

As Amended by Senate Committee

Session of 2025

HOUSE BILL No. 2223

By Committee on Health and Human Services

Requested by Representative Buehler on behalf of the Kansas Optometric Association

2-3

1 AN ACT concerning health professions and practices; relating to
2 optometry; modifying certain provisions of the optometry law related to
3 scope of practice, definitions and credentialing requirements; amending
4 K.S.A. ~~40-3402, 40-3403~~, 65-1501, 65-1509a, 65-1512, 65-1523 ~~and~~,
5 74-1504 ~~and~~ 74-1505 and K.S.A. ~~2024~~ 2025 Supp. 65-1501a and 65-
6 1505 and repealing the existing sections; also repealing K.S.A. 65-1514
7 ~~and~~ 74-1505.
8

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

10 *Section 1. K.S.A. 40-3402 is hereby amended to read as follows: 40-
11 3402. (a) Prior to January 1, 2022, a policy of professional liability
12 insurance approved by the commissioner and issued by an insurer duly
13 authorized to transact business in this state in which the limit of the
14 insurer's liability is not less than \$200,000 per claim, subject to not less
15 than a \$600,000 annual aggregate for all claims made during the policy
16 period, shall be maintained in effect by each resident healthcare
17 provider as a condition of active licensure or other statutory
18 authorization to render professional service as a healthcare provider in
19 this state, unless such healthcare provider is a self-insurer. For all new
20 policies and policies that renew on and after January 1, 2022, a policy of
21 professional liability insurance approved by the commissioner and
22 issued by an insurer duly authorized to transact business in this state in
23 which the limit of the insurer's liability is not less than \$500,000 per
24 claim, subject to not less than a \$1,500,000 annual aggregate for all
25 claims made during the policy period, shall be maintained by each
26 resident healthcare provider as a condition of active licensure or other
27 statutory authorization to render professional service as a healthcare
28 provider in this state, unless such healthcare provider is a self-insurer.
29 This provision shall not apply to optometrists, except as provided in
30 subsection (f), and pharmacists on and after July 1, 1991, to physical
31 therapists on and after July 1, 1995, or to health maintenance
32 organizations on and after July 1, 1997. Such policy shall provide as a
33 minimum coverage for claims made during the term of the policy that
34 were incurred during the term of such policy or during the prior term of*

1 *a similar policy. Any insurer offering such policy of professional liability
2 insurance to any healthcare provider may offer to such healthcare
3 provider a policy as prescribed in this section with deductible options.
4 Such deductible shall be within such policy limits.*

5 *(1) Each insurer providing basic coverage shall, within 30 days
6 after the effective date of any policy issued in accordance with this
7 subsection, notify the board of governors that such coverage is or will be
8 in effect. Such notification shall be on a form approved by the board of
9 governors and shall include information identifying the professional
10 liability policy issued or to be issued, the name and address of all
11 healthcare providers covered by the policy, the amount of the annual
12 premium, the effective and expiration dates of the coverage and such
13 other information as the board of governors shall require. A copy of the
14 notice required by this subsection shall be furnished to the named
15 insured.*

16 *(2) In the event of termination of basic coverage by cancellation,
17 nonrenewal, expiration or otherwise by either the insurer or named
18 insured, notice of such termination shall be furnished by the insurer to
19 the board of governors, the state agency which licenses, registers or
20 certifies the named insured and the named insured. Such notice shall be
21 provided no less than 30 days prior to the effective date of any
22 termination initiated by the insurer or within 10 business days after the
23 date coverage is terminated at the request of the named insured and
24 shall include the name and address of the healthcare provider or
25 providers for whom basic coverage is terminated and the date basic
26 coverage will cease to be in effect. No basic coverage shall be terminated
27 by cancellation or failure to renew by the insurer unless such insurer
28 provides a notice of termination as required by this subsection.*

29 *(3) Any professional liability insurance policy issued, delivered or
30 in effect in this state on and after July 1, 1976, shall contain or be
31 endorsed to provide basic coverage as required by subsection (a).
32 Notwithstanding any omitted or inconsistent language, any contract of
33 professional liability insurance shall be construed to obligate the insurer
34 to meet all the mandatory requirements and obligations of this act. The
35 liability of an insurer for claims made prior to July 1, 1984, shall not
36 exceed those limits of insurance provided by such policy prior to July 1,
37 1984.*

38 *(b) A nonresident healthcare provider shall not be licensed to
39 actively render professional service as a healthcare provider in this state
40 unless such healthcare provider maintains continuous coverage in effect
41 as prescribed by subsection (a), except such coverage may be provided by
42 a nonadmitted insurer who has filed the form required by subsection (b)
43 (1). This provision shall not apply to optometrists, except as provided in*

1 subsection (f), and pharmacists on and after July 1, 1991, or to physical
2 therapists on and after July 1, 1995.

3 (1) Every insurance company authorized to transact business in
4 this state, that is authorized to issue professional liability insurance in
5 any jurisdiction, shall file with the commissioner, as a condition of its
6 continued transaction of business within this state, a form prescribed by
7 the commissioner declaring that its professional liability insurance
8 policies, wherever issued, shall be deemed to provide at least the
9 insurance required by this subsection when the insured is rendering
10 professional services as a nonresident healthcare provider in this state.
11 Any nonadmitted insurer may file such a form.

12 (2) Every nonresident healthcare provider that is required to
13 maintain basic coverage pursuant to this subsection shall pay the
14 surcharge levied by the board of governors pursuant to K.S.A. 40-
15 3404(a), and amendments thereto, directly to the board of governors and
16 shall furnish to the board of governors the information required in
17 subsection (a)(1).

18 (c) Every healthcare provider that is a self-insurer, the university of
19 Kansas medical center for persons engaged in residency training, as
20 described in K.S.A. 40-3401(r)(1), and amendments thereto, the
21 employers of persons engaged in residency training, as described in
22 K.S.A. 40-3401(r)(2), and amendments thereto, the private practice
23 corporations or foundations and their full-time physician faculty
24 employed by the university of Kansas medical center or a medical care
25 facility or mental health center for self-insurers under K.S.A. 40-
26 3414(e), and amendments thereto, shall pay the surcharge levied by the
27 board of governors pursuant to K.S.A. 40-3404(a), and amendments
28 thereto, directly to the board of governors and shall furnish to the board
29 of governors the information required in subsections (a)(1) and (a)(2).

30 (d) In lieu of a claims made policy otherwise required under this
31 section, a person engaged in residency training who is providing services
32 as a healthcare provider but, while providing such services, is not
33 covered by the self-insurance provisions of K.S.A. 40-3414(d), and
34 amendments thereto, may obtain basic coverage under an occurrence
35 form policy, if such policy provides professional liability insurance
36 coverage and limits that are substantially the same as the professional
37 liability insurance coverage and limits required by K.S.A. 40-3402(a),
38 and amendments thereto. Where such occurrence form policy is in
39 effect, the provisions of the healthcare provider insurance availability
40 act referring to claims made policies shall be construed to mean
41 occurrence form policies.

