As Act concerning health and healthcare; relating to health professions and facilities; establishing rural emergency hospitals as a rural healthcare licensure category; requirements for licensure; certification and funding of certified community behavioral health clinics; prescribing powers, duties and functions of the Kansas department for aging and disability services and the department of health and environment related thereto; authorizing the issuance of telemedicine waivers for the practice of telemedicine by out-of-state healthcare providers; relating to professions regulated by the behavioral sciences regulatory board; reducing certain licensing requirements; expanding temporary practice permits and the board's grounds for discipline; providing grant assistance to hospitals in certain counties; prescribing powers, duties and functions of the secretary of health and environment related thereto; establishing the Kansas department innovation grant program and rural hospital innovation grant fund; amending K.S.A. 65-425, 65-431, 65-5804a, 65-5807a, 65-5808, 65-5809, 65-6309a, 65-6311, 65-6404, 65-6405a, 65-6408, 65-6610, 65-6612, 65-6615, 74-5316a, 74-5324, 74-5363, 74-5367a and 74-5369 and K.S.A. 2020 Supp. 65-6306 and 65-6411 and repealing the existing sections.

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

New Section 1. Sections 1 through 8, and amendments thereto, shall be known and may be cited as the rural emergency hospital act.

New Sec. 2. The legislature of the state of Kansas recognizes the importance and necessity of providing and regulating the system by which healthcare services are structured and integrated to promote the availability of and access to necessary and appropriate healthcare to protect the general health, safety and welfare of the rural residents of Kansas. The legislature of the state of Kansas seeks to: Improve the health of the rural population of Kansas; preserve access to healthcare; encourage collaboration among rural healthcare providers; promote delivery of quality rural healthcare; promote efficiency and efficacy of rural healthcare; embrace technology in the delivery of rural healthcare; and promote adequate and fair reimbursement for rural healthcare services. To this end, it is the policy of the state of Kansas to create a category of licensure to enable certain Kansas hospitals to receive federal healthcare reimbursement as rural emergency hospitals, and the implementation of this act facilitates such policy.

New Sec. 3. As used in the rural emergency hospital act:
(a) "Act" means the rural emergency hospital act.
(b) "Rural emergency hospital" means an establishment that:
(1) Meets the eligibility requirements described in section 4, and amendments thereto;
(2) provides rural emergency hospital services;
(3) provides rural emergency hospital services in the facility 24 hours per day by maintaining an emergency department that is staffed 24 hours per day, 7 days per week, with a physician, nurse practitioner, clinical nurse specialist or physician assistant;
(4) has a transfer agreement in effect with a level I or level II trauma center; and
(5) meets such other requirements as the department of health and environment finds necessary in the interest of the health and safety of individuals who are provided rural emergency hospital services and to implement state licensure that satisfies requirements for reimbursement by federal healthcare programs as a rural emergency hospital.
(c) "Rural emergency hospital services" means the following services, provided by a rural emergency hospital, that do not require in excess of an annual per-patient average of 24 hours in such rural emergency hospital:
(1) Emergency department services and observation care; and
(2) at the election of the rural emergency hospital, for services provided on an outpatient basis, other medical and health services as specified in regulations adopted by the United States secretary of health and human services and authorized by the department of health and environment.
(d) "Secretary" means the secretary of health and environment.

New Sec. 4. (a) A facility shall be eligible to apply for a rural emergency hospital license if such facility, as of December 27, 2020, was:
(1) Licensed critical access hospital;
(2) general hospital with not more than 50 licensed beds located in a county in a rural area as defined in section 1886(d)(2)(D) of the federal social security act; or
(3) general hospital with not more than 50 licensed beds that is deemed as being located in a rural area pursuant to section 1886(d)(8)(E) of the federal social security act.

(b) A facility applying for licensure as a rural emergency hospital shall include with the licensure application:
(1) An action plan for initiating rural emergency hospital services, including a detailed transition plan that lists the specific services that the facility will retain, modify, add and discontinue;
(2) a description of services that the facility intends to provide on an outpatient basis; and
(3) such other information as required by rules and regulations adopted by the department of health and environment.

(c) A rural emergency hospital shall not have inpatient beds, except that such hospital may have a unit that is a distinct part of such hospital and that is licensed as a skilled nursing facility to provide post-hospital extended care services.

(d) A rural emergency hospital may own and operate an entity that provides ambulance services.

(e) A licensed general hospital or critical access hospital that applies for and receives licensure as a rural emergency hospital and elects to operate as a rural emergency hospital shall retain its original license as a general hospital or critical access hospital. Such original license shall remain inactive while the rural emergency hospital license is in effect.

New Sec. 5. All rural emergency hospitals, including city, county, hospital district or other governmental or quasi-governmental hospitals, shall be authorized to enter into any contracts required to be eligible for federal reimbursement as a rural emergency hospital.

New Sec. 6. In addition to the provisions of K.S.A. 65-4909, and amendments thereto, entities engaging in activities and entering into contracts required to meet the requirements for licensure and reimbursement as a rural emergency hospital, and officers, agents, representatives, employees and directors thereof, shall be considered to be acting pursuant to clearly expressed state policy as established in this act under the supervision of the state. Such entities shall not be subject to state or federal antitrust laws while acting in such manner.

New Sec. 7. The secretary shall adopt rules and regulations establishing minimum standards for the establishment and operation of rural emergency hospitals in accordance with this act, including licensure of rural emergency hospitals.

New Sec. 8. Each individual and group policy of accident and sickness insurance, each contract issued by a health maintenance organization and all coverage maintained by an entity authorized under K.S.A. 40-2222, and amendments thereto, or by a municipal group-funded pool authorized under K.S.A. 12-2618, and amendments thereto, shall provide benefits for services when performed by a rural emergency hospital if such services would be covered under such policies, contracts or coverage if performed by a general hospital.

New Sec. 9. (a) The Kansas department for aging and disability services shall establish a process for certification of and funding for certified community behavioral health clinics in accordance with this section.

(b) The Kansas department for aging and disability services shall certify as a certified community behavioral health clinic any community mental health center licensed by the department that provides the following services: Crisis services; screening, assessment and diagnosis, including risk assessment; person-centered treatment planning; outpatient mental health and substance use services; primary care screening and monitoring of key indicators of health risks; targeted case management; psychiatric rehabilitation services; peer support and family supports; medication-assisted treatment; assertive community...
treatment; and community-based mental healthcare for military servicemembers and veterans.

