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MEMORANDUM

To: Chairman Turk and members of the Higher Education Budget Committee

From: Office of Revisor of Statutes

Date: February 9, 2026

Subject: **House Bill 2374:** Creating the specialty practice student loan program and the specialty practice student loan repayment fund, allowing for the transfer of funds from the OBGYN and psychiatry medical student loan repayment funds to the specialty practice student loan repayment fund and abolishing the OBGYN and psychiatry medical student loan repayment funds.—As Introduced

House Bill 2374 alters the student medical loan act by creating the specialty practice student loan program and ending the psychiatry and OBGYN medical student loan programs. The bill also abolishes accompanying funds which such program and would establish a specialty practice student loan repayment fund and transfer funds and liabilities from such funds abolished.

Section 1 establishes a specialty practice student loan program to be administered by the University of Kansas Medical Center, who shall enter into medical student loan agreements with undergraduate students who intend to pursue practice of an approved specialty and commit to practicing full-time in a service commitment area. The Chancellor shall determine specialties to be added to the approved specialties and the locations for service commitment areas. Each fiscal year, any unawarded specialty agreements may be used for primary care agreements, but unawarded primary care agreements may not be used for specialty agreements.

Section 2 amends K.S.A. 76-380 to add section 1 to the existing medical student loan act. Section 3 amends K.S.A. 76-381, definitions for the act. The bill would further define "service commitment area" as for approved specialty providers means any community within any county in Kansas, other than Douglas, Johnson, Sedgwick, Shawnee or Wyandotte. The bill would define "approved specialty" as gynecology, general psychiatry and any specialty approved by the chancellor of the university of Kansas and "primary care" as general pediatrics, general internal medicine, family medicine, family practice and emergency medicine.

Section 4 amends K.S.A. 76-382 to provide program stipends for a 12-month period rather than a school or academic year. The bill would also remove subsection (f) that directs the university to enter into agreements with up to 12 individuals who commit to full-time practice in a service commitment area by serving as full-time faculty of general or child psychiatry or

performing at least 100 hours per month of on-site mental healthcare. Section 5 amends K.S.A. 76-384 to also no longer allow a program participant to satisfy the obligation to engage in full-time practice by serving as a full-time faculty of general or child psychiatry.

Section 6 amends K.S.A. 76-385 and would not allow for the Chancellor to make expenditures from the medical loan repayment fund for medical student loans for medical students who intend to enter and complete an approved postgraduate residency training program in an approved specialty, including, but not limited to, obstetrics and gynecology, general psychiatry or child psychiatry. But, the section would allow the Chancellor to transfer funds from the fund to the specialty loan repayment fund for such students in an approved specialty under the medical student loan act.

The section also would abolish and rename the psychiatry medical loan repayment fund to the specialty medical loan repayment fund. The moneys credited to such fund would be for students in an approved specialty program. This section would also allow for any leftover moneys from unawarded specialty agreements to be used for primary care agreements. The bill would also abolish the OBGYN medical loan repayment fund and transfer all moneys in such fund to the specialty medical loan repayment fund. All limitations and liabilities on the psychiatry medical loan repayment fund and the OBGYN medical loan repayment fund would be imposed on the new specialty medical loan repayment fund.

If enacted, the bill would take effect on and after July 1, 2026, publication in the statute book.