42 (e) In lieu of a claims made policy otherwise required under this
43 section, a nonresident healthcare provider employed pursuant to a

1 *locum tenens contract to provide services in this state as a healthcare*
2 *provider may obtain basic coverage under an occurrence form policy, if*
3 *such policy provides professional liability insurance coverage and limits*
4 *that are substantially the same as the professional liability insurance*
5 *coverage and limits required by K.S.A. 40-3402, and amendments*
6 *thereto. Where such occurrence form policy is in effect, the provisions of*
7 *the healthcare provider insurance availability act referring to claims*
8 *made policies shall be construed to mean occurrence form policies.*

9 (f) (1) Except as provided in paragraph (2), an optometrist shall be
10 subject to the professional liability insurance requirements of subsection
11 (a) if such optometrist has been credentialed to provide the incision and
12 curettage of a chalazion, removal and biopsy of skin lesions and laser
13 capsulotomy.

14 (2) An optometrist shall not be subject to the requirements of
15 subsection (a) if the initial surcharge to participate in the healthcare
16 stabilization fund exceeds 15%.

17 (3) This subsection shall take effect on and after January 1, 2028.

18 **Sec. 2. K.S.A. 40-3403 is hereby amended to read as follows: 40-**
19 *3403. (a) For the purpose of paying damages for personal injury or*
20 *death arising out of the rendering of or the failure to render*
21 *professional services by a healthcare provider, self-insurer or inactive*
22 *health care provider subsequent to the time that such healthcare*
23 *provider or self-insurer has qualified for coverage under the provisions*
24 *of this act, there is hereby established the healthcare stabilization fund.*
25 *The fund shall be held in trust in the state treasury and accounted for*
26 *separately from other state funds. The board of governors shall*
27 *administer the fund or contract for the administration of the fund with*
28 *an insurance company authorized to do business in this state.*

29 (b) (1) There is hereby created a board of governors that shall be
30 composed of such members and shall have such powers, duties and
31 functions as are prescribed by this act. The board of governors shall:

32 (A) Administer the fund and exercise and perform other powers,
33 duties and functions required of the board under the healthcare provider
34 insurance availability act;

35 (B) provide advice, information and testimony to the appropriate
36 licensing or disciplinary authority regarding the qualifications of a
37 healthcare provider;

38 (C) prepare and publish, on or before October 1 of each year, a
39 report for submission to the healthcare stabilization fund oversight
40 committee that includes a summary of the fund's activity during the
41 preceding fiscal year, including, but not limited to, the amount collected
42 from surcharges, the highest and lowest surcharges assessed, the
43 amount paid from the fund, the number of judgments paid from the

1 fund, the number of settlements paid from the fund and the fund
2 balance at the end of the fiscal year; and

3 (D) have the authority to grant temporary exemptions from the
4 provisions of K.S.A. 40-3402 and 40-3404, and amendments thereto, to
5 healthcare providers who have exceptional circumstances and verify in
6 writing that the healthcare provider will not render professional services
7 in this state during the period of exemption. Whenever the board grants
8 such an exemption, the board shall notify the state agency that licenses
9 the exempted healthcare provider.

10 (2) The board shall consist of 11 12 persons appointed by the
11 commissioner of insurance, as provided by this subsection and as
12 follows:

13 (A) Three members who are on a list of nominees submitted to the
14 commissioner by the Kansas medical society, at least two of whom are
15 doctors of medicine who are licensed to practice medicine and surgery in
16 Kansas;

17 (B) three members who are on a list of nominees submitted to the
18 commissioner by the Kansas hospital association and who are
19 representatives of Kansas hospitals;

20 (C) two members who are on a list of nominees submitted to the
21 commissioner by the Kansas association of osteopathic medicine, who
22 are licensed to practice medicine and surgery in Kansas and who are
23 doctors of osteopathic medicine;

24 (D) one member who is on a list of nominees submitted to the
25 commissioner by the Kansas chiropractic association and who is
26 licensed to practice chiropractic in Kansas;

27 (E) one member who is on a list of nominees submitted to the
28 commissioner by the Kansas association of nurse anesthetists and who is
29 a licensed professional nurse authorized to practice as a registered nurse
30 anesthetist; and

31 (F) one member who is on a list of nominees submitted to the
32 commissioner by statewide associations comprised of members who
33 represent adult care homes and who is a representative of adult care
34 homes; and

35 (G) one member who is on a list of nominees submitted to the
36 commissioner by the Kansas optometric association and who is a licensed
37 optometrist authorized to practice as an optometrist.

38 (3) When a vacancy occurs in the membership of the board of
39 governors created by this act, the commissioner shall appoint a
40 successor of like qualifications from a list of three nominees submitted
41 to the commissioner by the professional society or association prescribed
42 by this section for the category of healthcare provider required for the
43 vacant position on the board of governors. All appointments made shall

1 *be for a term of office of four years, but no member shall be appointed*
2 *for more than two successive four-year terms. Each member shall serve*
3 *until a successor is appointed and qualified. Whenever a vacancy occurs*
4 *in the membership of the board of governors created by this act for any*
5 *reason other than the expiration of a member's term of office, the*
6 *commissioner shall appoint a successor of like qualifications to fill the*
7 *unexpired term. In each case of a vacancy occurring in the membership*
8 *of the board of governors, the commissioner shall notify the professional*
9 *society or association that represents the category of healthcare provider*
10 *required for the vacant position and request a list of three nominations*
11 *of healthcare providers from which to make the appointment.*

12 (4) *The board of governors shall organize in July of each year and*
13 *shall elect a chairperson and vice chairperson from among its*
14 *membership. Meetings shall be called by the chairperson or by a written*
15 *notice signed by three members of the board.*

16 (5) *The board of governors, in addition to other duties imposed by*
17 *this act, shall study and evaluate the operation of the fund and make*
18 *such recommendations to the legislature as may be appropriate to*
19 *ensure the viability of the fund.*

20 (6) (A) *The board shall appoint an executive director who shall be*
21 *in the unclassified service under the Kansas civil service act and may*
22 *employ attorneys and other employees who shall also be in the*
23 *unclassified service under the Kansas civil service act. Such executive*
24 *director, attorneys and other employees shall receive compensation fixed*
25 *by the board, in accordance with appropriation acts of the legislature,*
26 *not subject to approval of the governor.*

27 (B) *The board may provide all office space, services, equipment,*
28 *materials and supplies, and all budgeting, personnel, purchasing and*
29 *related management functions required by the board in the exercise of*
30 *the powers, duties and functions imposed or authorized by the*
31 *healthcare provider insurance availability act or may enter into a*
32 *contract with the commissioner of insurance for the provision, by the*
33 *commissioner, of all or any part thereof.*

34 (7) *The commissioner shall:*

35 (A) *Provide technical and administrative assistance to the board of*
36 *governors with respect to administration of the fund upon request of the*
37 *board; and*

38 (B) *provide such expertise as the board may reasonably request*
39 *with respect to evaluation of claims or potential claims.*

40 (c) *Except as otherwise provided by any other provision of this act,*
41 *the fund shall be liable to pay:*

42 (1) *Any amount due from a judgment or settlement that is in excess*
43 *of the basic coverage liability of all liable resident healthcare providers*

1 *or resident self-insurers for any personal injury or death arising out of
2 the rendering of or the failure to render professional services within or
3 without this state;*

