuous or special duty nursing care, necessary arrangements should be made by the patient or the patient's representative.
8. I am aware that the practice of medicine and nursing is not an exact science and I acknowledge that no guarantees have been made to me as to the result of treatments or examination in the Health Center.
9. I consent to the disposal by SFHC of any tissues or parts which may be removed in the course of any procedure performed upon me.
10. I understand that SFHC is a cooperating health center of the Kansas Medical Education Foundation Programs and other residency and medical, nursing, and technical education programs. I further understand that I may be under the care and treatment of resident physicians, physicians in training and other students enrolled in such programs under the supervision of an attending physician and I consent to the same.
11. I acknowledge my understanding that the possession of illegal drugs, weapons, or other similar contraband are not allowed on SFHC premises by patients or visitors, and such substances will be confiscated and turned over to local law enforcement personnel. I understand that my person and personal property are subject to search while I am a patient at SFHC for such substances, and I hereby consent to such search and the confiscation of any substances that are reasonably believed to be illegal drugs, weapons, or other similar contraband, and to the turning over of such substances to law enforcement personnel.
12. If I am here for the purpose of the delivery of my infant, I understand that certain blood tests may be recommended by state law and give consent for SFHC to obtain the blood sample and forward it to the Kansas Health and Environmental Laboratory, Department of Health and Environment (i.e., PKU, T-4, Galactosaemia, Congenital Hypothyroidism, Hemoglobinopathies.)
13. SFHC is a clean air environment. Smoking is prohibited. Cigarettes, lighters, and other tobacco products are not allowed.
14. Information pertaining to mental health, drug and alcohol abuse, or HIV/AIDS diagnoses may be released to those insurance companies or third party payors you identify for purposes of compensation to SFHC concerning services rendered.
15. Pathology, radiology, and anesthesia services are medical services performed or supervised by physicians. The personnel and facilities are or may be furnished by SFHC for these services. I understand that I may receive bills for these services and from any other physicians involved in my case separate from SFHC billings.
16. I understand that the use of any video capturing devices (cameras, cell phones, etc.) by other than authorized personnel for official business is prohibited. Use of such equipment, as described above, may result in confiscation while in the facility. Still photographs may be taken only with consent of the individual(s) being photographed.

I have received a copy of SFHC's Notice of Privacy Practices. I hereby decline a copy of SFHC's Notice of Privacy Practices.

I CERTIFY THAT I HAVE READ THE ABOVE INFORMATION (OR IT HAS BEEN READ TO ME) AND IT HAS BEEN EXPLAINED TO ME AND ANY QUESTIONS I HAVE WERE ANSWERED TO MY SATISFACTION. I AM SATISFIED THAT I UNDERSTAND THE CONSENT AND THE SIGNIFICANCE OF THIS DOCUMENT. I AGREE TO THESE TERMS EXCEPT AS NOTED BELOW.

EXCEPTIONS:

WITNESS

PATIENT

DATE

SIGNATURE (PATIENT, AGENT OR REPRESENTATIVE)

Original Copy To Medical Records

RELATIONSHIP TO PATIENT

Admission Consent/Insurance Assignment 05/09/05 Updated 12/18/06

Attachment 2

St. Francis Health Center
Topcka, Kansas

Nursery Consent

I have been given a copy of the Newborn Screening for Your Baby's Health, the Newborn Hearing Screening Program and have read or had explained to me the information about the following checked tests. I have had a chance to ask questions which were answered to my satisfaction. I understand the benefits and risks of these tests for my baby.

- Hearing Screening
- PKU (Phenylketonuria)
- Galactosemia
- Hypothyroidism
- Hemoglobinopathics
- Vitamin K
- Erythromycin for eyes

INFANT'S NAME _____

Witness to Signature:

Signature of Person Authorized to
Consent for Minor

(Name)

(Date)

(Signature)

(Date/Time)

(Address)

Authority to Consent Relationship

(Relationship to Patient)

Attachment 3

**St. Francis Health Center
Topeka, Kansas**

DECLINE Nursery Tests

I have been given a copy of the Newborn Screening for Your Baby's Health, the Newborn Hearing Screening Program and have read or had explained to me the information about the following checked tests. I have had a chance to ask questions which were answered to my satisfaction. I understand the benefits and risks of these tests for my baby.

- Hearing Screening
- PKU (Phenylketonuria)
- Galactosemia
- Hypothyroidism
- Hemoglobinopathies
- Vitamin K
- Erythromycin for eyes

I have been informed on any and all risks of refusing the above tests for my baby. I hereby release St. Francis Health Center, its nurses and employees together with Dr(s) _____ and all other physicians in any way connected with me as a patient from liability for respecting and following my expressed wishes and direction. On behalf of my child, I hereby **decline** the administration of the above checked tests.