(c) (1) The department of health and environment shall establish a prospective payment system under the medical assistance program for funding certified community behavioral health clinics. Such system shall permit payment by either daily or monthly rates.

(2) The department of health and environment shall submit to the United States centers for medicare and medicaid services any approval request necessary to implement this subsection.

(3) Such prospective payment system shall be implemented on or before May 1, 2022.

(d) (1) Subject to applications therefor, the Kansas department for aging and disability services shall certify community behavioral health clinics by not later than the following specified dates:

(A) Six facilities currently receiving grants to operate as certified community behavioral health clinics by not later than May 1, 2022;
(B) three additional facilities by not later than July 1, 2022;
(C) nine additional facilities by not later than July 1, 2023; and
(D) eight additional facilities by not later than July 1, 2024.

(2) The Kansas department for aging and disability services may certify community behavioral health clinics in advance of the deadlines established in paragraph (1), including portions of the specified numbers of facilities.

(d) The secretary for aging and disability services adopt rules and regulations as necessary to implement and administer this section.

New Sec. 10. (a) Notwithstanding any other provision of law, a physician holding a license issued by the applicable licensing agency of another state or who otherwise meets the requirements of this section may practice telemedicine to treat patients located in the state of Kansas, if such physician receives a telemedicine waiver issued by the state board of healing arts. The state board of healing arts shall issue such a waiver within 15 days from receipt of a complete application, if the physician:

(1) Submits a complete application that may include evidence in the form of an affidavit from an authorized third party that the applicant meets the requirements of this section in a manner determined by the state board of healing arts and pays a fee not to exceed $100; and

(2) holds an unrestricted license to practice medicine and surgery in another state or meets the qualifications required under Kansas law for a license to practice medicine and surgery and is not the subject of any investigation or disciplinary action by the applicable licensing agency.

(b) A physician practicing telemedicine in accordance with this subsection shall conduct an appropriate assessment and evaluation of the patient's current condition and document the appropriate medical indication for any prescription issued.

(c) Nothing in this section shall supersede or otherwise affect the provisions of K.S.A. 65-4a10, and amendments thereto, or K.S.A. 2020 Supp. 40-2,210 et seq., and amendments thereto.

(d) Any person who receives a telemedicine waiver under the provisions of this section shall be subject to all rules and regulations pertaining to the practice of the licensed profession in this state and shall be considered a licensee for the purposes of the professional practice acts administered by the state board of healing arts.

(e) A waiver issued under this section shall expire on the date of expiration established by the state board of healing arts unless renewed in the manner established by the state board of healing arts, including payment of an annual renewal fee not to exceed $100 and evidence that the applicant continues to meet the qualifications described in this section.

(f) Notwithstanding any other provision of law to the contrary, a physician holding a license issued by the applicable licensing agency of another state may provide, without limitation, consultation through remote technology to a physician licensed in the state of Kansas.
(g) An applicable healthcare licensing agency of this state may adopt procedures consistent with this section to allow other healthcare professionals licensed and regulated by such licensing agency to practice telemedicine within the scope of practice defined by Kansas law for such healthcare profession as deemed by such licensing agency to be consistent with ensuring patient safety.

(h) Nothing in this section shall be construed to prohibit a licensing agency from denying an application for a waiver under this section if the licensing body determines that granting the application may endanger the health and safety of the public.

(i) As used in this subsection, "telemedicine" means the delivery of healthcare services by a healthcare provider while the patient is at a different physical location.

New Sec. 11. (a) As used in this section:

(1) "Eligible county" means a county in Kansas other than Douglas, Johnson, Sedgwick, Shawnee or Wyandotte county.

(2) "Hospital" means the same as defined in K.S.A. 65-425, and amendments thereto.

(3) "Transitional assistance" means any assistance related to changing a hospital's current healthcare delivery model to a model more appropriate for the community that the hospital serves, including, but not limited to: Conducting a market study of healthcare services needed and provided in the community; acquiring and implementing new technological tools and infrastructure, including, but not limited to, telemedicine delivery methods; and acquiring the services of appropriate personnel, including, but not limited to, additional medical residents or individuals trained to be needed healthcare professionals.

(b) (1) There is established the rural hospital innovation grant program to be administered by the secretary of health and environment. The program, and any grant awarded thereunder, shall be for the purpose of strengthening and improving the healthcare system and increasing access to healthcare services in eligible counties to help communities in such counties achieve and maintain optimal health by providing transitional assistance to hospitals in such counties. The secretary may award a rural hospital innovation grant to a county that applies in accordance with this section.

(2) The secretary of health and environment may award a grant under this section only if the amount of state moneys to be awarded in the grant has been matched by private stakeholders, including hospital foundations or other organizations, contributing to the secretary for the program, on a basis of $2 of private stakeholder moneys for every $1 of state moneys. The secretary of health and environment may receive moneys by bequest, donation or gift to fulfill the public-private match required under this paragraph. Any such moneys received shall be remitted to the state treasurer in accordance with K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the rural hospital innovation grant fund. A private stakeholder may certify to the secretary of health and environment that an amount of money is dedicated to the rural hospital innovation grant program. Such certified dedicated moneys shall remain with the private stakeholder until such time as the grant is awarded, and the secretary shall count such certified dedicated moneys to fulfill the public-private match required under this paragraph.

(3) A private stakeholder who has contributed moneys or certified dedicated moneys to the secretary of health and environment may specify a county to receive a grant using such private stakeholder's moneys. If the secretary does not award a grant to the specified county in the same fiscal year as such request, the secretary shall return the amount of contributed moneys to the private stakeholder and any such certification shall lapse.

(4) Prior to applying for a rural hospital innovation grant, any eligible county may enter into memorandums of understanding and other necessary agreements with private stakeholders and other eligible
(5) The board of county commissioners of an eligible county, or the board's designee, may apply to the secretary for a rural hospital innovation grant in the form and manner prescribed by the secretary of health and environment. Such application shall include:

(A) A description of the hospital for which the grant moneys will be expended, including the name and location of the hospital;

(B) a statement of the amount of grant moneys requested;

(C) a description of the needs of the hospital, the transitional assistance for which the grant moneys will be expended and how such transitional assistance will meet the stated needs;

(D) a certification that the hospital has exhausted all opportunities for federal moneys available to such hospital for transitional assistance purposes, including, but not limited to, any federal moneys related to COVID-19 relief that may be used for such purposes; and

(E) any other information that the secretary deems necessary to administer this section.

