Approved: 32/00

Date

### MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Sandy Praeger at 10:00 a.m. on March 17, 2000 in Room 526-S of the Capitol.

All members were present except:

Committee staff present:

Norman Furse, Revisor of Statutes

Lisa Montgomery, Revisor of Statutes

Hank Avila, Legislative Research Department

JoAnn Bunten, Committee Secretary

Conferees appearing before the committee:

Others attending: See attached list

### Action on HB 2759 - Pharmacists authorized to administer drugs under certain conditions

Staff briefed the Committee on a balloon of **HB 2759** showing proposed amendments. (<u>Attachment 1</u>) The amendments would require that all vaccinees be given a written immunization record for their personal files. The administering pharmacist shall promptly report a record of the immunization to the patient's primary-care provider by electronic facsimile or mail. It the vaccinee does not have a primary care provider, the pharmacist shall promptly report a record of the immunization to a person licensed to practice medicine and surgery by the state board of healing arts and has entered into the vaccination protocol with the pharmacist.

Senator Becker made a motion to adopt the amendments as shown in the balloon of the bill, seconded by Senator Steineger. The motion carried.

Senator Steineger made a motion that the Committee recommend **HB 2759** as amended favorably for passage, seconded by Senator Becker. The motion carried.

### Action on HB 2780 - Establishing a task force on long-term care services

Staff briefed the Committee on a balloon of the bill showing proposed amendments with additional language as suggested by the Committee that would add one member to the task force who would be a trustee or board member from a long-term care facility. (Attachment 2)

Senator Steineger made a motion to adopt the amendments in the balloon of the bill as well as those proposed by the Committee, seconded by Senator Becker. The motion carried.

Senator Steineger made a motion that the Committee recommend **HB 2780** as amended favorably for passage, seconded by Senator Becker. The motion carried.

### Action on Sub HB 2169 - Nurse Practice Act

Staff briefed the Committee on a balloon of the bill that would establish annual fees for the ARNP program fixed by Rules and Regulations of the board. (<u>Attachment 3</u>)

Senator Hardenburger made a motion to adopt the balloon of the bill showing the proposed amendment, seconded by Senator Lee. The motion carried.

Senator Hardenburger made a motion that the Committee recommend **Sub HB 2169** as amended favorably for passage, seconded by Senator Steineger. The motion carried.

#### CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 526-S, Statehouse, at 10:00 a.m. on March 17, 2000.

## <u>Subcommittee update on HB 2700 - Criteria for employment in adult care hones and home health agencies</u>

Senator Hardenburger, Chair of the Subcommittee on <u>HB 2700</u> told the Committee that the Subcommittee met Friday morning March 17<sup>th</sup> to discuss the bill, and will meet again Monday, March 21<sup>st</sup> and report back to the Committee on Tuesday, March 22<sup>nd</sup>.

### <u>Action on HB 2757 - Addition of registered athletic trainers as health care providers for purposes of good Samaritan law</u>

The Chair noted that <u>HB 2757</u> was rereferred back to the Public Health and Welfare Committee on March 15<sup>th</sup> after a floor amendment was proposed and discussed on the Senate floor. The Chair briefed the Committee on the proposed amendment that related to those administrating assistance to a person and receiving compensation, and the good Samaritan law. After Committee discussion it was decided to pass the bill out again as is. <u>Senator Langworthy made a motion that the Committee recommend HB 2757 favorably for passage, seconded by Senator Steineger. The motion carried.</u>

### Adjournment

The meeting was adjourned at 11:00 a.m.

The next meeting is scheduled for March 20, 2000.

# SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

NAME	REPRESENTING
Mangkelubace	KSBN
Carolyph Dondondory	Ks St No Doon
Debra Zehr	KAHSA
Keun Barone	Hein wer Chrtd Sederico Consulping
Clark Cions	Sederico Consulgion
Tom Burgest.	KHCA
Chip Wheelen	Osteopathic Assn
Larre Pan Lover	KAHP
Sta Westuld	KNASW
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### **HOUSE BILL No. 2759**

By Committee on Health and Human Services

#### 1-31

AN ACT relating to the pharmacy act of the state of Kansas; authorizing pharmacists to administer drugs under certain conditions; amending K.S.A. 1999 Supp. 65-1626 and 65-1626a and repealing the existing sections.