4 *(2) subject to the provisions of subsection (f), any amount due from
5 a judgment or settlement that is in excess of the basic coverage liability
6 of all liable nonresident healthcare providers or nonresident self-
7 insurers for any such injury or death arising out of the rendering or the
8 failure to render professional services within this state but in no event
9 shall the fund be obligated for claims against nonresident healthcare
10 providers or nonresident self-insurers who have not complied with this
11 act or for claims against nonresident healthcare providers or
12 nonresident self-insurers that arose outside of this state;*

13 *(3) subject to the provisions of subsection (f), any amount due from
14 a judgment or settlement against a resident inactive healthcare provider
15 for any such injury or death arising out of the rendering of or failure to
16 render professional services;*

17 *(4) subject to the provisions of subsection (f), any amount due from
18 a judgment or settlement against a nonresident inactive healthcare
19 provider for any injury or death arising out of the rendering or failure to
20 render professional services within this state, but in no event shall the
21 fund be obligated for claims against nonresident inactive healthcare
22 providers:*

23 *(A) Who have not complied with this act; or*

24 *(B) for claims that arose outside of this state, unless such
25 healthcare provider was a resident healthcare provider or resident self-
26 insurer at the time such act occurred;*

27 *(5) subject to K.S.A. 40-3411(b), and amendments thereto,
28 reasonable and necessary expenses for attorney fees, depositions, expert
29 witnesses and other costs incurred in defending the fund against claims,
30 and such expenditures shall not be subject to the provisions of K.S.A.
31 75-3738 through 75-3744, and amendments thereto;*

32 *(6) any amounts expended for reinsurance obtained to protect the
33 best interests of the fund purchased by the board of governors, which
34 purchase shall be subject to the provisions of K.S.A. 75-3738 through
35 75-3744, and amendments thereto, but shall not be subject to the
36 provisions of K.S.A. 75-4101, and amendments thereto;*

37 *(7) reasonable and necessary actuarial expenses incurred in
38 administering the act, including expenses for any actuarial studies
39 contracted for by the legislative coordinating council, and such
40 expenditures shall not be subject to the provisions of K.S.A. 75-3738
41 through 75-3744, and amendments thereto;*

42 *(8) periodically to the plan or plans, any amount due pursuant to
43 K.S.A. 40-3413(a)(3), and amendments thereto;*

1 (9) reasonable and necessary expenses incurred by the board of
2 governors in the administration of the fund or in the performance of
3 other powers, duties or functions of the board under the healthcare
4 provider insurance availability act;

5 (10) surcharge refunds payable when the notice of cancellation
6 requirements of K.S.A. 40-3402, and amendments thereto, are met;

7 (11) subject to K.S.A. 40-3411(b), and amendments thereto,
8 reasonable and necessary expenses for attorney fees and other costs
9 incurred in defending a person engaged or who was engaged in
10 residency training or the private practice corporations or foundations
11 and their full-time physician faculty employed by the university of
12 Kansas medical center or any nonprofit corporation organized to
13 administer the graduate medical education programs of community
14 hospitals or medical care facilities affiliated with the university of
15 Kansas school of medicine from claims for personal injury or death
16 arising out of the rendering of or the failure to render professional
17 services by such healthcare provider;

18 (12) any amount due from a judgment or settlement for an injury or
19 death arising out of the rendering of or failure to render professional
20 services by a person engaged or who was engaged in residency training
21 or the private practice corporations or foundations and their full-time
22 physician faculty employed by the university of Kansas medical center or
23 any nonprofit corporation organized to administer the graduate medical
24 education programs of community hospitals or medical care facilities
25 affiliated with the university of Kansas school of medicine;

26 (13) subject to the provisions of K.S.A. 65-429, and amendments
27 thereto, reasonable and necessary expenses for the development and
28 promotion of risk management education programs and for the medical
29 care facility licensure and risk management survey functions carried out
30 under K.S.A. 65-429, and amendments thereto;

31 (14) any amount, but not less than the required basic coverage
32 limits, owed pursuant to a judgment or settlement for any injury or death
33 arising out of the rendering of or failure to render professional services
34 by a person, other than a person described in paragraph (12), who was
35 engaged in a postgraduate program of residency training approved by
36 the state board of healing arts but who, at the time the claim was made,
37 was no longer engaged in such residency program;

38 (15) subject to K.S.A. 40-3411(b), and amendments thereto,
39 reasonable and necessary expenses for attorney fees and other costs
40 incurred in defending a person described in paragraph (14);

41 (16) expenses incurred by the commissioner in the performance of
42 duties and functions imposed upon the commissioner by the healthcare
43 provider insurance availability act, and expenses incurred by the

1 *commissioner in the performance of duties and functions under*
2 *contracts entered into between the board and the commissioner as*
3 *authorized by this section; and*

4 *(17) periodically to the state general fund reimbursements of*
5 *amounts paid to members of the healthcare stabilization fund oversight*
6 *committee for compensation, travel expenses and subsistence expenses*
7 *pursuant to K.S.A. 40-3403b(e), and amendments thereto.*

8 *(d) All amounts for which the fund is liable pursuant to subsection*
9 *(c) shall be paid promptly and in full except that, if the amount for*
10 *which the fund is liable is \$500,000 or more, it shall be paid by*
11 *installment payments of \$500,000 or 10% of the amount of the judgment*
12 *including interest thereon, whichever is greater, per fiscal year, the first*
13 *installment to be paid within 60 days after the fund becomes liable and*
14 *each subsequent installment to be paid annually on the same date of the*
15 *year the first installment was paid, until the claim has been paid in full.*

16 *(e) In no event shall the fund be liable to pay in excess of*
17 *\$3,000,000 pursuant to any one judgment or settlement against any one*
18 *healthcare provider relating to any injury or death arising out of the*
19 *rendering of or the failure to render professional services on and after*
20 *July 1, 1984, and before July 1, 1989, subject to an aggregate limitation*
21 *for all judgments or settlements arising from all claims made in any one*
22 *fiscal year in the amount of \$6,000,000 for each healthcare provider.*

23 *(f) In no event shall the fund be liable to pay in excess of the*
24 *amounts specified in the option selected by an active or inactive*
25 *healthcare provider pursuant to subsection (l) for judgments or*
26 *settlements relating to injury or death arising out of the rendering of or*
27 *failure to render professional services by such healthcare provider on or*
28 *after July 1, 1989.*

29 *(g) A healthcare provider shall be deemed to have qualified for*
30 *coverage under the fund:*

31 *(1) On and after July 1, 1976, if basic coverage is then in effect;*
32 *(2) subsequent to July 1, 1976, at such time as basic coverage*
33 *becomes effective; or*
34 *(3) upon qualifying as a self-insurer pursuant to K.S.A. 40-3414,*
35 *and amendments thereto.*

36 *(h) A healthcare provider who is qualified for coverage under the*
37 *fund shall have no vicarious liability or responsibility for any injury or*
38 *death arising out of the rendering of or the failure to render*
39 *professional services inside or outside this state by any other healthcare*
40 *provider who is also qualified for coverage under the fund. The*
41 *provisions of this subsection shall apply to all claims filed on or after*
42 *July 1, 1986.*

