

SESSION OF 2026

**SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2509**

As Amended by House Committee on Health  
and Human Services

**Brief\***

HB 2509, as amended, would amend the Health Care Provider Insurance Availability Act to add advanced practice registered nurses (APRNs) to the list of health care providers participating in the Health Care Stabilization Fund (Fund) and add a member who is an APRN to the Board of Governors of the Fund (Board).

***APRNs Added to the Health Care Stabilization Fund***

The bill would add, commencing on January 1, 2028, any APRN licensed or granted a temporary authorization by the Board of Nursing to practice as an APRN to the definition of “healthcare provider” as it pertains to the Fund, which provides excess professional liability coverage for health care providers defined under the Act. APRNs would have six months to comply with the membership requirements of the Fund.

***Board Membership***

The bill would add one member to the Board, which would then have 12 members. The bill would require the added member to practice as a licensed APRN and be appointed by the Commissioner of Insurance (Commissioner) from a list of nominees approved by the Kansas Board of Nursing. The bill would also provide that nominees to fill a

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\*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <https://klrd.gov/>

vacancy on the Board could be submitted to the Commissioner by an alliance or academy in addition to a professional society or association, as provided in continuing law.

## **Background**

The bill was introduced by the House Committee on Health and Human Services at the request of Representative W. Carpenter.

### ***House Committee on Health and Human Services***

In the House Committee hearing, **proponent** testimony was provided by a representative of the Kansas Medical Society, who stated that APRNs are statutorily required to maintain malpractice insurance, but a minimum level of coverage is not mandated. The bill would make the minimum coverage requirement for all APRNs consistent with that which is required of all other health care providers participating in the Fund.

Written-only proponent testimony was provided by a representative of the Kansas Chiropractic Association.

**Neutral** testimony was provided by the Executive Director of the Fund, who stated that the bill would allow and require APRNs to participate in the Fund, and the Board is ready to implement the bill should it be passed.

**Opponent** testimony was provided by a representative of the Kansas Advanced Practice Registered Nurse Association, who expressed some concerns about the bill and requested the Legislature consider ensuring consistency within existing APRN malpractice requirements, addressing potential conflicts with existing coverage held by APRNs, and confirming that current major liability insurers meet Fund requirements.

Written-only opponent testimony was provided by two private citizens.

No other testimony was provided.

The House Committee amended the bill to:

- Commence APRN inclusion under the fund on January 1, 2028, rather than 2027;
- Provide APRNs with six months to comply with the membership requirements of the Fund;
- Add a member to the Fund Board of Governors who would be a practicing APRN nominated by the Board of Nursing; and
- Provide for nominees filling a vacancy on the Fund Board of Governors to be from an alliance or academy.

### **Fiscal Information**

According to the fiscal note prepared by the Division of the Budget on the bill, as introduced, the Fund indicates enactment of the bill would have an effect on expenditures and revenues of the Fund, but that this effect cannot be estimated at this time. The Fund states that there are an estimated 8,500 APRNs licensed in Kansas who do not currently participate in the Fund. If all APRNs participate in the Fund, the total number of providers would increase by approximately 30.0 percent. The Fund states that enactment of the bill would result in the collection of additional revenues from provider surcharge rates, but it is unable to estimate how much expenditures would increase if the proposed changes result in larger judgments, settlements, and attorney fees. The Fund states it would need to request an additional actuary study to estimate the financial effect. The agency notes that it may need to add an additional attorney position in future years if caseloads increase.

The Department of Insurance indicates enactment of the bill could increase premium tax collections due to additional health care providers purchasing professional liability insurance coverage. However, a precise fiscal effect cannot be estimated.

The Board of Nursing indicates enactment of the bill would not have a fiscal effect on the agency.

Any fiscal effect associated with enactment of the bill is not reflected in *The FY 2027 Governor's Budget Report*.

Health; Healthcare Provider Insurance Availability Act; Health Care Stabilization Fund; advanced practice registered nurses; APRN; healthcare provider