INFANT'S NAME _____

Witness to Signature:

Signature of Person Authorized to Consent for Minor

(Name)

(Date)

(Signature)

(Date/Time)

(Address)

Authority to Consent Relationship

(Relationship to Patient)

Attachment 4

St. Francis Health Center
Topeka, Kansas

Consent to RECEIVE Hepatitis B Vaccination

I have been given a copy and have read or had explained to me the information about Hepatitis B and the vaccine available. I have had a chance to ask questions which were answered to my satisfaction. I understand the benefits and risks of Hepatitis B vaccine for my baby. I understand that my baby must receive a total of three doses provide immunity. As with all medical treatment, there is no guarantee that my baby will become immune or that he/she will be free from adverse side effects from the vaccine.

I request that the Hepatitis B vaccine be given to the person named below for whom I am authorized to make this request.

INFANT'S NAME _____

Witness to Signature:

Signature of Person Authorized to Consent for Minor

(Name)

(Date)

(Signature)

(Date/Time)

(Address)

Authority to Consent Relationship

(Relationship to Patient)

FOR HOSPITAL USE:

Hepatitis B Vaccine

HBIG

Administered by _____

Administered by _____

Manufacturer _____

Manufacturer _____

Lot # _____

Lot # _____

Expiration Date _____

Expiration Date _____

Date, time and site of injection _____

Date, time, and site of injection _____

1-5

St. Francis Health Center
Topeka, Kansas

DECLINE Hepatitis B Vaccination

I have been given a copy and have read or had explained to me the information about Hepatitis B and the vaccine available. I have had a chance to ask questions which were answered to my satisfaction. I understand the benefits and risks of Hepatitis B vaccine for my baby.

I have been informed on any and all risks of refusing the Hepatitis B Vaccine for my baby. I hereby release St. Francis Health Center, it's nurses and employees together with Dr(s) _____ and all other physicians in any way connected with me as a patient from liability for respecting and following my expressed wishes and direction. On behalf of my child, I hereby decline the administration of the hepatitis B vaccine.

INFANT'S NAME _____

Witness to Signature:

Signature of Person Authorized to Consent for Minor

(Name)

(Date)

(Signature)

(Date/Time)

(Address)

Authority to Consent Relationship

(Relationship to Patient)

White-Medical Records
Yellow-Clinical Director

Attachment 6

REPEAT NEWBORN SCREENING
(PKU, Hypothyroidism, Galactosemia, Hemoglobinopathies)

Neonatal screening has proven to be an effective method for identifying PKU, hypothyroidism, galactosemia, and hemoglobinopathies before mental retardation or morbidity occurs. Screening will identify infants in most cases before the onset of clinical symptoms and treatment can be started. The State of Kansas requires this screening before you leave the hospital. If it is necessary for the blood test to be drawn prior to 24 hours following birth, there is a potential for the test to show a false negative. It is, therefore, essential for you to bring your baby back to the hospital and have a repeat of this screening done within 2 weeks of birth.

Please bring the baby back to the hospital, to the Admission's office, within the baby's first 2 weeks of age and you will be directed to the lab for the test.

(witness)

(signature of mother, date)

BILLING FOR ANATOMIC PATHOLOGY SERVICES

slaughter

AN ACT concerning the Kansas healing arts act; prohibiting billing for anatomic pathology services in certain circumstances; amending K.S.A. 65-2837 and repealing the existing section.

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

Section 1. K.S.A. 65-2837 is hereby amended to read as follows: 65-2837. As used in K.S.A. 65-2836, and amendments thereto, and in this section:

(a) "Professional incompetency" means:

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

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

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

(b) "Unprofessional conduct" means:

(1) Solicitation of professional patronage through the use of fraudulent or false advertisements, or profiting by the acts of those representing themselves to be agents of the licensee.

(2) Representing to a patient that a manifestly incurable disease, condition or injury can be permanently cured.

(3) Assisting in the care or treatment of a patient without the consent of the patient, the attending physician or the patient's legal representatives.

(4) The use of any letters, words, or terms, as an affix, on stationery, in advertisements, or otherwise indicating that such person is entitled to practice a branch of the healing arts for which such person is not licensed.

(5) Performing, procuring or aiding and abetting in the performance or procurement of a criminal abortion.

(6) Willful betrayal of confidential information.

(7) Advertising professional superiority or the performance of professional services in a superior manner.

(8) Advertising to guarantee any professional service or to perform any operation painlessly.

(9) Participating in any action as a staff member of a medical care facility which is designed to exclude or which results in the exclusion of any person licensed to practice medicine and surgery from the medical staff of a nonprofit medical care facility licensed in this state because of the branch of the healing arts practiced by such person or without just cause.

(10) Failure to effectuate the declaration of a qualified patient as provided in subsection (a) of K.S.A. 65-28,107, and amendments thereto.

(11) Prescribing, ordering, dispensing, administering, selling, supplying or giving any amphetamines or sympathomimetic amines, except as authorized by K.S.A. 65-2837a, and amendments thereto.