43 *(i) Notwithstanding the provisions of K.S.A. 40-3402, and*

1 *amendments thereto, if the board of governors determines due to the*
2 *number of claims filed against a healthcare provider or the outcome of*
3 *those claims that an individual healthcare provider presents a material*
4 *risk of significant future liability to the fund, the board of governors is*
5 *authorized by a vote of a majority of the members thereof, after notice*
6 *and an opportunity for hearing in accordance with the provisions of the*
7 *Kansas administrative procedure act, to terminate the liability of the*
8 *fund for all claims against the healthcare provider for damages for*
9 *death or personal injury arising out of the rendering of or the failure to*
10 *render professional services after the date of termination. The date of*
11 *termination shall be 30 days after the date of the determination by the*
12 *board of governors. The board of governors, upon termination of the*
13 *liability of the fund under this subsection, shall notify the licensing or*
14 *other disciplinary board having jurisdiction over the healthcare provider*
15 *involved of the name of the healthcare provider and the reasons for the*
16 *termination.*

17 (j) (1) *Subject to the provisions of paragraph (7), upon the payment*
18 *of moneys from the healthcare stabilization fund pursuant to subsection*
19 *(c)(11), the board of governors shall certify to the secretary of*
20 *administration the amount of such payment, and the secretary of*
21 *administration shall transfer an amount equal to the amount certified,*
22 *reduced by any amount transferred pursuant to paragraph (3) or (4),*
23 *from the state general fund to the healthcare stabilization fund.*

24 (2) *Subject to the provisions of paragraph (7), upon the payment of*
25 *moneys from the healthcare stabilization fund pursuant to subsection (c)*
26 *(12), the board of governors shall certify to the secretary of*
27 *administration the amount of such payment that is equal to the basic*
28 *coverage liability of self-insurers, and the secretary of administration*
29 *shall transfer an amount equal to the amount certified, reduced by any*
30 *amount transferred pursuant to paragraph (3) or (4), from the state*
31 *general fund to the healthcare stabilization fund.*

32 (3) *The university of Kansas medical center private practice*
33 *foundation reserve fund is hereby established in the state treasury. If the*
34 *balance in such reserve fund is less than \$500,000 on July 1 of any year,*
35 *the private practice corporations or foundations referred to in K.S.A. 40-*
36 *3402(c), and amendments thereto, shall remit the amount necessary to*
37 *increase such balance to \$500,000 to the state treasurer for credit to*
38 *such reserve fund as soon after such July 1 date as is practicable. Upon*
39 *receipt of each such remittance, the state treasurer shall credit the same*
40 *to such reserve fund. When compliance with the foregoing provisions of*
41 *this paragraph have been achieved on or after July 1 of any year in*
42 *which the same are applicable, the state treasurer shall certify to the*
43 *board of governors that such reserve fund has been funded for the year*

1 in the manner required by law. Moneys in such reserve fund may be
2 invested or reinvested in accordance with the provisions of K.S.A. 40-
3 3406, and amendments thereto, and any income or interest earned by
4 such investments shall be credited to such reserve fund. Upon payment
5 of moneys from the healthcare stabilization fund pursuant to subsection
6 (c)(11) or (c)(12) with respect to any private practice corporation or
7 foundation or any of its full-time physician faculty employed by the
8 university of Kansas, the secretary of administration shall transfer an
9 amount equal to the amount paid from the university of Kansas medical
10 center private practice foundation reserve fund to the healthcare
11 stabilization fund or, if the balance in such reserve fund is less than the
12 amount so paid, an amount equal to the balance in such reserve fund.

13 (4) The graduate medical education administration reserve fund is
14 hereby established in the state treasury. If the balance in such reserve
15 fund is less than \$40,000 on July 1 of any year, the nonprofit
16 corporations organized to administer the graduate medical education
17 programs of community hospitals or medical care facilities affiliated
18 with the university of Kansas school of medicine shall remit the amount
19 necessary to increase such balance to \$40,000 to the state treasurer for
20 credit to such reserve fund as soon after such July 1 date as is
21 practicable. Upon receipt of each such remittance, the state treasurer
22 shall credit the same to such reserve fund. When compliance with the
23 foregoing provisions of this paragraph have been achieved on or after
24 July 1 of any year in which the same are applicable, the state treasurer
25 shall certify to the board of governors that such reserve fund has been
26 funded for the year in the manner required by law. Moneys in such
27 reserve fund may be invested or reinvested in accordance with the
28 provisions of K.S.A. 40-3406, and amendments thereto, and any income
29 or interest earned by such investments shall be credited to such reserve
30 fund. Upon payment of moneys from the healthcare stabilization fund
31 pursuant to subsection (c)(11) or (c)(12) with respect to any nonprofit
32 corporations organized to administer the graduate medical education
33 programs of community hospitals or medical care facilities affiliated
34 with the university of Kansas school of medicine the secretary of
35 administration shall transfer an amount equal to the amount paid from
36 the graduate medical education administration reserve fund to the
37 healthcare stabilization fund or, if the balance in such reserve fund is
38 less than the amount so paid, an amount equal to the balance in such
39 reserve fund.

40 (5) Upon payment of moneys from the healthcare stabilization fund
41 pursuant to subsection (c)(14) or (c)(15), the board of governors shall
42 certify to the secretary of administration the amount of such payment,
43 and the secretary of administration shall transfer an amount equal to

1 *the amount certified from the state general fund to the healthcare
2 stabilization fund.*

3 *(6) Transfers from the state general fund to the healthcare
4 stabilization fund pursuant to this subsection shall not be subject to the
5 provisions of K.S.A. 75-3722, and amendments thereto.*

6 *(7) The funds required to be transferred from the state general fund
7 to the healthcare stabilization fund pursuant to paragraphs (1) and (2)
8 for the fiscal years ending June 30, 2010, June 30, 2011, June 30, 2012,
9 and June 30, 2013, shall not be transferred prior to July 1, 2013. The
10 secretary of administration shall maintain a record of the amounts
11 certified by the board of governors pursuant to paragraphs (1) and (2)
12 for the fiscal years ending June 30, 2010, June 30, 2011, June 30, 2012,
13 and June 30, 2013. Beginning July 1, 2013, in addition to any other
14 transfers required pursuant to subsection (j), the state general fund
15 transfers that are deferred pursuant to this paragraph shall be
16 transferred from the state general fund to the healthcare stabilization
17 fund in the following manner: On July 1, 2013, and annually thereafter
18 through July 1, 2018, an amount equal to 20% of the total amount of
19 state general fund transfers deferred pursuant to this paragraph for the
20 fiscal years ending June 30, 2010, June 30, 2011, June 30, 2012, and
21 June 30, 2013. The amounts deferred pursuant to this paragraph shall
22 not accrue interest thereon.*

23 *(k) Notwithstanding any other provision of the healthcare provider
24 insurance availability act, no psychiatric hospital licensed under K.S.A.
25 39-2001 et seq., and amendments thereto, shall be assessed a premium
26 surcharge or be entitled to coverage under the fund if such hospital has
27 not paid any premium surcharge pursuant to K.S.A. 40-3404, and
28 amendments thereto, prior to January 1, 1988.*