(6) Prior to awarding any grant moneys to an eligible county under this section, the secretary shall enter into a written agreement with the county requiring that the county:

(A) Expend any such grant moneys to provide transitional assistance to a hospital in the eligible county, as approved by the secretary;

(B) not later than one year after any such grant moneys are awarded, report to the secretary detailing the effect that such grant is having on health and other outcomes in the eligible county and the affected community;

(C) repay all awarded grant moneys to the secretary if the county fails to satisfy any material term or condition of the grant agreement; and

(D) any other terms and conditions that the secretary deems necessary to administer this section.

(7) No rural hospital innovation grant shall be awarded to provide transitional assistance to any hospital that has not exhausted all opportunities for federal moneys available to such hospital for transitional assistance purposes, including, but not limited to, any federal moneys related to COVID-19 relief that may be used for such purposes.

c) (1) There is established in the state treasury the rural hospital innovation grant fund to be administered by the secretary of health and environment. All moneys credited to the fund shall be used only for purposes related to the rural hospital innovation grant program. All expenditures from the fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the secretary of health and environment or the secretary's designee.

(2) (A) Notwithstanding the provisions of chapter 1 of the 2020 Special Session Laws of Kansas or any other provision of law to the contrary, on June 15, 2021, the director of the budget shall determine the amount of moneys received by the state that are identified as moneys from the federal government for aid to the state of Kansas for coronavirus relief as appropriated in the following acts that are eligible to be used for the purpose of awarding grants under this section, that may be expended at the discretion of the state in compliance with the United States office of management and budget's uniform administrative requirements, cost principles and audit requirements for federal awards and that are unencumbered, including:

(i) The federal CARES act, public law 116-136, the federal coronavirus preparedness and response supplemental appropriation act, public law 116-123, the federal families first coronavirus response act, public law 116-127, and the federal paycheck protection program and health care enhancement act, public law 116-139;

(ii) the federal consolidated appropriations act, 2021, public law 116-260;
(iii) the American rescue plan act of 2021, public law 117-2; and
(iv) any other federal law that appropriates moneys to the state for aid for coronavirus relief.

(B) Of the moneys identified in accordance with subparagraph (A), the director of the budget shall determine an aggregate amount equal to $10,000,000 available in special revenue funds. If such identified moneys are less than $10,000,000, the director of the budget shall determine the maximum amount available. The director of the budget shall certify the amount determined under this subparagraph from each fund to the director of accounts and reports. At the same time as such certification is transmitted, the director of the budget shall transmit a copy of such certification to the director of legislative research.

(C) On July 1, 2021, or as soon thereafter as moneys are available, the director of accounts and reports shall transfer an aggregate amount equal to the certification received in accordance with subparagraph (B) from such funds to the rural hospital innovation grant fund. If such aggregate amount of moneys certified is less than $10,000,000, the director of accounts and reports shall transfer from the state general fund to the rural hospital innovation grant fund the difference between $10,000,000 and the amount certified.

(d) The secretary of health and environment shall adopt rules and regulations as necessary to implement and administer this section.

(e) (1) On or before October 1 of each year, for each rural hospital innovation grant awarded under this section, the county shall prepare and submit to the secretary of health and environment a report describing: The amount and stated purposes of any awarded grant moneys; the fulfillment of the terms and conditions of the grant agreement; and the transitional assistance upon which the moneys have been spent.

(2) On or before February 1 of each year, the secretary shall compile the information received under this subsection and submit a report to the governor and the legislature including such information and a description of and reasoning for any applications for a rural hospital innovation grant that the secretary has denied.

(f) (1) The rural hospital innovation grant program shall expire on June 30, 2025.

(2) On July 1, 2025:

(A) The director of accounts and reports shall transfer all moneys in the rural hospital innovation grant fund to the state general fund;

(B) all liabilities of the rural hospital innovation grant fund shall be transferred to and imposed on the state general fund; and

(C) the rural hospital innovation grant fund shall be abolished.

Sec. 12. K.S.A. 65-425 is hereby amended to read as follows:

65-425. As used in this act:

(a) "General hospital" means an establishment with an organized medical staff of physicians; with permanent facilities that include inpatient beds; and with medical services, including physician services, and continuous registered professional nursing services for not less than 24 hours of every day, to provide diagnosis and treatment for patients who have a variety of medical conditions.

(b) "Special hospital" means an establishment with an organized medical staff of physicians; with permanent facilities that include inpatient beds; and with medical services, including physician services, and continuous registered professional nursing services for not less than 24 hours of every day, to provide diagnosis and treatment for patients who have specified medical conditions.

(c) "Person" means any individual, firm, partnership, corporation, company, association, or joint-stock association, and the legal successor thereof.

(d) "Governmental unit" means the state, or any county, municipality, or other political subdivision thereof; or any department, division, board or other agency of any of the foregoing.

(e) "Licensing agency" means the department of health and
(f) "Ambulatory surgical center" means an establishment with an organized medical staff of one or more physicians; with permanent facilities that are equipped and operated primarily for the purpose of performing surgical procedures; with continuous physician services during surgical procedures and until the patient has recovered from the obvious effects of anesthetic and at all other times with physician services available whenever a patient is in the facility; with continuous registered professional nursing services whenever a patient is in the facility; and which does not provide services or other accommodations for patient to stay more than 24 hours. Before discharge from an ambulatory surgical center, each patient shall be evaluated by a physician for proper anesthesia recovery. Nothing in this section shall be construed to require the office of a physician or physicians to be licensed under this act as an ambulatory surgical center.

(g) "Recuperation center" means an establishment with an organized medical staff of physicians; with permanent facilities that include inpatient beds; and with medical services, including physician services, and continuous registered professional nursing services for not less than 24 hours of every day, to provide treatment for patients who require inpatient care but are not in an acute phase of illness, who currently require primary convalescent or restorative services and who have a variety of medical conditions.

(h) "Medical care facility" means a hospital, ambulatory surgical center or recuperation center, but shall except that "medical care facility" does not include a hospice which is certified to participate in the medicare program under 42 code of federal regulations, chapter 12, section C.F.R. § 418.1 et seq. and amendments thereto and which provides services only to hospice patients.

(i) "Critical access hospital" shall have the meaning ascribed to such term under means the same as defined in K.S.A. 65-468 and amendments thereto.

