

Testimony on SB448

Submitted To

Senate Public Health and Welfare Committee

By

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February 10, 2026

On behalf of the Kansas Association of Health Departments (KALHD), thank you for the opportunity to speak today. We are a proponent for SB 448.

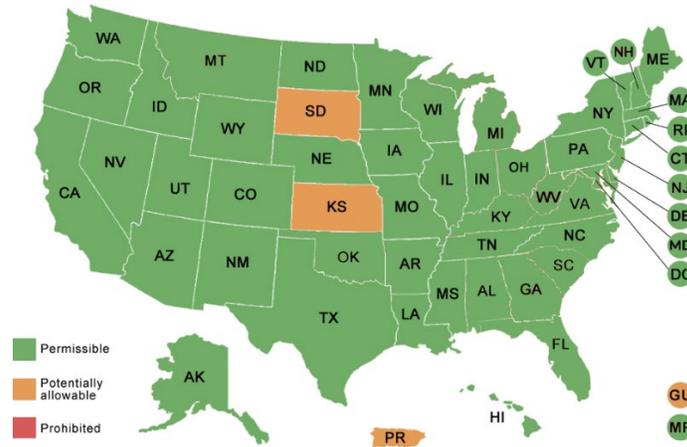
Expedited Partner Therapy (EPT) is a simple, evidence-based public health tool that allows clinicians to provide medication or prescriptions to the sexual partners of patients diagnosed with certain Sexually Transmitted Infections (STI) without requiring the partner to first undergo an in-person medical evaluation. An approach that is endorsed by¹ the Centers for Disease Control and Prevention (CDC) as a safe and effective strategy to reduce reinfection and prevent the further spread of STIs.

When a patient is treated but their partner is not, reinfection is common, creating a cycle that strains families, communities, and the healthcare system. EPT breaks that cycle. It ensures timely treatment, especially for individuals who face barriers such as lack of transportation, limited clinic access, stigma, or cost concerns. Most states have already adopted it because it works.

As the following map from the CDC illustrates, Kansas is currently one of two remaining states without clear statutory authority² for EPT.

¹ [Expedited Partner Therapy | STI | CDC](#)

² [Legal Status of Expedited Partner Therapy \(EPT\) | STI | CDC](#)



SB 448 is a practical and cost-effective solution that simply gives clinicians the legal clarity and protection they need to use a CDC-recommended tool when appropriate. And passing SB 448 would bring Kansas in line with national best practices, strengthen our public health infrastructure, and protect the health of thousands of Kansans each year.

I respectfully urge the committee to advance this bill and to advocate for its passage during the 2026 legislative session.

Thank you for your consideration.