29 *(l) (1) On or after July 1, 1989, and prior to January 1, 2022, every
30 healthcare provider shall make an election to be covered by one of the
31 following options provided in subparagraph (A) that shall limit the
32 liability of the fund with respect to judgments or settlements relating to
33 injury or death arising out of the rendering of or failure to render
34 professional services on or after July 1, 1989. On and after January 1,
35 2022, every healthcare provider shall make an election to be covered by
36 one of the following options provided in subparagraph (B) that shall
37 limit the liability of the fund with respect to judgments or settlements
38 relating to injury or death arising out of the rendering of or failure to
39 render professional services on or after January 1, 2022. Such election
40 shall be made at the time the healthcare provider renews the basic
41 coverage, or, if basic coverage is not in effect, such election shall be
42 made at the time such coverage is acquired pursuant to K.S.A. 40-3402,
43 and amendments thereto. A medical care facility or a healthcare facility*

1 deemed qualified as a self-insurer under K.S.A. 40-3414(a), and
2 amendments thereto, may opt out of the requirements set forth in
3 subparagraph (B) if such medical care facility or healthcare facility
4 substantially meets the minimum coverage requirements of this section
5 through coverage provided by the captive insurance company of such
6 medical care facility or healthcare facility. Notice of the election shall be
7 provided by the insurer providing the basic coverage in the manner and
8 form prescribed by the board of governors and shall continue to be
9 effective from year to year unless modified by a subsequent election
10 made prior to the anniversary date of the policy. The healthcare provider
11 may at any subsequent election reduce the dollar amount of the
12 coverage for the next and subsequent fiscal years, but may not increase
13 the same, unless specifically authorized by the board of governors. Any
14 election of fund coverage limits, whenever made, shall be with respect to
15 judgments or settlements relating to injury or death arising out of the
16 rendering of or failure to render professional services on or after the
17 effective date of such election of fund coverage limits. Such election
18 shall be made for persons engaged in residency training and persons
19 engaged in other postgraduate training programs approved by the state
20 board of healing arts at medical care facilities or mental health centers
21 in this state by the agency or institution paying the surcharge levied
22 under K.S.A. 40-3404, and amendments thereto, for such persons. The
23 election of fund coverage limits for a nonprofit corporation organized to
24 administer the graduate medical education programs of community
25 hospitals or medical care facilities affiliated with the university of
26 Kansas school of medicine shall be deemed to be effective at the highest
27 option. Such options shall be as follows:

28 (A) (i) **OPTION 1.** The fund shall not be liable to pay in excess of
29 \$100,000 pursuant to any one judgment or settlement for any party
30 against such healthcare provider, subject to an aggregate limitation for
31 all judgments or settlements arising from all claims made in the fiscal
32 year in an amount of \$300,000 for such provider.

33 (ii) **OPTION 2.** The fund shall not be liable to pay in excess of
34 \$300,000 pursuant to any one judgment or settlement for any party
35 against such healthcare provider, subject to an aggregate limitation for
36 all judgments or settlements arising from all claims made in the fiscal
37 year in an amount of \$900,000 for such provider.

38 (iii) **OPTION 3.** The fund shall not be liable to pay in excess of
39 \$800,000 pursuant to any one judgment or settlement for any party
40 against such healthcare provider, subject to an aggregate limitation for
41 all judgments or settlements arising from all claims made in the fiscal
42 year in an amount of \$2,400,000 for such healthcare provider.

43 (B) (i) **OPTION 1.** The fund shall not be liable to pay in excess of

1 \$500,000 pursuant to any one judgment or settlement for any party
2 against such healthcare provider, subject to an aggregate limitation for
3 all judgments or settlements arising from all claims made in the fiscal
4 year in an amount of \$1,500,000 for such healthcare provider.

5 (ii) *OPTION 2. The fund shall not be liable to pay in excess of*
6 *\$1,500,000 pursuant to any one judgment or settlement for any party*
7 *against such healthcare provider, subject to an aggregate limitation for*
8 *all judgments or settlements arising from all claims made in the fiscal*
9 *year in an amount of \$4,500,000 for such healthcare provider.*

10 (2) *The board of governors shall have the authority to adjust the*
11 *amounts provided in subparagraph (B) as the board deems necessary to*
12 *effectuate the provisions of the healthcare provider insurance*
13 *availability act, except that the minimum coverage for a healthcare*
14 *provider shall not be less than \$1,000,000 per claim and \$3,000,000 in*
15 *the aggregate.*

16 (m) *In the event of a claim against a healthcare provider for*
17 *personal injury or death arising out of the rendering of or the failure to*
18 *render professional services by such healthcare provider, the liability of*
19 *the fund shall be limited to the amount of coverage selected by the*
20 *healthcare provider at the time of the incident giving rise to the claim.*

21 (n) *Notwithstanding anything in article 34 of chapter 40 of the*
22 *Kansas Statutes Annotated, and amendments thereto, to the contrary, the*
23 *fund shall in no event be liable for any claims against any healthcare*
24 *provider based upon or relating to the healthcare provider's sexual acts*
25 *or activity, but in such cases the fund may pay reasonable and necessary*
26 *expenses for attorney fees incurred in defending the fund against such*
27 *claim. The fund may recover all or a portion of such expenses for*
28 *attorney fees if an adverse judgment is returned against the healthcare*
29 *provider for damages resulting from the healthcare provider's sexual*
30 *acts or activity.*

31 Section 1. Sec. 3. K.S.A. 65-1501 is hereby amended to read as
32 follows: 65-1501. (a) The practice of optometry means:

33 (1) The examination of the human eye and its-~~adnexæ~~ *adnexæ* and
34 the employment of objective or subjective means or methods, (including
35 the administering, prescribing or dispensing, of ~~topical~~ pharmaceutical
36 drugs), for the purpose of diagnosing the refractive, muscular, or
37 pathological condition thereof;

38 (2) *the use of medical devices and the prescribing, dispensing or*
39 *adapting of lenses, (including any ophthalmic lenses which are classified*
40 *as drugs by any law of the United States or of this state), prisms, low*
41 *vision rehabilitation services, orthoptic exercises and visual training*
42 *therapy for the relief of any insufficiencies or abnormal conditions of the*
43 *human eye and its-~~adnexæ~~ *adnexæ*; and*

1 (3) *the use of medical devices and the prescribing, administering or*
2 ~~dispensing of topical pharmaceutical drugs and oral drugs through all~~
3 ~~routes of administration, except intraocular injections, for the~~
4 ~~examination, diagnosis and treatment of ocular conditions and any~~
5 ~~insufficiencies or abnormal conditions of the human eye and its adnexae~~
6 ~~including adult open angle glaucoma adnexa;~~

7 (4) *the removal of non-perforating foreign bodies from the cornea,*
8 *conjunctiva or eyelids, removal of eyelashes, scraping the cornea for*
9 *diagnostic tests, smears or cultures, the dilation, probing, irrigation or*
10 *closing the tear drainage structure of the eye, expression of conjunctival*
11 *follicles or cysts, debridement of the corneal epithelium, incision and*
12 *curettage of a chalazion, removal and biopsy of skin lesions without*
13 *known malignancy, laser capsulotomy; and laser trabeculoplasty and laser*
14 *peripheral iridotomy; and*