(j) "Hospital" means "general hospital," "critical access hospital," or "special hospital."

(k) "Physician" means a person licensed to practice medicine and surgery in this state.

(l) "Rural emergency hospital" means the same as defined in section 2, and amendments thereto.

Sec. 13. K.S.A. 65-431 is hereby amended to read as follows: 65-431. (a) The licensing agency shall adopt, amend, promulgate and enforce such rules and regulations and standards with respect to the different types of medical care facilities to be licensed hereunder as may be designed to further the accomplishment of the purposes of this law in promoting safe and adequate treatment of individuals in medical care facilities in the interest of public health, safety and welfare.

(b) No rule or regulation shall be made by the licensing agency which that would discriminate against any practitioner of the healing arts who is licensed to practice medicine and surgery in this state. Boards of trustees or directors of facilities licensed pursuant to the provisions of this act shall have the right, in accordance with law, to select the professional staff members of such facilities and to select and employ interns, nurses and other personnel, and no rules and regulations or standards of the licensing agency shall be valid which that, if enforced, would interfere in such selection or employment. In the selection of professional staff members, no hospital licensed under K.S.A. 65-425 et seq. and amendments thereto, shall discriminate against any practitioner of the healing arts who is licensed to practice medicine and surgery in this state for reasons based solely upon the practitioner's branch of the healing arts or the school or health care facility in which where the practitioner received medical schooling or postgraduate training.

(c) In formulating rules and regulations, the agency shall give due consideration to the size of the medical care facility, the type of service it is intended to render, the scope of such service, requirements for the
receipt of federal reimbursement for the type of medical care facility and the financial resources in and the needs of the community which such facility serves.

(d)(1) A hospital consisting of more than one establishment shall be considered in compliance with the rules and regulations of the licensing agency if:

(A) All basic services required by the agency are available as a part of the combined operation; and
(B) the following basic services are available at each establishment:

(i) Continuous nursing services;
(ii) continuous physician coverage on duty or on call;
(iii) basic diagnostic radiological and laboratory facilities;
(iv) drug room;
(v) emergency services;
(vi) food service; and
(vii) patient isolation.

(2) The requirements of paragraphs (1)(A) and (B) shall be deemed to be satisfied by a rural emergency hospital if such rural emergency hospital meets the licensing requirements established for such hospital by the licensing agency.

Sec. 14. K.S.A. 65-5804a is hereby amended to read as follows:

65-5804a. (a) Applications for licensure as a professional counselor shall be made to the board on a form and in the manner prescribed by the board. Each application shall be accompanied by the fee fixed under K.S.A. 65-5808, and amendments thereto.

(b) Each applicant for licensure as a professional counselor shall furnish evidence satisfactory to the board that the applicant:

(1) Is at least 21 years of age;
(2) has completed 60 graduate semester hours including a graduate degree in counseling or a related field from a college or university approved by the board and that includes 45 graduate semester hours of counseling coursework distributed among each of the following areas:

(A) Counseling theory and practice;
(B) the helping relationship;
(C) group dynamics, processing and counseling;
(D) human growth and development;
(E) lifestyle and career development;
(F) appraisal of individuals;
(G) social and cultural foundations;
(H) research and evaluation;
(I) professional orientation; and
(J) supervised practicum and internship;
(3) has passed an examination required by the board; and
(4) has satisfied the board that the applicant is a person who merits the public trust.

(c) (1) Applications for licensure as a clinical professional counselor shall be made to the board on a form and in the manner prescribed by the board. Each applicant shall furnish evidence satisfactory to the board that the applicant:

(A) Is licensed by the board as a licensed professional counselor or meets all requirements for licensure as a licensed professional counselor;
(B) has completed 15 credit hours, as part of or in addition to the requirements under subsection (b), supporting diagnosis or treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual through identifiable study of the following content areas: Psychopathology, diagnostic assessment, interdisciplinary referral and collaboration, treatment approaches and professional ethics;

(C) has completed a graduate level supervised clinical practicum of supervised professional experience including psychotherapy and assessment with individuals, couples, families or groups, integrating diagnosis and treatment of mental disorders with use of the American
psychiatric association's diagnostic and statistical manual, with not less than 350 hours of direct client contact or additional postgraduate supervised experience as determined by the board;

(D) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 4,000 hours of supervised professional experience, including at least 1,500 hours of direct client contact conducting psychotherapy and assessments with individuals, couples, families or groups and not less than 100 hours of face-to-face clinical supervision, including not less than 50 hours of person-to-person individual supervision, as defined by the board in rules and regulations, including not less than 50 hours of individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, except that one-half of the requirement of hours required by this subparagraph may be waived for persons with an individual who has a doctor's doctoral degree in professional counseling or a related field acceptable to the board who earned a degree under subsection (b) prior to July 1, 2003, in lieu of the education requirements under subparagraphs (B) and (C), has completed the education requirements for licensure as a professional counselor in effect on the day immediately preceding the effective date of this act;

(F) for persons who apply for and are eligible for a temporary permit to practice as a licensed professional counselor on the day immediately preceding the effective date of this act, in lieu of the education and training requirements under subparagraphs (B), (C) and (D), has completed the education and training requirements for licensure as a professional counselor in effect on the day immediately preceding the effective date of this act;

(G) has passed an examination approved by the board; and

(H) has paid the application fee fixed under K.S.A. 65-5808, and amendments thereto.

(2) A person who was licensed or registered as a professional counselor in Kansas at any time prior to the effective date of this act, who has been actively engaged in the practice of professional counseling as a registered or licensed professional counselor within five years prior to the effective date of this act and whose last license or registration in Kansas prior to the effective date of this act was not suspended or revoked, upon application to the board, payment of fees pursuant to K.S.A. 65-5808, and amendments thereto, and completion of applicable continuing education requirements, shall be licensed as a licensed clinical professional counselor by providing demonstration of competence to diagnose and treat mental disorders through at least two of the following areas acceptable to the board:

(A) Either: (i) Graduate coursework; or (ii) passing a national, clinical examination;

(B) either: (i) Three years of clinical practice in a community mental health center, its contracted affiliate or a state mental hospital; or (ii) three years of clinical practice in other settings with demonstrated experience in diagnosing or treating mental disorders; or

(C) attestation from one professional licensed to diagnose and treat mental disorders in independent practice or licensed to practice medicine and surgery that the applicant is competent to diagnose and treat mental disorders.

