

As Amended by House Committee

Session of 2026

HOUSE BILL No. 2676

By Committee on Health and Human Services

Requested by Representative Buehler on behalf of Kansas pharmacists

2-3

1 AN ACT concerning pharmacists and pharmacy; relating to a pharmacist's
2 scope of practice; permitting a pharmacist to initiate therapy for certain
3 conditions consistent with the pharmacist's education, training and
4 experience; **adding pharmacists who initiate such therapy to the**
5 **healthcare stabilization fund; allowing for a 90-day emergency**
6 **supply of a noncontrolled prescription drug to be filled when no**
7 **refills remain; amending K.S.A. 40-3402 and K.S.A. 2025 Supp. 65-**
8 **1626a and 65-16,131 and repealing the existing section sections.**
9

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

11 **Section 1. K.S.A. 40-3402 is hereby amended to read as follows:**
12 **40-3402. (a) Prior to January 1, 2022, a policy of professional liability**
13 **insurance approved by the commissioner and issued by an insurer**
14 **duly authorized to transact business in this state in which the limit of**
15 **the insurer's liability is not less than \$200,000 per claim, subject to not**
16 **less than a \$600,000 annual aggregate for all claims made during the**
17 **policy period, shall be maintained in effect by each resident healthcare**
18 **provider as a condition of active licensure or other statutory**
19 **authorization to render professional service as a healthcare provider**
20 **in this state, unless such healthcare provider is a self-insurer. For all**
21 **new policies and policies that renew on and after January 1, 2022, a**
22 **policy of professional liability insurance approved by the**
23 **commissioner and issued by an insurer duly authorized to transact**
24 **business in this state in which the limit of the insurer's liability is not**
25 **less than \$500,000 per claim, subject to not less than a \$1,500,000**
26 **annual aggregate for all claims made during the policy period, shall be**
27 **maintained by each resident healthcare provider as a condition of**
28 **active licensure or other statutory authorization to render professional**
29 **service as a healthcare provider in this state, unless such healthcare**
30 **provider is a self-insurer. This provision shall not apply to**
31 **optometrists and pharmacists, except as provided in subsection (f), on**
32 **and after July 1, 1991, to physical therapists on and after July 1, 1995,**
33 **or to health maintenance organizations on and after July 1, 1997. Such**
34 **policy shall provide as a minimum coverage for claims made during**
35 **the term of the policy that were incurred during the term of such**

1 policy or during the prior term of a similar policy. Any insurer
2 offering such policy of professional liability insurance to any
3 healthcare provider may offer to such healthcare provider a policy as
4 prescribed in this section with deductible options. Such deductible
5 shall be within such policy limits.

6 (1) Each insurer providing basic coverage shall, within 30 days
7 after the effective date of any policy issued in accordance with this
8 subsection, notify the board of governors that such coverage is or will
9 be in effect. Such notification shall be on a form approved by the
10 board of governors and shall include information identifying the
11 professional liability policy issued or to be issued, the name and
12 address of all healthcare providers covered by the policy, the amount
13 of the annual premium, the effective and expiration dates of the
14 coverage and such other information as the board of governors shall
15 require. A copy of the notice required by this subsection shall be
16 furnished to the named insured.

17 (2) In the event of termination of basic coverage by cancellation,
18 nonrenewal, expiration or otherwise by either the insurer or named
19 insured, notice of such termination shall be furnished by the insurer to
20 the board of governors, the state agency which licenses, registers or
21 certifies the named insured and the named insured. Such notice shall
22 be provided no less than 30 days prior to the effective date of any
23 termination initiated by the insurer or within 10 business days after
24 the date coverage is terminated at the request of the named insured
25 and shall include the name and address of the healthcare provider or
26 providers for whom basic coverage is terminated and the date basic
27 coverage will cease to be in effect. No basic coverage shall be
28 terminated by cancellation or failure to renew by the insurer unless
29 such insurer provides a notice of termination as required by this
30 subsection.

31 (3) Any professional liability insurance policy issued, delivered or
32 in effect in this state on and after July 1, 1976, shall contain or be
33 endorsed to provide basic coverage as required by subsection (a).
34 Notwithstanding any omitted or inconsistent language, any contract of
35 professional liability insurance shall be construed to obligate the
36 insurer to meet all the mandatory requirements and obligations of this
37 act. The liability of an insurer for claims made prior to July 1, 1984,
38 shall not exceed those limits of insurance provided by such policy
39 prior to July 1, 1984.

40 (b) A nonresident healthcare provider shall not be licensed to
41 actively render professional service as a healthcare provider in this
42 state unless such healthcare provider maintains continuous coverage
43 in effect as prescribed by subsection (a), except such coverage may be

provided by a nonadmitted insurer who has filed the form required by subsection (b)(1). This provision shall not apply to optometrists and pharmacists on and after July 1, 1991, or to physical therapists on and after July 1, 1995.