Senate Public Health and Welfare
Attachment #2
January 31, 2007
committee

- (12) Conduct likely to deceive, defraud or harm the public.
- (13) Making a false or misleading statement regarding the licensee's skill or the efficacy or value of the drug, treatment or remedy prescribed by the licensee or at the licensee's direction in the treatment of any disease or other condition of the body or mind.
- (14) Aiding or abetting the practice of the healing arts by an unlicensed, incompetent or impaired person.
- (15) Allowing another person or organization to use the licensee's license to practice the healing arts.
- (16) Commission of any act of sexual abuse, misconduct or exploitation related to the licensee's professional practice.
- (17) The use of any false, fraudulent or deceptive statement in any document connected with the practice of the healing arts including the intentional falsifying or fraudulent altering of a patient or medical care facility record.
- (18) Obtaining any fee by fraud, deceit or misrepresentation.
- (19) Directly or indirectly giving or receiving any fee, commission, rebate or other compensation for professional services not actually and personally rendered, other than through the legal functioning of lawful professional partnerships, corporations or associations.
- (20) Failure to transfer patient records to another licensee when requested to do so by the subject patient or by such patient's legally designated representative.
- (21) Performing unnecessary tests, examinations or services which have no legitimate medical purpose.
- (22) Charging an excessive fee for services rendered.
- (23) Prescribing, dispensing, administering, distributing a prescription drug or substance, including a controlled substance, in an excessive, improper or inappropriate manner or quantity or not in the course of the licensee's professional practice.
- (24) Repeated failure to practice healing arts with that level of care, skill and treatment which is recognized by a reasonably prudent similar practitioner as being acceptable under similar conditions and circumstances.
- (25) Failure to keep written medical records which accurately describe the services rendered to the patient, including patient histories, pertinent findings, examination results and test results.
- (26) Delegating professional responsibilities to a person when the licensee knows or has reason to know that such person is not qualified by training, experience or licensure to perform them.
- (27) Using experimental forms of therapy without proper informed patient consent, without conforming to generally accepted criteria or standard protocols, without keeping detailed legible records or without having periodic analysis of the study and results reviewed by a committee or peers.
- (28) Prescribing, dispensing, administering or distributing an anabolic steroid or human growth hormone for other than a valid medical purpose. Bodybuilding, muscle enhancement or increasing muscle bulk or strength through the use of an anabolic steroid or human growth hormone by a person who is in good health is not a valid medical purpose.

(29) Referring a patient to a health care entity for services if the licensee has a significant investment interest in the health care entity, unless the licensee informs the patient in writing of such significant investment interest and that the patient may obtain such services elsewhere.

(30) Failing to properly supervise, direct or delegate acts which constitute the healing arts to persons who perform professional services pursuant to such licensee's direction, supervision, order, referral, delegation or practice protocols.

(31) Violating K.S.A. 65-6703 and amendments thereto.

(32) Charging, billing, or otherwise soliciting payment from any patient, patient's representative, or insurer for anatomic pathology services, if such services were not personally rendered by the licensee or under such licensee's direct supervision. As used in this subsection, "anatomic pathology services" means the gross or microscopic examination or histologic processing of human organ tissue, or the examination of human cells from fluids, aspirates, washings, brushings, or smears, including bloodbanking services, and subcellular or molecular pathology services, performed by or under the supervision of a person licensed to practice medicine and surgery or a clinical laboratory. Nothing in this subsection shall be construed to prohibit billing for anatomic pathology services by a hospital, or by a clinical laboratory when samples are transferred between clinical laboratories for the provision of anatomic pathology services.

(c) "False advertisement" means any advertisement which is false, misleading or deceptive in a material respect. In determining whether any advertisement is misleading, there shall be taken into account not only representations made or suggested by statement, word, design, device, sound or any combination thereof, but also the extent to which the advertisement fails to reveal facts material in the light of such representations made.

(d) "Advertisement" means all representations disseminated in any manner or by any means, for the purpose of inducing, or which are likely to induce, directly or indirectly, the purchase of professional services.

(e) "Licensee" for purposes of this section and K.S.A. 65-2836, and amendments thereto, shall mean all persons issued a license, permit or special permit pursuant to article 28 of chapter 65 of the Kansas Statutes Annotated.

(f) "License" for purposes of this section and K.S.A. 65-2836, and amendments thereto, shall mean any license, permit or special permit granted under article 28 of chapter 65 of the Kansas Statutes Annotated.

(g) "Health care entity" means any corporation, firm, partnership or other business entity which provides services for diagnosis or treatment of human health conditions and which is owned separately from a referring licensee's principle practice.

(h) "Significant investment interest" means ownership of at least 10% of the value of the firm, partnership or other business entity which owns or leases the health care entity, or ownership of at least 10% of the shares of stock of the corporation which owns or leases the health care entity.

Or bloodbanking services, or subcellular and molecular pathology services,

AN ACT concerning the radiologic technologists practices act; *amending K.S.A. 65-7302, 65-7305, and repealing 65-7306.*

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

Sec. 1. K.S.A. 65-7302. is hereby amended to read as follows: 65-7302 . Definitions. (a) "Board" means the state board of healing arts.

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

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

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

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

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

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

(h) "Radiation therapist" means a person who applies radiation to humans 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 humans for diagnostic purposes.