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

Section 1. K.S.A. 1999 Supp. 65-1626 is hereby amended to read as follows: 65-1626. For the purposes of this act:

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

(3) a pharmacist [as authorized in section 3 and amendments thereto].

- (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 or contract 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) "Board" means the state board of pharmacy created by K.S.A. 74-1603 and amendments thereto.
- (d) "Brand exchange" means the dispensing of a different drug product of the same dosage form and strength and of the same generic name than the brand name drug product prescribed.

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

(f) "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.

(g) "Direct supervision" means the process by which the responsible pharmacist shall observe and direct the activities of a pharmacy student

Proposed Amendments to House Bill No. 2759

Senate Public Health & Welfare Date:  $\mathcal{Z} - / \mathcal{Z} - \mathcal{D}$  Attachment No.

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13 14 New Sec. 3. (a) A pharmacist may administer vaccine to a person 18 years of age or older pursuant to a vaccination protocol if the pharmacist has successfully completed a course of study and training, approved by the American council on pharmaceutical education or the board, in vaccination storage, protocols, injection technique, emergency procedures and recordkeeping. A pharmacist who successfully completes such a course of study and training shall maintain proof of completion and, upon request, provide a copy of such proof to the board.

(b) A pharmacist may not delegate to any person the authority granted under this act to administer a vaccine.

- (c) This section shall be a part of and supplemental to the pharmacy act of the state of Kansas.
- Sec. 4. K.S.A. 1999 Supp. 65-1626 and 65-1626a are hereby repealed.
- Sec. 5. This act shall take effect and be in force from and after its publication in the statute book.

(b) All vaccinees will be given a written immunization record for their personal files. The administering pharmacist shall promptly report a record of the immunization to the patient's primary-care provider by electronic facsimile or mail The immunization will also be reported to appropriate county or state immunization registries.

(c)

If the patient does not have a primary care provider, the the pharmacist shall promytly report a record of the immunization to

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### **HOUSE BILL No. 2780**

By Committee on Health and Human Services

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AN ACT establishing a task force on long-term care services to study services provided by the public and private sector to citizens of the state and laws and rules and regulations relating to such services.

WHEREAS, The legislature is vitally interested in the welfare of the citizens of this state who are consumers of long-term care services; and

WHEREAS, Services provided for citizens who are consumers of longterm care by state agencies and private vendors should be provided efficiently, economically and sensitively in a supportive state regulatory environment that partners with long-term care providers to promote continuous quality improvement; and

WHEREAS, Over the past several legislative sessions major statutory changes have been enacted relating to adult care homes and the responsibility for the administration of long-term care programs: Now, therefore,

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

Section 1. (a) A task force on long-term care services is hereby established to study the implementation and operation of recent statutory changes relating to adult care homes, the long-term care ombudsman program, state and federal laws and rules and regulations which impact on the services provided by government and the private sector to citizens who are consumers of long-term care services in skilled nursing facilities, assisted living facilities or community-based services, the financing of these services, both public and private, and such other matters relating thereto as the task force deems appropriate.

(b) The task force shall consist of 19 members appointed as follows:

(1) Six members appointed by the legislative coordinating council, three of whom shall be consumers of long-term care services which may include representatives of groups interested in improvement of the quality of long-term care, dementia, Alzheimer's disease and long-term care for persons with disabling conditions and three of whom shall be providers of long-term care services which may include a representative of for profit adult care homes, nonprofit adult care homes, free-standing assisted living

Proposed Amendments

the effectiveness of partnering activities between state agencies and long term care providers

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Appoint a trustee or board member from a long-term care facility.