(1) Every insurance company authorized to transact business in this state, that is authorized to issue professional liability insurance in any jurisdiction, shall file with the commissioner, as a condition of its continued transaction of business within this state, a form prescribed by the commissioner declaring that its professional liability insurance policies, wherever issued, shall be deemed to provide at least the insurance required by this subsection when the insured is rendering professional services as a nonresident healthcare provider in this state. Any nonadmitted insurer may file such a form.

(2) Every nonresident healthcare provider that is required to maintain basic coverage pursuant to this subsection shall pay the surcharge levied by the board of governors pursuant to K.S.A. 40-3404(a), and amendments thereto, directly to the board of governors and shall furnish to the board of governors the information required in subsection (a)(1).

(c) Every healthcare provider that is a self-insurer, the university of Kansas medical center for persons engaged in residency training, as described in K.S.A. 40-3401(r)(1), and amendments thereto, the employers of persons engaged in residency training, as described in K.S.A. 40-3401(r)(2), and amendments thereto, the private practice corporations or foundations and their full-time physician faculty employed by the university of Kansas medical center or a medical care facility or mental health center for self-insurers under K.S.A. 40-3414(e), and amendments thereto, shall pay the surcharge levied by the board of governors pursuant to K.S.A. 40-3404(a), and amendments thereto, directly to the board of governors and shall furnish to the board of governors the information required in subsections (a)(1) and (a)(2).

(d) In lieu of a claims made policy otherwise required under this section, a person engaged in residency training who is providing services as a healthcare provider but, while providing such services, is not covered by the self-insurance provisions of K.S.A. 40-3414(d), and amendments thereto, may obtain basic coverage under an occurrence form policy, if such policy provides professional liability insurance coverage and limits that are substantially the same as the professional liability insurance coverage and limits required by K.S.A. 40-3402(a), and amendments thereto. Where such occurrence form policy is in effect, the provisions of the healthcare provider insurance availability act referring to claims made policies shall be construed to mean

1 occurrence form policies.

2 (e) In lieu of a claims made policy otherwise required under this
3 section, a nonresident healthcare provider employed pursuant to a
4 locum tenens contract to provide services in this state as a healthcare
5 provider may obtain basic coverage under an occurrence form policy,
6 if such policy provides professional liability insurance coverage and
7 limits that are substantially the same as the professional liability
8 insurance coverage and limits required by K.S.A. 40-3402, and
9 amendments thereto. Where such occurrence form policy is in effect,
10 the provisions of the healthcare provider insurance availability act
11 referring to claims made policies shall be construed to mean
12 occurrence form policies.

13 (f) (1) A pharmacist shall be subject to the professional liability
14 insurance requirements of subsection (a) if such pharmacist independently
15 initiates therapy pursuant to K.S.A. 2025 Supp. 65-16,131, and
16 amendments thereto.

17 (2) This subsection shall take effect on and after January 1, 2028.

18 **Sec. 2. K.S.A. 2025 Supp. 65-1626a is hereby amended to read as**
19 **follows: 65-1626a. (a) For the purpose of the pharmacy act of the state**
20 **of Kansas, the following individuals shall be deemed to be engaged in**
21 **the practice of pharmacy:**

22 (1) Individuals who publicly profess to be a pharmacist, or
23 publicly profess to assume the duties incident to being a pharmacist
24 and their knowledge of drugs or drug actions, or both; and

25 (2) individuals who attach to their name any words or
26 abbreviation indicating that they are a pharmacist licensed to practice
27 pharmacy in Kansas.

28 (b) As used in this section:

29 (1) "Practice of pharmacy" means:

30 (A) The interpretation and evaluation of prescription orders;

31 (B) the compounding, dispensing and labeling of drugs and
32 devices pursuant to prescription orders;

33 (C) the administering of vaccine pursuant to a vaccination
34 protocol;

35 (D) the participation in drug selection according to state law and
36 participation in drug utilization reviews;

37 (E) the proper and safe storage of prescription drugs and
38 prescription devices and the maintenance of proper records thereof in
39 accordance with law;

40 (F) consultation with patients and other health care practitioners
41 about the safe and effective use of prescription drugs and prescription
42 devices;

43 (G) performance of collaborative drug therapy management

1 pursuant to a written collaborative practice agreement with one or
2 more physicians who have an established physician-patient
3 relationship;

4 (H) participation in the offering or performing of those acts,
5 services, operations or transactions necessary in the conduct,
6 operation, management and control of a pharmacy; and

7 (I) initiation of therapy for the conditions specified in K.S.A. 2025
8 Supp. 65-16,131, and amendments thereto; and

9 (J) dispensing a one-time emergency refill of a noncontrolled
10 prescription drug for up to a 90-day supply when no refills remain and, in
11 the pharmacists' professional judgment, continuation of therapy is
12 necessary to prevent interruption of care.