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

(l) "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 *and the administration of medications within the scope of training of the radiologic technologist as allowed by the board.* The term includes the practice of radiography, nuclear medicine technology and radiation therapy, but does not include echocardiography, diagnostic sonography and magnetic resonance imaging.

Sec. 2. K.S.A. 65-7305 is hereby amended to read as follows: 65-7305. Application for licensure; requirements; temporary licensure; waiver of examination; application for reinstatement; fees. (a) An applicant for licensure as a radiologic technologist shall file an application, on forms provided by the board, showing to the satisfaction of the board that the applicant meets the following requirements:

(1) At the time of the application is at least 18 years of age;

(2) has successfully completed a four-year course of study in a secondary school approved by the state board of education, passed an approved equivalency test or graduated from a secondary school outside Kansas having comparable approval by the state board of education;

(3) has satisfactorily completed a course of study in radiography, radiation therapy or nuclear medicine technology which is approved by the board and which contains a curriculum no less stringent than the standards of existing organizations which approve radiologic technology programs;

(4) except as *otherwise* provided in *this act* ~~K.S.A. 2005 Supp. 65-7306, and amendments thereto~~, has successfully passed a license examination approved by the board; and

(5) has paid all fees required for licensure prescribed in this act.

(b) The board may issue a temporary license to an applicant seeking licensure as a radiologic technologist when such applicant meets the requirements for licensure or meets all the requirements for licensure except examination and pays to the board the temporary license fee as required under K.S.A. 2005 Supp. 65-7313, and amendments thereto. Such temporary license shall expire 180 days from the date of issue or on the date that the board approves the application for licensure, whichever occurs first. No more than one such temporary license shall be permitted to any one person.

(c) The board may accept, in lieu of its own licensure examination, a current certificate by the American registry of radiologic technologists, nuclear medicine technologist certification board or other recognized national voluntary credentialing bodies, which the board finds was issued on the basis of an examination which meets standards at least as stringent as those established by the board.

(d) The board may waive the examination or education requirements and grant licensure to any applicant *(1)* who presents proof of current licensure as a radiologic technologist in another state, the District of Columbia or territory of the United States which requires standards for licensure determined by the board to be equivalent to the requirements under this act; *and (2)* who has, *at the time of application, a current valid certificate by the American registry of radiologic technologists, nuclear medicine technology certification board or other recognized national voluntary credentialing bodies, which the board finds was issued on the basis of an examination which meets standards at least as stringent as those established by the board.*

(e) A person whose license has been revoked may make written application to the board requesting reinstatement of the license in a manner prescribed by the board, which application shall be accompanied by the fee provided for in K.S.A. 2005 Supp. 65-7308, and amendments thereto.

Sec. 3. K.S.A. 65-7306 is hereby repealed.

Sec. 4. This act shall take effect and be in force from and after its publication in the statute book.

REPEAL

65-7306

1. Chapter 65.--PUBLIC HEALTH

Article 73.--RADIOLOGIC TECHNOLOGISTS

65-7306. Waiver of education and examination requirements; when. The board shall waive the education and examination requirements for an applicant who, on or before July 1, 2005:

(a) (1) Has been engaged in the practice of radiologic technology for a period of at least two years of the three years immediately preceding July 1, 2005;

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

(3) has successfully completed secondary schooling or its equivalency; or

(b) (1) has been engaged in the practice of radiologic technology prior to July 1, 2005;

(2) has, at the time of application, a current valid certificate by the American registry of radiologic technologists, nuclear medicine technology certification board or other recognized national voluntary credentialing bodies, which the board finds was issued on the basis of an examination which meets standards at least as stringent as those established by the board;

(3) is 18 years of age or older; and

(4) has successfully completed secondary schooling or its equivalency;

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

History: L. 2004, ch. 84, § 6; L. 2005, ch. 34, § 3; July 1.

January 25, 2007

The Honorable Jim Barnett, Chairperson
Senate Committee on Public Health and Welfare
Statehouse, Room 120-S
Topeka, Kansas 66612

Dear Senator Barnett:

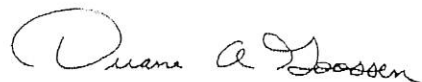
SUBJECT: Fiscal Note for SB 104 by Senate Committee on Public Health and Welfare

In accordance with KSA 75-3715a, the following fiscal note concerning SB 104 is respectfully submitted to your committee.

Under current law, the Board of Nursing comprises six registered professional nurses, two licensed practical nurses, one licensed mental health technician, and two members of the general public. SB 104 would change the Board by replacing the licensed mental health technician with an additional member of the general public.

The Board of Nursing indicates that the enactment of SB 104 would have no fiscal effect on the operations of the agency.

Sincerely,



Duane A. Goossen
Director of the Budget

cc: Mary Blubaugh, Nursing

KANSAS

KANSAS STATE BOARD OF NURSING
MARY BLUBAUGH MSN, RN, EXECUTIVE ADMINISTRATOR

KATHLEEN SEBELIUS, GOVERNOR

January 31, 2007

Senator James Barnett
Chairman, Senate Public Health and Welfare Committee
Capitol Building, Topeka, Kansas 66612

RE: S.B. 104 Membership of the Kansas State Board of Nursing

Chairman Barnett and Members of the Committee,

My name is Jane Anne Conroy. I am a Nurse Practitioner from Emporia and President of the Kansas State Board of Nursing (KSBN). I am providing testimony in support of S.B. 104 on behalf of the KSBN.