(3) A licensed clinical professional counselor may engage in the independent practice of professional counseling and is authorized to diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American psychiatric association designated by the board by rules and
regulations. When a client has symptoms of a mental disorder, a licensed clinical professional counselor shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical professional counselor may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

(4) A licensed professional counselor may diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American psychiatric association designated by the board by rules and regulations only under the direction of a licensed clinical professional counselor, licensed psychologist, person licensed to practice medicine and surgery or person licensed to provide mental health services as an independent practitioner and whose licensure allows for the diagnosis and treatment of mental disorders. When a client has symptoms of a mental disorder, a licensed professional counselor shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed professional counselor may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

(d) The board shall adopt rules and regulations establishing the criteria that a college or university shall satisfy in order to be approved by the board. The board may send a questionnaire developed by the board to any college or university for which the board does not have sufficient information to determine whether the school meets the requirements for approval and rules and regulations adopted under this section. The questionnaire providing the necessary information shall be completed and returned to the board in order for the college or university to be considered for approval. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about colleges and universities. In entering such contracts, the authority to approve college and universities shall remain solely with the board.

(e) A person who is waiting to take the examination required by the board may apply to the board for a temporary license to practice as a licensed professional counselor by:
   (1) Paying an application fee of not more than $150; and
   (2) meeting the application requirements as stated in K.S.A. 65-5804a(b)(1), (2) and (4), and amendments thereto.

(f) (1) A temporary license may be issued by the board after the application has been reviewed and approved by the board and the applicant has paid the appropriate fee set by the board for issuance of a temporary license.
   (2) Absent extenuating circumstances approved by the board, a temporary license issued by the board shall expire upon the date the board issues or denies a license to practice professional counseling or 12 months after the date of issuance of the temporary license. No temporary license will be renewed or issued again on any subsequent application for the same license level. The preceding provisions in no way limit the number of times an applicant may take the examination.

(g) A person practicing professional counseling with a temporary license may not use the title "licensed professional counselor" or the initials "LPC" independently. The word "licensed" may be used only when followed by the words "by temporary license," such as licensed professional counselor by temporary license, or professional counselor licensed by temporary license.

(h) No person may practice professional counseling under a temporary license except under the supervision of a person licensed by
the behavioral sciences regulatory board at the independent level.

(i) Nothing in this section shall affect any temporary license to practice issued under this section prior to the effective date of this act and in effect on the effective date of this act. Such temporary license shall be subject to the provisions of this section in effect at the time of its issuance and shall continue to be effective until the date of expiration of the temporary license provided under this section at the time of issuance of such temporary license.

Sec. 15. K.S.A. 65-5807a is hereby amended to read as follows:

65-5807a. (a) Upon written application and board approval, an individual who is licensed to engage in the independent clinical practice of professional counseling at the clinical level in another jurisdiction and who is in good standing in that other jurisdiction and who has engaged in the clinical practice of professional counseling in that jurisdiction for at least two years immediately preceding application may engage in the independent practice of clinical professional counseling as provided by K.S.A. 65-5801 et seq., and amendments thereto, in this state for no more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any clinical professional counseling services rendered within any 24-hour period shall count as one entire day of clinical professional counseling services.

(c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year one year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice for not more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(d) The board may charge a fee of a maximum of $200 for a temporary permit to practice and a fee of a maximum of $200 for an extension of a temporary permit to practice as established by rules and regulations of the board.

(e) A person who holds a temporary permit to practice clinical professional counseling in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of clinical professional counseling in this state.

(f) In accordance with the Kansas administrative procedure act, the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of clinical professional counseling in this state without complying with the provisions of this section.

(g) This section shall be a part of and supplemental to the professional counselors licensure act.

Sec. 16. K.S.A. 65-5808 is hereby amended to read as follows:

65-5808. (a) The board may fix the following fees, and any such fees shall be established by rules and regulations adopted by the board:

(1) For application for licensure as a professional counselor, not more than $100;
(2) for an original license as a professional counselor, not more than $175;
(3) for a temporary license as a professional counselor, not more than $175;
(4) for renewal for licensure as a professional counselor, not more
than $150;
(5) for application for licensure as a clinical professional
counselor, not more than $175;
(6) for licensure as a clinical professional counselor, not more than
$175;
(7) for renewal for licensure as a clinical professional counselor,
not more than $175;
(8) for late renewal penalty, an amount equal to the fee for renewal
of a license;
(9) for reinstatement of a license, not more than $175;
(10) for replacement of a license, not more than $20; and
(11) for a wallet card license, not more than $5; and
(12) for application as a board-approved clinical supervisor, not
more than $50.
(b) Fees paid to the board are not refundable.
Sec. 17. K.S.A. 65-5809 is hereby amended to read as follows: 65-
5809. (a) The board may refuse to issue, renew or reinstate a license,
may condition, limit, revoke or suspend a license, may publicly or
privately censure a licensee or may impose a fine not to exceed $1,000
per violation upon a finding that a licensee or an applicant for
licensure:
(1) is incompetent to practice professional counseling—which
"Incompetent to practice professional counseling" means:
(A) One or more instances involving failure to adhere to the
applicable standard of care to a degree that constitutes gross
negligence, as determined by the board;
(B) repeated instances involving failure to adhere to the applicable
standard of care to a degree that constitutes ordinary negligence, as
determined by the board; or
(C) a pattern of practice or other behavior that demonstrates a
manifest incapacity or incompetence to practice professional
counseling;
(2) has been convicted of a felony offense and has not
demonstrated to the board's satisfaction that such person has been
sufficiently rehabilitated to merit the public trust;
(3) has been convicted of a misdemeanor against persons and has
not demonstrated to the board's satisfaction that such person has been
sufficiently rehabilitated to merit the public trust;
(4) is currently listed on a child abuse registry or an adult
protective services registry as the result of a substantiated finding of
abuse or neglect by any state agency, agency of another state, the
District of Columbia or the United States, territory of the United States
or another country and the applicant or licensee has not demonstrated
to the board's satisfaction that such person has been sufficiently
rehabilitated to merit the public trust;
(5) has violated a provision of the professional counselors
licensure act or one or more rules and regulations of the board;
(6) has obtained or attempted to obtain a license or license renewal
by bribery or fraudulent representation;
(7) has knowingly made a false statement on a form required by
the board for a license or license renewal;
(8) has failed to obtain continuing education credits as required by
rules and regulations adopted by the board;
(9) has been found to have engaged in unprofessional conduct as
defined by applicable rules and regulations adopted by the board;
or
(10) has had a professional registration, license or certificate as a
professional counselor revoked, suspended or limited, or has had other
disciplinary action taken, or an application for a registration, license or
certificate denied, by the proper regulatory authority of another state,
territory, District of Columbia, or other country, a certified copy of the
record of the action of the other jurisdiction being conclusive evidence
thereof; or
(11) has violated any lawful order or directive of the board
previously entered by the board.
(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

(c) Administrative proceedings and disciplinary actions regarding licensure under the professional counselors licensure act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the professional counselors licensure act shall be in accordance with the Kansas judicial review act.