15 (5) *the performance of additional procedures that are not otherwise*
16 *prohibited by subsection (b) that are within the scope of a licensee's*
17 *education and training for the treatment of any insufficiencies or*
18 *abnormal conditions of the human eye and its adnexa as authorized*
19 *pursuant to rules and regulations adopted by the board. The board shall*
20 *not adopt a rule and regulation authorized pursuant to this paragraph*
21 *without first receiving a recommendation from the interprofessional*
22 *advisory committee that such procedure is appropriate for an optometrist*
23 *to perform.*

24 (b) The practice of optometry shall not include *the performance of*
25 *the following procedures:* (1) ~~The management and treatment of glaucoma;~~
26 ~~except as provided in subsection (a);~~ (2) ~~the performance of surgery,~~
27 ~~including the use of lasers for surgical purposes, except that licensees may~~
28 ~~remove non-perforating foreign bodies from the cornea, conjunctiva or~~
29 ~~eyelids; remove eyelashes; scrape the cornea for diagnostic tests, smears or~~
30 ~~cultures; dilate, probe, irrigate or close by punctal plug the tear drainage~~
31 ~~structures of the eye; express conjunctival follicles or cysts; debridement~~
32 ~~of the corneal epithelium and co-management of post-operative care; or~~
33 ~~(3) the performance of procedures requiring anesthesia administered by~~
34 ~~injection or general anesthesia Retinal surgery, penetrating keratoplasty or~~
35 ~~corneal transplant, administration of or surgery performed under general~~
36 ~~anesthesia, surgery related to the removal of the eye from a living human~~
37 ~~being, surgical extraction of the crystalline lens, surgical intraocular~~
38 ~~implants, incisional or excisional surgery of the extraocular muscles,~~
39 ~~surgery of the bony orbit, laser-assisted in situ keratomileusis or~~
40 ~~photorefractive keratectomy, YAG laser vitreolysis, and surgery of the~~
41 ~~eyelid for cosmetic or mechanical repair of blepharochalasis, ptosis and~~
42 ~~tarsorrhaphy. However, an optometrist may provide pre-operative and~~
43 ~~post-operative care for the procedures in this subsection.~~

1 (c) A licensee shall be held to a standard of care in the diagnosis and
2 treatment of adult open-angle glaucoma—commensurate to, *the*
3 *performance of incision and curettage of a chalazion, removal and*
4 *biopsy of skin lesions, laser capsulotomy, laser trabeculoplasty and laser*
5 *peripheral iridotomy* with that of a person licensed to practice medicine
6 and surgery, who exercises that degree of skill and proficiency commonly
7 exercised by an ordinary, skillful, careful and prudent person licensed to
8 practice medicine and surgery.

9 (d) Under the direction and supervision of a licensee, a licensed
10 professional nurse, licensed practical nurse, licensed physical therapist and
11 licensed occupational therapist may assist in the provision of low vision
12 rehabilitation services in addition to such other services ~~which that~~ such
13 licensed professional nurse, licensed practical nurse, licensed physical
14 therapist and licensed occupational therapist is authorized by law to
15 provide under ~~subsection (d) of K.S.A. 65-1113(d), subsection (h) of~~
16 ~~K.S.A. 65-1124(h), subsection (b) of K.S.A. 65-2901(b) and subsection (b)~~
17 ~~of K.S.A. 65-5402(b), and amendments thereto.~~

18 Sec. ~~2.~~ 4. K.S.A. ~~2024~~ 2025 Supp. 65-1501a is hereby amended to
19 read as follows: 65-1501a. ~~For the purposes of this act the following terms~~
20 ~~shall have the meanings respectively ascribed to them. As used in the~~
21 *optometry law*, unless the context requires otherwise:

22 (a) "Board" means the board of examiners in optometry established
23 under K.S.A. 74-1501, and amendments thereto.

24 (b) "License" means a license to practice optometry granted under the
25 optometry law.

26 (c) "Licensee" means a person licensed under the optometry law to
27 practice optometry.

28 (d) "Adapt" means the determination, selection, fitting or use of
29 lenses, prisms, orthoptic exercises or visual training therapy *or the*
30 *modification of lenses using light or other means* for the aid of any
31 insufficiencies or abnormal conditions of the eyes after or by examination
32 or testing.

33 (e) "Lenses" means any type of ophthalmic lenses, which are lenses
34 prescribed or used for the aid of any insufficiencies or abnormal conditions
35 of the eyes.

36 (f) "Prescription" means a verbal, written or electronic order
37 transmitted directly or by electronic means from a licensee giving or
38 containing the name and address of the prescriber, the license registration
39 number of the licensee, the name and address of the patient, the
40 specifications and directions for lenses, prisms, orthoptic exercises, low
41 vision rehabilitation services or visual training therapy to be used for the
42 aid of any insufficiencies or abnormal conditions of the eyes, including
43 instructions necessary for the fabrication or use thereof and the date of

1 issue.

2 (g) "Prescription for topical pharmaceutical drugs or oral drugs" means a verbal, written or electronic order transmitted directly or by electronic means from a licensee giving or containing the name and address of the prescriber, the license registration number of the licensee, the name and address of the patient, the name and quantity of the drug prescribed, directions for use, the number of refills permitted, the date of issue and expiration date.

9 (h) "Topical pharmaceutical drugs" means drugs administered 10 topically and not by other means.

11 (i) "Dispense" means to deliver prescription-only medication or 12 ophthalmic lenses to the ultimate user pursuant to the lawful prescription 13 of a licensee and dispensing of prescription-only medication by a licensee 14 shall be limited to a twenty-four hour 24-hour supply or minimal quantity 15 necessary until a prescription can be filled by a licensed pharmacist, 16 except that the twenty-four hour 24-hour supply or minimal quantity shall 17 not apply to lenses described in subsection (a)(2) of K.S.A. 65-1501(a)(2), 18 and amendments thereto.

19 (j)(i) "False advertisement" means any advertisement which that is 20 false, misleading or deceptive in a material respect. In determining 21 whether any advertisement is misleading, there shall be taken into account 22 not only representations made or suggested by statement, word, design, 23 device, sound or any combination thereof, but also the extent to which the 24 advertisement fails to reveal facts material in the light of such 25 representations made.

26 (k)(j) "Advertisement" means all representations disseminated in any 27 manner or by any means, for the purpose of inducing, or which are likely 28 to induce, directly or indirectly, the purchase of professional services or 29 ophthalmic goods.

30 (k)(k) "Health careHealthcare provider" shall have the meaning 31 ascribed to that term means the same as defined in subsection (f) of K.S.A. 32 40-3401(f), and amendments thereto.

33 (m)(l) "Medical facility" shall have the meaning ascribed to that term 34 means the same as defined in subsection (e) of K.S.A. 65-411(c), and 35 amendments thereto.

36 (n)(m) "Medical care facility" shall have the meaning ascribed to that 37 term means the same as defined in K.S.A. 65-425, and amendments 38 thereto.