The Board of Nursing is currently comprised of 11 members who include six (6) Registered Nurse (RN), two (2) Licensed Practical Nurses (LPN), one (1) Licensed Mental Health Technician (LMHT), and two (2) public members.

The Board of Nursing is requesting that the LMHT position be deleted and replaced with another public member position.

The profession of LMHT has been declining over the last several years. Fifteen years ago, in 1992, there were 1125 LMHTs in Kansas. As of December 31, 2006 only 175 had renewed their license. Kansas does not have an educational institution that provides an education for a student to become a mental health technician. Since May 2001 until present, the position of LMHT on the Board of Nursing has been vacant for 26 of those 68 months. The position is currently vacant.

The Board of Nursing is asking that this position become a public member who has not been involved in providing health care. Historically the public members that have been appointed to the Board have been hospital and nursing home administrators. These members have been very beneficial and important Board members but the Board would like a third public member to be a consumer who has not been involved in providing health care.

Although the Board regulates nursing in Kansas, there are currently six (6) RNs and two (2) LPNs. Together they constitute a majority of the Board. The meetings have been streamlined from 20 days per year to 8 days per year. Several years ago, the Committees

*Senate Public Health and Welfare
Attachment # 5
January 31, 2007
Committee*

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of the Board were decreased from 10 to 7 which guarantee that there is nursing representation on every Committee.

We ask for favorable action on this legislation. Thank you for your time and consideration and I will stand for questions.

Jane Anne Conroy, R.N., M.S., A.R.N.P.
2614 Apple Drive, Emporia, Kansas 66801



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ELLEN CARSON, PH.D., A.R.N.P., B.C.
 PRESIDENT

THE VOICE AND VISION OF NURSING IN KANSAS

TERRI ROBERTS, J.D., R.N.
 EXECUTIVE DIRECTOR

For More Information Contact:
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S.B. 104 Composition of the Board of Nursing

January 31, 2007

Chairman Barnett and members of the Senate Public Health and Welfare Committee, thank you for this opportunity to present on the policy issue related to S.B. 104. My name is Carolyn Middendorf M.S.N., R.N. and I am representing The KANSAS STATE NURSES ASSOCIATION.

The KANSAS STATE NURSES ASSOCIATION supports changing the composition of the Board of Nursing by eliminating the LMHT position on the Board and replacing that representative with another category of licensee. With less than 200 LMHT's in the state, it has been increasingly more difficult for the Governor's office to recruit an appointee that is willing to serve, and in fact, the past 3 years the position has been vacant/not in attendance more than present for meetings and contributing to the work of the Board.

KSNA would like to see that this licensee position that is being eliminated be filled with another RN on the Board of Nursing instead of a "public member" as proposed in current S.B. 104. See the Ballon attached with these changes. We would ask that this position be in the RN "service" category to represent the practicing RN's throughout the state. The reality of the situation related to appointees of the Board of Nursing is that the Board also is challenged to maintain public members.

Here is a record of vacancies and attendance of the public members at the agencies meetings the past 3 years:

Audit of KSBN Minutes

	2004	Barbara Open Position Stec	Janice McCart	Carrie Jones-William
December		Absent	Vacant	
September		Present		Absent
June		Present	Vacant	
March		Present	Vacant	
Special CC/Meeting		Present	Vacant	

senate Public Health and Welfare
 Attachment #6
 January 31, 2007
 Committee

	2005	Barbara Stec	Open Position	Janice McCart	Carrie Jones-William
December		Absent		Present	
September		Present	Vacant		
June		Present	Vacant		
March		Absent	Vacant		
Special CC/Meeting		Present	Vacant		

	2006	Barbara Stec	Open Position	Janice McCart	Carrie Jones-William
December		Not Available		Present	
September		Absent		Present	
June		Absent		Present	
March		Present		Present	
Special CC/Meeting		Present		Absent	

Notes

Of the minutes reviewed Barbara Stec was absent 56% of the time

Of the minutes reviewed there was a vacant public member position 53% of the time

Of the minutes reviewed there was 14% of the time that the board met without any public member present

Historically, regulatory agencies were created with members of the respective profession to bring the expertise and experience needed for writing regulations, enforcing standards of practice and disciplining licensees. Currently the Board of Nursing has 7 Committees (Education, Practice, LPN-IV Advisory, ARNP, Continuing Education, Investigative, and Finance) that meet regularly. All of these committees have non-Board members serving on them, except Investigative and Finance, to assist with the work of the agency, because the workload demands more RN's, ARNP's to serve. The Board carefully assigns non-Board members to each Committee with a delicate balance to ensure that the Board members serving have the majority on each Committee, however, for many years they have recognized the need to include other RN's to complete their work.