Sec. 18. K.S.A. 2020 Supp. 65-6306 is hereby amended to read as follows: 65-6306. (a) The board shall issue a license as a baccalaureate social worker to an applicant who has:

1. Has a baccalaureate degree from an accredited college or university, including completion of a social work program recognized and approved by the board, pursuant to rules and regulations adopted by the board;

2. Has passed an examination approved by the board for this purpose; and

3. Has satisfied the board that the applicant is a person who merits the public trust.

(b) The board shall issue a license as a master social worker to an applicant who has:

1. Has a master's degree from an accredited college or university, including completion of a social work program recognized and approved by the board, pursuant to rules and regulations adopted by the board;

2. Has passed an examination approved by the board for this purpose; and

3. Has satisfied the board that the applicant is a person who merits the public trust.

(c) The board shall issue a license in one of the social work specialties to an applicant who has:

1. Has a master's or doctor's degree from an accredited graduate school of social work, including completion of a social work program recognized and approved by the board, pursuant to rules and regulations adopted by the board;

2. Has had two years of full-time post-master's or post-doctor's degree experience under the supervision of a licensed social worker in the area of the specialty in which such applicant seeks to be licensed;

3. Has passed an examination approved by the board for this purpose; and

4. Has satisfied the board that the applicant is a person who merits the public trust.

(d) (1) The board shall issue a license as a specialist clinical social worker to an applicant who:

(A) Has met the requirements of subsection (c);

(B) Has completed 15 credit hours as part of or in addition to the requirements under subsection (c) supporting diagnosis or treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, through identifiable study of the following content areas: Psychopathology, diagnostic assessment, interdisciplinary referral and collaboration, treatment approaches and professional ethics;

(C) Has completed a graduate level supervised clinical practicum of supervised professional experience including psychotherapy and assessment, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, with not less than 320 hours of direct client contact or additional postgraduate supervised experience as determined by the board;

(D) Has completed as part of or in addition to the requirements of subsection (c) not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan
approved by the board of not less than 3,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting psychotherapy and assessments with individuals, couples, families or groups and not less than 100 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 25 50 hours of individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and treatment of mental disorders with use of the American Psychiatric Association's diagnostic and statistical manual;

(E) for persons earning a degree under subsection (c) prior to July 1, 2003, in lieu of the education and training requirements under parts subparagraphs (B) and (C) of this subsection, has completed the education requirements for licensure as a specialist clinical social worker in effect on the day immediately preceding the effective date of this act;

(F) for persons who apply for and are eligible for a temporary license to practice as a specialist clinical social worker on the day immediately preceding the effective date of this act, in lieu of the education and training requirements under parts subparagraphs (B), (C) and (D) of this subsection, has completed the education and training requirements for licensure as a specialist clinical social worker in effect on the day immediately preceding the effective date of this act;

(G) has passed an examination approved by the board; and

(H) has paid the application fee.

(2) A licensed specialist clinical social worker may engage in the social work practice and is authorized to diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American Psychiatric Association designated by the board by rules and regulations. When a client has symptoms of a mental disorder, a licensed specialist clinical social worker shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed specialist clinical social worker may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

(3) Notwithstanding any other provision of this subsection, a licensed master social worker who has provided to the board an acceptable clinical supervision plan for licensure as a specialist clinical social worker prior to the effective date of this act shall be licensed as a specialist clinical social worker under this act upon completion of the requirements in effect for licensure as a specialist clinical social worker at the time the acceptable training plan is submitted to the board.

(4) A person licensed as a specialist clinical social worker on the day immediately preceding the effective date of this act shall be deemed to be a licensed specialist clinical social worker under this act. Such person shall not be required to file an original application for licensure as a specialist clinical social worker under this act.

(e) The board shall adopt rules and regulations establishing the criteria which a social work program of a college or university shall satisfy to be recognized and approved by the board under this section. The board may send a questionnaire developed by the board to any college or university conducting a social work program for which the board does not have sufficient information to determine whether the program should be recognized and approved by the board and whether the program meets the rules and regulations adopted under this section. The questionnaire providing the necessary information shall be completed and returned to the board in order for the program to be considered for recognition and approval. The board may contract with investigative agencies, commissions or consultants to assist the board
in obtaining information about a social work program of a college or university. In entering such contracts the authority to recognize and approve a social work program of a college or university shall remain solely with the board.

Sec. 19. K.S.A. 65-6309a is hereby amended to read as follows: 65-6309a. (a) Upon written application and board approval, an individual who is licensed to engage in the independent clinical practice of social work at the clinical level in another jurisdiction and who is in good standing in that other jurisdiction and who has engaged in the independent practice of clinical social work as provided by K.S.A. 65-6308, and amendments thereto, in this state for more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any clinical social work services rendered within any 24-hour period shall count as one entire day of clinical social work services.

c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year one year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice no more than 15 additional days not later than 30 days before the expiration of a temporary permit and under emergency circumstances, as defined by the board, the board may extend the temporary permit for not more than one additional year. Such extended temporary permit shall authorize the individual to practice in this state for an additional 30 days during the additional year. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

d) The board may charge a fee of a maximum of $200 for a temporary permit to practice and a fee of a maximum of $200 for an extension of a temporary permit to practice as established by rules and regulations of the board.

e) A person who holds a temporary permit to practice clinical social work in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of clinical social work in this state.

(f) In accordance with the Kansas administrative procedure act, the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of clinical social work in this state without complying with the provisions of this section.

(g) This section shall be a part of and supplemental to article 63 of chapter 65 of the Kansas Statutes Annotated, and amendments thereto.

