KANSAS ACADEMY of FAMILY PHYSICIANS

Testimony: HB 2157 – Expanding pharmacists' scope of practice (Opponent)
House Committee on Health and Human Services
Jan. 21, 2026
By: Beth Oller, MD, FAAFP, President

Chair Carpenter and members of the Committee:

Thank you for the opportunity to submit testimony in opposition to HB 2157. The members of the Kansas Academy of Family Physicians treat patients and their families with effective team-based and evidence-based care. Family physicians provide patients a medical home and a place where they always have consistent access to high quality care, often given by a group of team-based clinicians. This is achieved by providing 24 hours, seven days a week access to our patients, as well as in walk-in clinics to promote continuity of care in communities across our great state.

Research demonstrates that **patients are best served in an established medical home, by a physician-led care team, and that this is the best model for safely and efficiently meeting their health care needs**[1]**.** Based on numerous evidence-based sources, KAFP opposes HB 2157 for three reasons that are critical to patient care and safety:

- The bill goes against the heart of an established medical home and further fractures health care service and delivery[2]. This bill treats the listed conditions as if they can be separated from the whole of a patient's diagnoses, treatment, and health care needs. We oppose any legislation that serves to fracture health care treatment, thereby creating greater risks to patient safety.

- Our second issue with HB 2157 is that it contemplates pharmacists engaging in the practice of medicine, as defined in K.S.A. 65-2869(b). That statute clearly delineates what constitutes the practice of medicine and, further, establishes that only physicians shall be licensed to engage in these practices.

- *Further, the bill does not provide a procedure for when simple self-limiting cases become more complex.* It infers that caring for illnesses where management is "generally managed with minimal treatment or self-care" is risk-free and pharmacists should, therefore, be able to care for these illnesses via a collaborative agreement with a physician. The diseases specified in this bill can carry very high risks.

  For example, strep throat can have life-threatening complications, such abscesses needing drainage and enlargement of the tonsils that could restrict a patient's ability to breathe. Each of these complications would obviously be outside the scope of this bill as they are not self-limiting, but the bill does not adequately describe how pharmacists would be able to identify these serious complications and refer them to the most appropriate treatment venue – frequently in a hospital or

[1] Matt Adamson, "The Patient-Centered Medical Home: An Essential Destination on the Road to Reform," National Library of Science, 2011, https://pmc.ncbi.nlm.nih.gov/articles/PMC4106584/.
[2] AAFP, "The Key Functions of a Medical Home," 2025, https://www.aafp.org/family-physician/practice-and-career/delivery-payment-models/medical-home/comprehensiveness-and-coordination.html#:~:text=The%20medical%20home%20should%20provide,patients%20across%20the%20medical%20neighborhood.

emergency room. A collaborative agreement with a physician will not solve this issue with scope of practice. The patient's health is at risk without proper training.

This bill and other such bills that propose expanding non-physician's scope of practice into the practice of medicine share a common theme: they are focused on health care professionals' desire to practice medicine, rather than on what is safest for Kansas' patients.

We ask this committee to consider most highly what long-demonstrated research tells us is best for patients – an established medical home, with a physician-led health care team – and reject HB 2157, which further fractures health care delivery, allows non-physicians to engage in the practice of medicine, and puts patient safety at-risk.

About Kansas Academy of Family Physicians:
KAFP represents nearly 2,000 active family physicians, residents and medical students across the state. *The mission of KAFP is to empower and cultivate Kansas family physicians to advocate and collaborate for the health of all Kansans*. Quality health care and health outcomes for our patients guide our public policy work. As family physicians, we see people of all ages and genders, and treat nearly every type of ailment and illness that afflict our patients.