39 (o)(n) "Ophthalmologist" means a person licensed to practice 40 medicine and surgery by the state board of healing arts who specializes in 41 the diagnosis and medical and surgical treatment of diseases and defects of 42 the human eye and related structures.

43 (p)(o) "Low vision rehabilitation services" means the evaluation,

1 diagnosis, management and care of the low vision patient including low
2 vision rehabilitation therapy, education and interdisciplinary consultation
3 under the direction and supervision of an ophthalmologist or optometrist.

4 (q) "Oral drugs" means oral antibacterial drugs, oral antiviral drugs,
5 oral antihistamines, oral analgesic drugs, oral steroids, oral antiglaucoma
6 drugs and other oral drugs with clinically accepted ocular uses.

7 Sec. 3. 5. K.S.A. ~~2024~~ 2025 Supp. 65-1505 is hereby amended to
8 read as follows: 65-1505. (a) Persons entitled to practice optometry in
9 Kansas shall be those persons licensed in accordance with the provisions
10 of the optometry law. A person shall be qualified to be licensed and to
11 receive a license as an optometrist: (1) Who is of good moral character;
12 and in determining the moral character of any such person, the board may
13 take into consideration any felony conviction of such person, but such
14 conviction shall not automatically operate as a bar to licensure; (2) who
15 has graduated from a school or college of optometry approved by the
16 board; and (3) who successfully meets and completes the requirements set
17 by the board and passes an examination given by the board.

18 (b) All applicants for licensure, in addition to successfully completing
19 all other requirements for licensure, shall submit evidence satisfactory to
20 the board of professional liability insurance in an amount acceptable to the
21 board.

22 (c) Any person applying for examination by the board shall fill out
23 and swear to an application furnished by the board, accompanied by a fee
24 fixed by the board by rules and regulations in an amount of not to exceed
25 \$450, and file the same with the secretary of the board at least 30 days
26 prior to the holding of the examination. At such examinations the board
27 shall examine each applicant in subjects taught in schools or colleges of
28 optometry approved by the board, as may be required by the board. If such
29 person complies with the other qualifications for licensing and passes such
30 examination, such person shall receive from the board, upon the payment
31 of a fee fixed by the board by rules and regulations in an amount of not to
32 exceed \$150, a license entitling such person to practice optometry. In the
33 event of the failure on the part of the applicant to pass the first
34 examination, such person may, with the consent of the board, within 18
35 months, by filing an application accompanied by a fee fixed by the board
36 by rules and regulations in an amount of not to exceed \$150, take a second
37 examination; for the third and each subsequent examination a fee fixed by
38 the board by rules and regulations in an amount of not to exceed \$150.
39 Any examination fee and license fee fixed by the board under this
40 subsection which is in effect on the day preceding the effective date of this
41 act shall continue in effect until the board adopts rules and regulations
42 under this subsection fixing a different fee therefor.

43 (d) Any applicant for reciprocal licensure may in the board's

1 discretion be licensed and issued a license without examination if the
2 applicant has been in the active practice of optometry in another state for
3 at least the three-year period immediately preceding the application for
4 reciprocal licensure and the applicant:

5 (1) Presents a certified copy of a certificate of registration or license
6 ~~which that~~ has been issued to the applicant by another state where the
7 requirements for licensure are deemed by the board to be equivalent to the
8 requirements for licensure under this act, if such state accords a like
9 privilege to holders of a license issued by the board;

10 (2) submits a sworn statement of the licensing authority of such other
11 state that the applicant's license has never been limited, suspended or
12 revoked and that the applicant has never been censured or had other
13 disciplinary action taken;

14 (3) successfully passes an examination of Kansas law administered
15 by the board and such clinical practice examination as the board deems
16 necessary; and

17 (4) pays the reciprocal license fixed by the board by rules and
18 regulations in an amount of not to exceed \$450. The reciprocal license fee
19 fixed by the board under this subsection ~~which that~~ is in effect on the day
20 preceding the effective date of this act shall continue in effect until the
21 board adopts rules and regulations under this subsection fixing a different
22 fee therefor.

23 (e) The board shall adopt rules and regulations establishing the
24 criteria ~~which that~~ a school or college of optometry shall satisfy in meeting
25 the requirement of approval by the board established under subsection (a).
26 The board may send a questionnaire developed by the board to any school
27 or college of optometry for which the board does not have sufficient
28 information to determine whether the school or college meets the
29 requirements for approval and rules and regulations adopted under this act.
30 The questionnaire providing the necessary information shall be completed
31 and returned to the board in order for the school or college to be
32 considered for approval. The board may contract with investigative
33 agencies, commissions or consultants to assist the board in obtaining
34 information about schools or colleges. In entering such contracts the
35 authority to approve schools or colleges shall remain solely with the board.

36 (f) (1) The board may require an applicant for licensure or a licensee
37 in connection with an investigation of the licensee to be fingerprinted and
38 submit to a state and national criminal history record check in accordance
39 with K.S.A. ~~2024~~ ~~2025~~ Supp. 22-4714, and amendments thereto.

40 (2) (A) The board shall fix a fee for fingerprinting applicants or
41 licensees in an amount necessary to reimburse the board for the cost of the
42 fingerprinting. Fees collected under this subsection shall be deposited in
43 the criminal history and fingerprinting fund.

1 (B) There is hereby created in the state treasury the criminal history
2 and fingerprinting fund. All moneys credited to the fund shall be used to
3 pay all costs and fees associated with processing of fingerprints and
4 criminal history checks for the board of examiners in optometry. The fund
5 shall be administered by the board. All expenditures from the fund shall be
6 made in accordance with appropriation acts upon warrants of the director
7 of accounts and reports issued pursuant to vouchers approved by the
8 president of the board or a person designated by the president.

9 (g) *Any licensee applying for credentialing by the board shall
10 complete and swear to an application form furnished by the board
11 accompanied by an additional fee fixed by the board by rules and
12 regulations in an amount necessary to reimburse the board for the cost of
13 credentialing.*

14 Sec. 4. 6. K.S.A. 65-1509a is hereby amended to read as follows: 65-
15 1509a. (a) In addition to the payment of the license renewal fee, each
16 licensee applying for license renewal shall furnish to the secretary of the
17 board satisfactory evidence of successfully completing a minimum of 24
18 hours of continuing education annually, five hours of which shall relate to
19 ocular pharmacology, therapeutics or related topics of study, approved by
20 the board in the year just preceding such application for the renewal of the
21 license. The board, in its discretion, may increase the required hours of
22 continuing education by rules and regulations adopted by the board. On or
23 before April 1 of each year, the secretary of the board shall send a written
24 notice of continuing education requirements to this effect to every person
25 holding a valid license to practice optometry within the state as provided
26 in ~~sub~~section (a) of K.S.A. 65-1509(a), and amendments thereto.