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facilities and adult day care home health care agencies;

- (2) two members appointed by the president of the senate and the speaker of the house of representatives, one of whom shall be a member of the senate committee on ways and means and one of whom shall be a member of the house committee on appropriations and both of whom shall be from different political parties;
- (3) two members appointed by the president of the senate, one of whom shall be a member of the senate committee on public health and welfare and one of whom shall be a member of the senate committee on financial institutions and insurance;
- (4) two members appointed by the minority leader of the senate, one of whom shall be a member of the senate committee on public health and welfare and one of whom shall be a member of the senate committee on financial institutions and insurance;
- (5) two members appointed by the speaker of the house of representatives, one of whom shall be a member of the house committee on health and human services and one of whom shall be a member of the house committee on insurance;
- (6) two members appointed by the minority leader of the house of representatives, one of whom shall be a member of the house committee on health and human services and one of whom shall be a member of the house committee on insurance. Of the eight six members appointed by the legislative coordinating council, no more than two members shall reside in any one congressional district;
- (7) one member shall be the secretary of social and rehabilitation services or the secretary's designee;
- (8) one member shall be the secretary of health and environment or the secretary's designee; and
- (9) one member shall be the secretary of aging or the secretary's designee.
- (c) The legislative coordinating council shall appoint the chairperson and vice-chairperson from among the membership of the task force, the chairperson to be appointed from among the legislator members of the task force. Staffing for the task force shall be available from the legislative research department and, the revisor of statutes office and the division of legislative administrative services if authorized by the legislative coordinating council.
- (d) The members of the task force shall receive reimbursement for attending meetings of the task force as authorized by the legislative coordinating council consistent with the provisions of K.S.A. 46-1209 and amendments thereto.
- (e) The task force shall prepare and submit a report and recommendations to the governor and to the legislature on or before January 8,

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4 publication in the Kansas register.

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Sec. 2. This act shall take effect and be in force from and after its

(f) The provisions of this section shall expire on July 1,2001

the second Monday of January each year through 2005. In developing such recommendations the task force shall give consideration to creative, common sense solutions and approaches to problems which do not require additional

(f) As used in this section, the term "long-term care" includes a broad spectrum of supports, ranging from skilled nursing services to assistance with activities of daily living or help with instrumental activities of daily living.

expenditures of money.

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adopted by the secretary, or by an unlicensed person while engaged in and as a part of such training program in medication administration;

(j) the practice of mental health technology by licensed mental health technicians as authorized under the mental health technicians' licensure act;

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- (k) performance in the school setting of nursing procedures when delegated by a licensed professional nurse in accordance with the rules and regulations of the board;
- (l) performance of attendant care services directed by or on behalf of an individual in need of in-home care as the terms "attendant care services" and "individual in need of in-home care" are defined under K.S.A. 65-6201 and amendments thereto;
- (m) performance of a nursing procedure by a person when that procedure is delegated by a licensed nurse, within the reasonable exercise of independent nursing judgment and is performed with reasonable skill and safety by that person under the supervision of a registered professional nurse or a licensed practical nurse; or
- (n) the practice of nursing by an applicant for Kansas nurse licensure in the supervised clinical portion of a refresher course;
- (o) the practice of nursing by graduates of approved schools of professional or practical nursing pending the results of the first licensure examination scheduled following such graduation but in no case to exceed 120 days, whichever comes first; or
- (p) the teaching of the nursing process in this state by legally qualified nurses of any of the other states while in consultation with a licensed Kansas nurse as long as such individuals do not represent or hold themselves out as nurses licensed to practice in this state.
- Sec. 8. K.S.A. 65-1133 is hereby amended to read as follows: 65-1133. (a) An accredited approved educational and training program for advanced registered nurse practitioners is a program conducted in Kansas which has been approved by the board as meeting the standards and the rules and regulations of the board. An institution desiring to conduct an educational and training program for advanced registered nurse practitioners shall apply to the board for accreditation approval and submit satisfactory proof that it is prepared to and will maintain the standards and the required curriculum for advanced registered nurse practitioners as prescribed by this act and by the rules and regulations of the board. Applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board. The accreditation approval of an educational and training proram for advanced registered nurse practitioners shall expire two not exceed 10 years after the granting of such accreditation approval by the board. An institution desiring to continue to conduct an accredited ap-