Thank You for consideration of our comments.

SENATE BILL No. 104

By Committee on Public Health and Welfare

1-17



PROPOSED AMENDMENTS
01/31/2007

6-3

9 AN ACT concerning the board of nursing; membership thereon; amend-
10 ing K.S.A. 74-1106 and repealing the existing section.

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

12 Section 1. K.S.A. 74-1106 is hereby amended to read as follows: 74-
13 1106. (a) *Appointment, term of office.* (1) The governor shall appoint a
14 board consisting of 11 members of which ~~six~~ shall be registered profes- seven
15 sional nurses, two shall be licensed practical nurses, ~~one shall be a licensed~~
16 ~~mental health technician~~ and ~~two~~ three shall be members of the general two
17 public, which shall constitute a board of nursing, with the duties, power
18 and authority set forth in this act.

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

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

36 ~~(4) Upon the expiration of the term of any mental health technician,~~
37 ~~the Kansas association of human services technologies shall submit to the~~
38 ~~governor a list of persons licensed as mental health technicians containing~~
39 ~~names of not less than three times the number of persons to be appointed,~~
40 ~~and appointments shall be made after consideration of such list for terms~~
41 ~~of four years and until a successor is appointed and qualified.~~

42 ~~---(5) (4) Each member of the general public shall be appointed for a~~
43 term of four years and successors shall be appointed for a like term.



1 (6) (5) Whenever a vacancy occurs on the board of nursing, it shall
2 be filled by appointment for the remainder of the unexpired term in the
3 same manner as the preceding appointment. No person shall serve more
4 than two consecutive terms as a member of the board of nursing and
5 appointment for the remainder of an unexpired term shall constitute a
6 full term of service on such board. With the expiration of terms for the
7 registered professional nurse from education and one public member in
8 July, 2003, the next appointments for those two positions will be for only
9 one year. Thereafter the two positions shall be appointed for terms of
10 four years.

11 (b) *Qualifications of members.* Each member of the board shall be a
12 citizen of the United States and a resident of the state of Kansas. Regis-
13 tered professional nurse members shall possess a license to practice as a
14 professional nurse in this state with at least five years' experience in nurs-
15 ing as such and shall be actively engaged in professional nursing in Kansas
16 at the time of appointment and reappointment. The licensed practical
17 nurse members shall be licensed to practice practical nursing in the state
18 with at least five years' experience in practical nursing and shall be actively
19 engaged in practical nursing in Kansas at the time of appointment and
20 reappointment. The governor shall appoint successors so that the regis-
21 ~~tered professional nurse membership of the board shall consist of at least~~
22 ~~two~~ members who are engaged in nursing service, at least two members
23 who are engaged in nursing education and at least one member who is
24 engaged in practice as an advanced registered nurse practitioner or a
25 registered nurse anesthetist. ~~The licensed mental health technician mem-~~
26 ~~ber shall be licensed to practice as a licensed mental health technician in~~
27 ~~the state with at least five years' experience and shall be actively engaged~~
28 ~~in the field of mental health technology in Kansas at the time of appoint-~~
29 ~~ment and reappointment.~~ The consumer members shall represent the
30 interests of the general public. *At least one consumer member shall not*
31 *have been involved in providing health care.* Each member of the board
32 shall take and subscribe the oath prescribed by law for state officers,
33 which oath shall be filed with the secretary of state.

34 (c) *Duties and powers.* (1) The board shall meet annually at Topeka
35 during the month of September and shall elect from its members a pres-
36 ident, vice-president and secretary, each of whom shall hold their re-
37 spective offices for one year. The board shall employ an executive ad-
38 ministrator, who shall be a registered professional nurse, who shall not
39 be a member of the board and who shall be in the unclassified service
40 under the Kansas civil service act, and shall employ such other employees,
41 who shall be in the classified service under the Kansas civil service act as
42 necessary to carry on the work of the board. As necessary, the board shall
43 be represented by an attorney appointed by the attorney general as pro-

three



Kathleen Sebelius, Governor
Duane A. Goossen, Director
<http://budget.ks.gov>

January 24, 2007

The Honorable Jim Barnett, Chairperson
Senate Committee on Public Health and Welfare
Statehouse, Room 120-S
Topeka, Kansas 66612

Dear Senator Barnett:

SUBJECT: Fiscal Note for SB 105 by Senate Committee on Public Health and Welfare

In accordance with KSA 75-3715a, the following fiscal note concerning SB 105 is respectfully submitted to your committee.

Under current law, the Kansas Board of Nursing mails applications to all licensees who need to renew their licenses. SB 105 would amend current law to require the Board to "send a notice" for licensure renewal. Licensees who receive their nursing license in Kansas are not required to have continuing nursing education for the first renewal after licensure by exam, while individuals who receive their nursing license in another state are. Passage of SB 105 would amend current law so that out-of-state licensees would no longer be required to have continuing nursing education for the first renewal period after licensure by exam.

Currently, licensees must report any felony or misdemeanor convictions on their renewal form. SB 105 would amend current law to require licensees to report any felony or misdemeanor convictions within 30 days of the conviction.