Sec. 20. K.S.A. 65-6311 is hereby amended to read as follows: 65-6311. (a) The board may refuse to issue, renew or reinstate a license, may condition, limit, revoke or suspend a license, may publicly or privately censure a licensee or may impose a fine not to exceed $1,000 per violation upon a finding that a licensee or an applicant for license:

(1) Is incompetent to practice social work which "Incompetent to practice social work" means:

(A) One or more instances involving failure to adhere to the applicable standard of care to a degree that constitutes gross negligence, as determined by the board;

(B) repeated instances involving failure to adhere to the applicable standard of care to a degree that constitutes ordinary negligence, as determined by the board; or

(C) a pattern of practice or other behavior that demonstrates a manifest incapacity or incompetence to practice social work;

(2) has been convicted of a felony offense and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(3) has been convicted of a misdemeanor against persons and has
not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;
(4) is currently listed on a child abuse registry or an adult protective services registry as the result of a substantiated finding of abuse or neglect by any state agency, agency of another state, the District of Columbia or the United States, territory of the United States or another country and the applicant or licensee has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;
(5) has violated a provision of the social workers licensure act or one or more rules and regulations of the board;
(6) has obtained or attempted to obtain a license or license renewal by bribery or fraudulent representation;
(7) has knowingly made a false statement on a form required by the board for a license or license renewal;
(8) has failed to obtain continuing education credits as required by rules and regulations adopted by the board;
(9) has been found to have engaged in unprofessional conduct as defined by applicable rules and regulations adopted by the board;
(10) has had a professional license, registration or certificate to practice social work revoked, suspended or limited, or has had other disciplinary action taken, or an application for a license, registration or certificate denied, by the proper regulatory authority of another state, territory, District of Columbia, or other country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; or
(11) has violated any lawful order or directive of the board previously entered by the board.

(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

c) Administrative proceedings and disciplinary actions regarding licensure under the social workers licensure act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the social workers licensure act shall be in accordance with the Kansas judicial review act.

Sec. 21. K.S.A. 65-6404 is hereby amended to read as follows: 65-6404. (a) An applicant for licensure as a marriage and family therapist shall furnish evidence that the applicant has:
(1) Has attained the age of 21 years of age;
(2) (A) has completed a master's or doctoral degree from a marriage and family therapy program, in an educational institution with standards approved by the board; or (B) has completed a master's or doctoral degree from an educational institution in a related field for which the course work is considered by the board to be equivalent to that provided in clause (2) subparagraph (A) of this paragraph and consists of a minimum of nine semester hours in human development, nine semester hours in theories of marriage and family functioning, nine semester hours of marital and family assessment and therapy, three semester hours in professional studies and three semester hours in research; or (C) completed a master's or doctoral degree from an educational institution in a related field with additional work from an educational program in marriage and family therapy approved by the board and such degree program and additional work includes the course work requirements provided in clause (2) subparagraph (B) of this paragraph;
(3) has passed an examination approved by the board;
(4) has satisfied the board that the applicant is a person who merits the public trust; and
(5) each applicant has paid the application fee established by the board under K.S.A. 65-6411, and amendments thereto.
(b) (1) Applications for licensure as a clinical marriage and family
therapist shall be made to the board on a form and in the manner prescribed by the board. Each applicant shall furnish evidence satisfactory to the board that the applicant:

(A) Is licensed by the board as a licensed marriage and family therapist or meets all requirements for licensure as a marriage and family therapist;

(B) has completed 15 credit hours as part of or in addition to the requirements under subsection (a) supporting diagnosis or treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, through identifiable study of the following content areas: Psychopathology, diagnostic assessment, interdisciplinary referral and collaboration, treatment approaches and professional ethics;

(C) has completed a graduate level supervised clinical practicum of supervised professional experience including psychotherapy and assessment with individuals, couples, families or groups, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, with not less than 350 hours of direct client contact or additional postgraduate supervised experience as determined by the board;

(D) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 4,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting psychotherapy and assessments with individuals, couples, families or groups and not less than 100 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 150 hours of face-to-face individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, except that one-half the board may waive 1/2 of the requirement of hours required by this part (D) may be waived subparagraph for persons with an individual who has a doctor's degree in marriage and family therapy or a related field acceptable to the board and who completes the required 1/2 of the hours in not less than one year of supervised professional experience;

(E) for persons who earned a degree under subsection (a) prior to July 1, 2003, in lieu of the education and training requirements under parts subparagraphs (B) and (C) of this subsection, has completed the education requirements for licensure as a marriage and family therapist in effect on the day immediately preceding the effective date of this act;

(F) for persons who apply for and are eligible for a temporary permit to practice as a licensed marriage and family therapist on the day immediately preceding the effective date of this act, in lieu of the education and training requirements under parts subparagraphs (B), (C) and (D) of this subsection, has completed the education and training requirements for licensure as a marriage and family therapist in effect on the day immediately preceding the effective date of this act;

(G) has passed an examination approved by the board; and

(H) has paid the application fee fixed under K.S.A. 65-6411, and amendments thereto.

(2) A person who was licensed or registered as a marriage and family therapist in Kansas at any time prior to the effective date of this act, who has been actively engaged in the practice of marriage and family therapy as a registered or licensed marriage and family therapist within five years prior to the effective date of this act and whose last license or registration in Kansas prior to the effective date of this act was not suspended or revoked, upon application to the board, payment of fees and completion of applicable continuing education requirements, shall be licensed as a licensed clinical marriage and family therapist by providing demonstration of competence to diagnose
and treat mental disorders through at least two of the following areas acceptable to the board:

(A) Either: (i) Graduate coursework; or (ii) passing a national, clinical examination;

(B) either: (i) Three years of clinical practice in a community mental health center, its contracted affiliate or a state mental hospital; or (ii) three years of clinical practice in other settings with demonstrated experience in diagnosing or treating mental disorders; or

(C) attestation from one professional licensed to diagnose and treat mental disorders in independent practice or licensed to practice medicine and surgery that the applicant is competent to diagnose and treat mental disorders.