13 (2) "Collaborative drug therapy management" means a practice
14 of pharmacy where a pharmacist performs certain pharmaceutical-
15 related patient care functions for a specific patient which have been
16 delegated to the pharmacist by a physician through a collaborative
17 practice agreement. A physician who enters into a collaborative
18 practice agreement is responsible for the care of the patient following
19 initial diagnosis and assessment and for the direction and supervision
20 of the pharmacist throughout the collaborative drug therapy
21 management process. Nothing in this subsection shall be construed to
22 permit a pharmacist to alter a physician's orders or directions,
23 diagnose or treat any disease, independently prescribe drugs or
24 independently practice medicine and surgery.

25 (3) "Collaborative practice agreement" means a written
26 agreement or protocol between one or more pharmacists and one or
27 more physicians that provides for collaborative drug therapy
28 management. Such collaborative practice agreement shall contain
29 certain specified conditions or limitations pursuant to the
30 collaborating physician's order, standing order, delegation or protocol.
31 A collaborative practice agreement shall be: (A) Consistent with the
32 normal and customary specialty, competence and lawful practice of
33 the physician; and (B) appropriate to the pharmacist's training and
34 experience.

35 (4) "Physician" means a person licensed to practice medicine and
36 surgery in this state.

37 (c) Nothing in this section shall be construed to:

38 (1) Add any additional requirements for registration or for a
39 permit under the pharmacy act of the state of Kansas or for approval
40 under K.S.A. 65-1643(g), and amendments thereto;

41 (2) prevent persons other than pharmacists from engaging in
42 drug utilization review;

43 (3) require persons lawfully in possession of prescription drugs or

1 prescription devices to meet any storage or record keeping
2 requirements except such storage and record keeping requirements as
3 may be otherwise provided by law; or

4 (4) affect any person consulting with a healthcare practitioner
5 about the safe and effective use of prescription drugs or prescription
6 devices.

7 **Section 1. Sec. 3.** K.S.A. 2025 Supp. 65-16,131 is hereby amended to
8 read as follows: 65-16,131. (a) (1) *Notwithstanding the provisions of*
9 *subsections (b) through (d), a pharmacist may initiate therapy for a*
10 *condition consisting of medications and durable medical equipment if*
11 *such condition:*

12 (A) *Does not require a new diagnosis;*

13 (B) *is minor and generally self-limiting;*

14 (C) *has a test that is used to guide diagnosis or clinical decision-*
15 *making that is waived under the federal clinical laboratory improvement*
16 *amendments of 1988; or*

17 (D) *in the professional judgment of the pharmacist, constitutes a*
18 **patient emergency that threatens the health or safety of the patient if**
19 **the prescription is not immediately dispensed. In such cases, only the**
20 **sufficient quantity shall be provided until the patient is able to consult**
21 **with or be seen by the patient's personal physician or other primary**
22 **care provider.**

23 (2) Nothing in subsection (a) shall be construed to authorize a
24 pharmacist to prescribe a controlled substance, except for a
25 medication prescribed for the treatment of opioid use disorder or for
26 medication-assisted treatment.

27 (3) To determine whether a specific act is within the scope of practice
28 of pharmacy for the purposes of the pharmacy act of the state of Kansas, a
29 pharmacist shall independently determine whether such act is:

30 (A) *Expressly prohibited by the pharmacy act of the state of Kansas*
31 *or other law;*

32 (B) *consistent with the pharmacist's education, training and*
33 *experience; and*

34 (C) *within the accepted standard of care that would be provided in a*
35 *similar setting by a reasonable and prudent pharmacist with similar*
36 *education, training and experience.*

37 (b) A pharmacist may initiate therapy within the framework of a
38 statewide protocol for the following health conditions:

39 (1) Influenza;

40 (2) streptococcal pharyngitis; or

41 (3) urinary tract infection.

42 (b) The collaborative drug therapy management advisory
43 committee established pursuant to K.S.A. 65-1677, and amendments

1 thereto, may adopt a statewide protocol for each condition listed in
2 subsection (a)(b). In establishing such statewide protocols, the committee
3 shall specify:

4 (1) The medications or categories of medications included in the
5 protocol for each health condition;

6 (2) the training or qualifications required for pharmacists to
7 implement the protocols;

8 (3) requirements for documentation and maintenance of records,
9 including patient inclusion and exclusion criteria, medical referral criteria,
10 patient assessment tools based on current clinical guidelines, follow-up
11 monitoring or care plans and the pharmacist's adherence to the applicable
12 protocols; and

13 (4) communication requirements, including, but not limited to,
14 notification to the patient's personal or primary care provider.

15 (e)(d) The board may deny an application or renewal or revoke or
16 suspend the license of a pharmacist upon a finding that the pharmacist has
17 violated the provisions of this section or failed to practice within the
18 framework of statewide protocols established pursuant to this section by
19 the collaborative drug therapy management advisory committee.

20 (d)(e) This section shall take effect and be in force on and after July
21 1, 2022. The amendments to this section by this act shall be known and may
22 be cited as the pharmacist practice authority act.

23 Sec. 4. K.S.A. 40-3402 and K.S.A. 2025 Supp. 65-1626a and 65-
24 16,131 is are hereby repealed.

25 Sec. 5. This act shall take effect and be in force from and after its
26 publication in the Kansas register.