27 (b) ~~The board shall establish credentialing requirements for a-
28 licensee to administer or perform the procedures described in K.S.A. 65-
29 1501(a)(4), and amendments thereto (1) A licensee who seeks to
30 administer or perform a procedure referenced by K.S.A. 65-1501(a)(4)
31 or (5), and amendments thereto, that requires the use of injections or
32 lasers shall be required to receive credentialing as follows:~~

33 (A) *A licensee who graduated from an accredited college or school
34 of optometry on or after July 1, 2020, shall be granted such
35 credentialing by the board upon submitting a request to the board; or*

36 (B) *a licensee who graduated from an accredited college or school of
37 optometry prior to July 1, 2020, shall be granted credentialing when the
38 board receives proof of successful completion of a 32-hour certification
39 program that:*

40 (i) *Includes both didactic and clinical or laboratory experiences
41 and testing approved by the board; and*

42 (ii) *is presented by a school or college of optometry or school of
43 medicine that is approved by the board.*

1 (2) (A) *A licensee that has received credentialing under paragraph*
2 *(1) shall submit a report to the board on a quarterly basis that contains:*
3 (i) *The name of the optometrist;*
4 (ii) *the total number of procedures performed during that quarter;*
5 (iii) *the location where each procedure was performed; and*
6 (iv) *the outcome for each procedure or patient.*
7 (B) *A reporting optometrist shall certify the accuracy of the*
8 *information contained in the report.*

9 (C) *Beginning July 1, 2027, and annually thereafter, the board*
10 *shall compile and make public the information contained in reports*
11 *received under this subsection, but shall redact any personally*
12 *identifiable information prior to making such reports public.*

13 (D) *The provisions of this paragraph shall expire on July 1, 2031.*

14 Sec.~~5.~~ 7. K.S.A. 65-1512 is hereby amended to read as follows: 65-
15 1512. ~~This act~~*The provisions of article 15 of chapter 65 of the Kansas*
16 *Statutes Annotated, and amendments thereto, shall be known and may be*
17 *cited as the optometry law.*

18 Sec.~~6.~~ 8. K.S.A. 65-1523 is hereby amended to read as follows: 65-
19 1523. The board in its discretion, in addition to any other remedies
20 provided in this act, may apply to a court of competent jurisdiction for
21 injunctive relief *against any person* to restrain violations of the provisions
22 of this act, *and the lawful rules and regulations promulgated by the board*
23 *under authority of this act.*

24 Sec.~~7.~~ 9. K.S.A. 74-1504 is hereby amended to read as follows: 74-
25 1504. (a) The board shall administer and enforce the provisions of the
26 optometry law, and the board is hereby granted such specific powers as are
27 necessary for the purpose of administering and enforcing such law. In
28 addition, the board may:

29 (1) Employ agents, attorneys and inspectors under such rules and
30 regulations as the board may prescribe in accordance with the provisions
31 of the optometry law, except that no state officer shall be eligible for
32 employment by the board.

33 (2) Make all necessary disbursements; to carry out the provisions of
34 this act, including payment for stationery supplies, ~~acquire and acquiring~~
35 all necessary optical instruments to be used in the conducting of
36 examination, ~~print and distribute to all optometrists in the state a yearbook~~
37 ~~of the names and addresses of all optometrists licensed by the board~~
38 ~~maintain and make available to the public a directory including the names~~
39 ~~and addresses of all optometrists licensed by the board.~~

40 (3) Grant all licenses as seem just and proper and to suspend, limit,
41 revoke or refuse to renew any such licenses granted for any of the causes
42 specified under K.S.A. 65-1506, and amendments thereto.

43 (4) Administer oaths and take testimony upon granting or refusing to

1 grant, revoking, limiting or suspending licenses.

2 (5) Issue subpoenas, compel the attendance of witnesses and the
3 production of any papers, books, accounts, documents and testimony, and
4 to cause the deposition of witnesses, either residing within or without the
5 state, to be taken in the manner prescribed by law for taking depositions in
6 civil actions in the district courts. In case of disobedience on the part of
7 any person to comply with any subpoena issued in behalf of the board, or
8 on the refusal of any witness to testify to any matters regarding which such
9 witness may be lawfully interrogated, the judge of the district court of any
10 county, on application of a member of the board, may compel obedience
11 by proceedings for contempt, as in the case of disobedience of the
12 requirements of a subpoena issued from such court or a refusal to testify in
13 such court. Each witness who appears before the board by the board's
14 order or subpoena, other than a state officer or employee, shall receive for
15 attendance the fees and mileage provided for witnesses in civil cases in
16 courts of record ~~which that~~ shall be audited and paid upon the presentation
17 of proper vouchers sworn to by such witnesses and approved by the
18 president and secretary-treasurer of the board.

19 (6) Adopt rules and regulations for the procedure and conduct of the
20 board and for the administration of the optometry law, ~~which rules and~~
21 ~~regulations shall that are not be inconsistent consistent~~ with the provisions
22 of the optometry law.

23 (b) The board shall meet at least annually for the purpose of
24 examining applicants for licensure. ~~Such meetings shall be held in Topeka.~~
25 At least 30 days prior to the examination, the board shall cause a special
26 notice to be published in the Kansas register stating the date and hour for
27 holding such examination. Special meetings shall be held at such times
28 and places as the board may direct.

29 (c) The board shall preserve an accurate record of all meetings and
30 proceedings of the board including receipts and disbursements with
31 vouchers therefor and complete minutes of all prosecutions and violations
32 of the optometry law and of examinations held under the provisions of the
33 optometry law and an accurate inventory of all property of the board. All
34 such records shall be kept in the office of the board and made accessible to
35 the public.

36 **Sec. 10. K.S.A. 74-1505 is hereby amended to read as follows: 74-**
37 **1505. (a) The board shall appoint a seven-member committee to be**
38 **known as the interprofessional advisory committee which, as requested**
39 **by the board, shall make recommendations on clinical or practice related**
40 **issues, including procedure coding matters and appropriate treatments for**
41 **ocular diseases and conditions may review new technologies to make**
42 **recommendations for consideration by the board. The board may request**
43 **that the committee meet to review a procedure and make a**

1 recommendation whether or not the procedure is appropriate for an
2 optometrist to perform.

3 (b) *The interprofessional advisory committee shall consist of one*
4 *member of the board appointed by the board who shall serve as a*
5 *nonvoting chair, together with three optometrists licensed to practice*
6 *optometry in this state chosen by the board from those nominated by the*
7 *Kansas optometric association and three ophthalmologists licensed to*
8 *practice in this state chosen by the board from those nominated by the*
9 ~~Kansas medical society and the Kansas association of osteopathic~~
10 ~~medicine of eye physicians and surgeons. The Kansas optometric~~
11 ~~association and the Kansas medical society of eye physicians and~~
12 ~~surgeons shall submit six nominees to the board. The Kansas association~~
13 ~~of osteopathic medicine shall submit two nominees to the board. Persons~~
14 ~~appointed to the committee shall serve terms of three years and without~~
15 ~~compensation. All expenses of the committee shall be paid by the board.~~

16 (c) *This section shall be part of and supplemental to the*
17 *optometry law.*

18 Sec.~~8.~~ 11. K.S.A. 40-3402, 40-3403, 65-1501, 65-1509a, 65-1512,
19 65-1514, 65-1523, 74-1504 and 74-1505 and K.S.A.~~2024~~ 2025 Supp. 65-
20 1501a and 65-1505 are hereby repealed.

21 Sec.~~9.~~ 12. This act shall take effect and be in force from and after its
22 publication in the statute book.