SB 105 would not require the Board to increase fees or hire additional staff. The Board of Nursing would continue to mail licensure renewal notices.

Sincerely,

Duane A. Goossen
Director of the Budget

cc: Mary Blubaugh, Board of Nursing

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Senate Public Health and Welfare Committee
Attachment # 7
January 31, 2007

KANSAS

KANSAS STATE BOARD OF NURSING
MARY BLUBAUGH MSN, RN, EXECUTIVE ADMINISTRATOR

KATHLEEN SEBELIUS, GOVERNOR

January 31, 2007

Senator James Barnett
Chairman, Senate Public Health and Welfare Committee
Capitol building, Topeka, Kansas 66612

RE: S.B. 105 License renewals and notice of conviction of felonies or misdemeanors.

My name is Jane Ann Conroy. I am a Nurse Practitioner from Emporia and President of the Kansas State Board of Nursing (KSBN). I am providing testimony in support of S.B. 105 on behalf of the KSBN.

Currently, the statute requires the Board of Nursing to mail an application for renewal at least 60 days prior to the expiration date of the license. The procedure for the last eight years has been to mail the application 90 days in advance of the expiration date.

The Board of Nursing initiated on-line renews in 2001 although the percentage renewing on-line remained low. In 2004 the on-line renewal was 40.6%. In 2005 the Board of Nursing began to mail the "Notice" of application for renewal to the nurses and gave instructions of renewing on-line or how to request a renewal form. The on-line renewal jumped to 61% in 2005 and 67% in 2006. The revision in S.B. 105 would change the language from "mail an application" to "send a notice".

If a licensee is renewing their license for the first time after licensure by examination and their original state of licensure was Kansas, they are not required to have continuing nursing education. If a licensee is renewing for the first time after licensure by examination and their original state of licensure was any state other than Kansas, they "are" required to have continuing nursing education. This change in language would treat all licensees renewing for the first time after licensure by examination the same and not require nursing education.

The final requested change to this statute would require a licensee to notify the Board of Nursing within 30 days of any felony conviction or conviction of a misdemeanor as specified by the Board. Licensees currently report conviction of misdemeanors and felonies to the Board of Nursing on renewals, initial application, and reinstatements, thus up to two years may pass before the Board would be aware of the conviction. The actions underlying the conviction may be indicative of behavior that is a danger to the public or consumers of health care.

*Senate Public Health and Welfare
Attachment # 8
January 31, 2007
Committee*

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The Board of Nursing is requesting these three changes be made in K.S.A. 65-1117, 65-1132, 65-1155 and 65-4205 so that all professions regulated by the KSBN are consistent.

We ask for favorable action on this legislation. Thank you for your time and consideration and I will stand for questions.

Jane Anne Conroy, R.N., M.S., A.R.N.P



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PRESIDENT

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S.B. 105 Changes to the Nurse Practice Act

January 31, 2007

Chairman Barnett and members of the Senate Public Health and Welfare Committee, thank you for this opportunity to present on the policy issue related to S.B. 104. My name is Terri Roberts J.D., R.N. and I am representing The KANSAS STATE NURSES ASSOCIATION.

S.B. 105 makes a number of changes to the Nurse Practice Act that have been discussed for a couple of years. KSNA supports these changes including the provision related to new nurses who endorse into Kansas shortly after taking state board exams and being licensed in another state. This will reduce the misunderstandings for the GN's as we often refer to them, regarding their first licensure period. With the changes on lines 26 and 27 on page 1 these new grads will not have to obtain the 30 hours of CNE in the first renewal period and will be treated just like the Kansas GN's who license here first.

KSNA recognizes that the agency would like to improve efficiencies by making everyone aware and encouraging on-line licensure renewal. We support that concept, hence removing the language on lines 17, page 1; line 23 page 2; and line 23 page 3 so that the Board of Nursing will only be required to send a "notice" to licensees.

There is one area in the proposed legislation that is not in concert with the current Nurse Practice Act statute regarding licensure, KSA 65-1120 (a)2 and we would ask for consideration to bring this into alignment. The agency is suggesting on line 14 on page 2 and line 20 ON page 4 that they receive notification from all 42,000 licensees for any "misdemeanor conviction". We believe this is not needed and that only those "involving illegal drug use", as specified in the current Nurse Practice Act need be reported. We would ask for your consideration of this proposed amendment.

Thank You.

Senate Public Health and Welfare
Attachment #9
January 31, 2007
Committee



2-9

1 verify the accuracy of the application and grant a renewal license.
2 (b) Any person who fails to secure a renewal license within the time
3 specified herein may secure a reinstatement of such lapsed license by
4 making verified application therefor on a form provided by the board, by
5 rules and regulations, and upon furnishing proof that the applicant is
6 competent and qualified to act as a registered professional nurse or li-
7 censed practical nurse and by satisfying all of the requirements for rein-
8 statement including payment to the board of a reinstatement fee as es-
9 tablished by the board. A reinstatement application for licensure will be
10 held awaiting completion of such documentation as may be required, but
11 such application shall not be held for a period of time in excess of that
12 specified in rules and regulations.