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proved educational and training program for advanced registered nurse practitioners shall apply to the board for the renewal of accreditation approval and submit satisfactory proof that it will maintain the standards and the required curriculum for advanced registered nurse practitioners as prescribed by this act and by the rules and regulations of the board. Applications for renewal of accreditation approval shall be made in writing on forms supplied by the board and. Each program shall be submitted submit annually to the board together with the application an annual fee fixed by the board board's rules and regulations to maintain the approved status

- (b) A program to qualify as an accredited approved educational and training program for advanced registered nurse practitioners must be conducted in the state of Kansas, and the school conducting the program must apply to the board and submit evidence that: (1) It is prepared to carry out the curriculum prescribed by rules and regulations of the board; and (2) it is prepared to meet such other standards as shall be established by law and the rules and regulations of the board.
- (c) The board shall prepare and maintain a list of programs which qualify as accredited approved educational and training programs for advanced registered nurse practitioners whose graduates, if they have the other necessary qualifications provided in this act, shall be eligible to apply for certificates of qualification as advanced registered nurse practitioners. A survey of the institution or school applying for accreditation approval of an educational and training program for advanced registered nurse practitioners shall be made by an authorized employee of the board or members of the board, who shall submit a written report of the survey to the board. If, in the opinion of the board, the requirements as prescribed by the board in its rules and regulations for accreditation approval are met, it shall so approve and accredit the program. From time to time, as deemed necessary by the board, it shall eause to be made a resurvey of accredited programs and written reports of such resurveys submitted to the board. The board shall resurvey approved programs on a periodic basis as determined by rules and regulations. If the board determines that any accredited approved program is not maintaining the standards required by this act and by rules and regulations prescribed by the board, notice thereof in writing, specifying the failures of such program, shall be given. A program which fails to correct such conditions to the satisfaction of the board within a reasonable time shall be removed from the list of accredited approved programs until such time as the program shall comply with said such standards. All accredited approved programs shall maintain accurate and current records showing in full the theoretical and practical courses given to each student.



(d) The board may accept nationally accredited advanced registered

nurse practitioner programs such as:

(1) Advanced registered nurse practitioner programs which have received accreditation from a board recognized national nursing accreditation agency shall file evidence of initial accreditation with the board, and thereafter shall file all reports from the accrediting agency and any notice of any change in school accreditation status. The board may grant approval based upon evidence of such accreditation.

(2) Advanced registered nurse practitioner programs holding approval based upon national accreditation are also responsible for complying with all other requirements as determined by rules and regulations of

the board.

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(3) The board may grant approval to an advanced registered nurse practitioner program with national accreditation for a continuing period not to exceed 10 years.

Sec. 9. K.S.A. 1998 Supp. 65-1136 is hereby amended to read as

follows: 65-1136. (a) As used in this section:

(1) "Provider" means a person who is approved by the board to administer an examination and to offer an intravenous fluid therapy course which has been approved by the board.

(2) "Person" means an individual, organization, agency, institution or

other legal entity.

(3) "Examination" means an intravenous fluid therapy competency

examination approved by the board.

(4) "Supervision" means provision of guidance by a qualified nurse for the accomplishment of a nursing task or activity with initial direction of the task or activity and periodic inspection of the actual act of accomplishing the task or activity.

(b) A licensed practical nurse may perform a limited scope of intravenous fluid therapy under the supervision of a registered professional

nurse.

(c) A licensed practical nurse may perform an expanded scope of intravenous fluid therapy under the supervision of a registered professional nurse, if the licensed practical nurse:

(1) Has had one year of elinical experience and Successfully completes an intravenous fluid therapy course given by an approved a provider and passes an intravenous fluid therapy examination administered by an approved a provider; or

(2) has had one year of clinical experience, has performed intravenous fluid therapy prior to the effective date of this act and has successfully

passed an examination; or

(3) has had one year of clinical experience, (2) has successfully completed an intravenous fluid therapy course not given by an approved provider and has passed an intravenous fluid therapy examination not ad-