13 (c) Each licensee shall notify the board in writing of a change in name
14 ~~or address or of a conviction of any felony or conviction of a misdemeanor~~
15 *as specified by the board* within 30 days of the change *or conviction*.
16 Failure to so notify the board shall not constitute a defense in an action
17 relating to failure to renew a license, nor shall it constitute a defense in
18 any other proceeding.

involving an illegal drug offense

(to be in
concord with
KSA 65-1120(a)2)

19 Sec. 2. K.S.A. 65-1132 is hereby amended to read as follows: 65-
20 1132. (a) All certificates of qualification issued under the provisions of
21 this act, whether initial or renewal, shall expire every two years. The
22 expiration date shall be established by rules and regulations of the board.
23 The board shall ~~mail an application~~ *send a notice* for renewal of a certifi-
24 cate of qualification to every advanced registered nurse practitioner at
25 least 60 days prior to the expiration date of such person's license. Every
26 person who desires to renew such certificate of qualification shall file with
27 the board, on or before the date of expiration of such certificate of qual-
28 ification, a renewal application together with the prescribed biennial re-
29 newal fee. Upon receipt of such application and payment of any applicable
30 fee, and upon being satisfied that the applicant for renewal of a certificate
31 of qualification meets the requirements established by the board under
32 K.S.A. 65-1130 and amendments thereto in effect at the time of initial
33 qualification of the applicant, the board shall verify the accuracy of the
34 application and grant a renewal certificate of qualification.

35 (b) Any person who fails to secure a renewal certificate of qualifica-
36 tion prior to the expiration of the certificate of qualification may secure
37 a reinstatement of such lapsed certificate of qualification by making ap-
38 plication therefor on a form provided by the board, upon furnishing proof
39 that the applicant is competent and qualified to act as an advanced reg-
40 istered nurse practitioner and upon satisfying all of the requirements for
41 reinstatement including payment to the board of a reinstatement fee as
42 established by the board.

43 Sec. 3. K.S.A. 65-1155 is hereby amended to read as follows: 65-

65-1120. Denial, revocation, limitation or suspension of license or certification of qualification;
costs;

professional incompetency defined.

- (a) Grounds for disciplinary actions. The board may deny, revoke, limit or suspend any license, certificate of qualification or authorization to practice nursing as a registered professional nurse, as a licensed practical nurse, as an advanced registered nurse practitioner or as a registered nurse anesthetist that is issued by the board or applied for under this act or may publicly or privately censure a licensee or holder of a certificate of qualification or authorization, if the applicant, licensee or holder of a certificate of qualification or authorization is found after hearing:
- (1) To be guilty of fraud or deceit in practicing nursing or in procuring or attempting to procure a license to practice nursing;
 - (2) To have been guilty of a felony or to have been guilty of a misdemeanor involving an illegal drug offense unless the applicant or licensee establishes sufficient rehabilitation to warrant the public trust, except that notwithstanding K.S.A. 74-120 no license, certificate of qualification or authorization to practice nursing as a licensed professional nurse, as a licensed practical nurse, as an advanced registered nurse practitioner or registered nurse anesthetist shall be granted to a person with a felony conviction for a crime against persons as specified in article 34 of chapter 21 of the Kansas Statutes Annotated and acts amendatory thereof or supplemental thereto;



9-3

1 education, administration, research or theory development to the end of
2 improving the health of the public.

3 Upon receipt of such application and evidence of satisfactory comple-
4 tion of the required program of continuing education and upon being
5 satisfied that the applicant meets the requirements set forth in K.S.A. 65-
6 4203 and amendments thereto in effect at the time of initial licensure of
7 the applicant, the board shall verify the accuracy of the application and
8 grant a renewal license.

9 (b) Any licensee who fails to secure a renewal license within the time
10 specified may secure a reinstatement of such lapsed license by making
11 verified application therefor on a form prescribed by the board together
12 with the prescribed reinstatement fee and, satisfactory evidence as re-
13 quired by the board that the applicant is presently competent and qual-
14 ified to perform the responsibilities of a mental health technician and of
15 satisfying all the requirements for reinstatement. A reinstatement appli-
16 cation for licensure will be held awaiting completion of such documenta-
17 tion as may be required, but such application shall not be held for a
18 period of time in excess of that specified in rules and regulations.

19 (c) Each licensee shall notify the board in writing of a change in name
20 ~~or~~ address ~~or of a conviction of any felony or conviction of a misdemeanor~~
21 ~~as specified by the board~~ within 30 days of the change ~~or conviction~~.
22 Failure to so notify the board shall not constitute a defense in an action
23 relating to failure to renew a license, nor shall it constitute a defense in
24 any other proceeding.

- involving an illegal drug offense

25 Sec. 5. K.S.A. 65-1117, 65-1132, 65-1155 and 65-4205 are hereby
26 repealed.

27 Sec. 6. This act shall take effect and be in force from and after its
28 publication in the statute book.