(3) A licensed clinical marriage and family therapist may engage in the independent practice of marriage and family therapy and is authorized to diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American psychiatric association designated by the board by rules and regulations. When a client has symptoms of a mental disorder, a licensed clinical marriage and family therapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical marriage and family therapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

(4) On and after January 1, 2002, a licensed marriage and family therapist may diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American psychiatric association designated by the board by rules and regulations only under the direction of a licensed clinical marriage and family therapist, licensed psychologist, person licensed to practice medicine and surgery or person licensed to provide mental health services as an independent practitioner and whose licensure allows for the diagnosis and treatment of mental disorders. When a client has symptoms of a mental disorder, a licensed marriage and family therapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed marriage and family therapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Sec. 22. K.S.A. 65-6405a is hereby amended to read as follows:

65-6405a. (a) Upon written application and board approval, an individual who is licensed to engage in the independent clinical practice of marriage and family therapy at the clinical level in another jurisdiction and who is in good standing in that other jurisdiction and has engaged in the clinical practice of marriage and family therapy in that jurisdiction for at least two years immediately preceding application may engage in the independent practice of clinical marriage and family therapy in this state for no more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any clinical marriage and family therapy services rendered within any 24-hour period shall count as one entire day of clinical marriage and family therapy services.

(c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year.
year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice no more than 15 additional days not later than 30 days before the expiration of a temporary permit and under emergency circumstances, as defined by the board, the board may extend the temporary permit for not more than one additional year. Such extended temporary permit shall authorize the individual to practice in this state for an additional 30 days during the additional year. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(d) The board may charge a fee of a maximum of $200 for a temporary permit to practice and a fee of a maximum of $200 for an extension of a temporary permit to practice as established by rules and regulations of the board.

(e) A person who holds a temporary permit to practice clinical marriage and family therapy in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of clinical marriage and family therapy in this state.

(f) In accordance with the Kansas administrative procedures act, the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of clinical marriage and family therapy in this state without complying with the provisions of this section.

(g) This section shall be a part of and supplemental to the marriage and family therapists licensure act.

Sec. 23. K.S.A. 65-6408 is hereby amended to read as follows: 65-6408. (a) The board may refuse to issue, renew or reinstate a license, may condition, limit, revoke or suspend a license, may publicly or privately censure a licensee or may impose a fine not to exceed $1,000 per violation upon a finding that a licensee or an applicant for license:

(1) Is incompetent to practice marriage and family therapy, which "Incompetent to practice marriage and family therapy" means:

(A) One or more instances involving failure to adhere to the applicable standard of care to a degree that constitutes gross negligence, as determined by the board;

(B) repeated instances involving failure to adhere to the applicable standard of care to a degree that constitutes ordinary negligence, as determined by the board; or

(C) a pattern of practice or other behavior that demonstrates a manifest incapacity or incompetence to practice marriage and family therapy;

(2) has been convicted of a felony offense and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(3) has been convicted of a misdemeanor against persons and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(4) is currently listed on a child abuse registry or an adult protective services registry as the result of a substantiated finding of abuse or neglect by any state agency, agency of another state, the District of Columbia or the United States, territory of the United States or another country and the applicant or licensee has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(5) has violated a provision of the marriage and family therapists licensure act or one or more of the rules and regulations of the board;

(6) has obtained or attempted to obtain a license or license renewal by bribery or fraudulent representation;

(7) has knowingly made a false statement on a form required by the board for license or license renewal;

(8) has failed to obtain continuing education credits required by rules and regulations of the board;
(9) has been found to have engaged in unprofessional conduct as defined by applicable rules and regulations adopted by the board; or
(10) has had a professional registration, license or certificate as a marriage and family therapist revoked, suspended or limited, or has had other disciplinary action taken, or an application for registration, license or certificate denied, by the proper regulatory authority of another state, territory, District of Columbia or another country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; or
(11) has violated any lawful order or directive of the board previously entered by the board.

(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

c) Administrative proceedings and disciplinary actions regarding licensure under the marriage and family therapists licensure act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the marriage and family therapists licensure act shall be in accordance with the Kansas judicial review act.

Sec. 24. K.S.A. 2020 Supp. 65-6411 is hereby amended to read as follows: 65-6411. (a) The board may fix the following fees, and any such fees shall be established by rules and regulations adopted by the board:

(1) For application for licensure as a marriage and family therapist, not to exceed $150;
(2) for temporary licensure as a marriage and family therapist, not to exceed $175;
(3) for original licensure as a marriage and family therapist, not to exceed $175;
(4) for renewal for licensure as a marriage and family therapist, not to exceed $175;
(5) for application for licensure as a clinical marriage and family therapist, not to exceed $175;
(6) for original licensure as a clinical marriage and family therapist, not to exceed $175;
(7) for renewal for licensure as a clinical marriage and family therapist, not to exceed $175;
(8) for reinstatement of a license, not to exceed $175;
(9) for replacement of a license, not to exceed $20;
(10) for renewal penalty, an amount equal to the renewal of license; and
(11) for a wallet card license, not to exceed $5; and
(12) for application for approval as a board-approved clinical supervisor, not to exceed $50.

(b) Fees paid to the board are not refundable.

Sec. 25. K.S.A. 65-6610 is hereby amended to read as follows: 65-6610. (a) An applicant for licensure as an addiction counselor shall furnish evidence that the applicant:

(1) Has attained the age of 21 years of age;
(2) (A) has completed at least a baccalaureate degree from an addiction counseling program that is part of a college or university approved by the board; or
(B) has completed at least a baccalaureate degree from a college or university approved by the board. As part of, or in addition to, the baccalaureate degree coursework, such applicant shall also complete a minimum number of semester hours of coursework on substance use disorders as approved by the board; or
(C) is currently licensed in Kansas as a licensed baccalaureate social worker and has completed a minimum number of semester hours of coursework on substance use disorders as approved by the board; and
(3) has passed an examination approved by the board;
(4) has satisfied the board that the applicant is a person who merits the public trust; and
(5) has paid the application fee established by the board under K.S.A. 65-6618, and amendments thereto.

(b) Applications for licensure as a master's addiction counselor shall be made to the board on a form and in the manner prescribed by the board. Each applicant shall furnish evidence satisfactory to the board that the applicant:

(1) (A) Has attained the age of 21 years of age;
(B) (i) has completed at least a master's degree from an addiction counseling program that is part of a college or university approved by the board;
(ii) has completed at least a master's degree from a college or university approved by the board. As part of or in addition to the master's degree coursework, such applicant shall also complete a minimum number of semester hours of coursework supporting the diagnosis and treatment of substance use disorders as approved by the board; or
(iii) is currently licensed in Kansas as a licensed master social worker, licensed professional counselor, licensed marriage and family therapist or licensed master's level psychologist; and
(C) has passed an examination approved by the board;
(D) has satisfied the board that the applicant is a person who merits the public trust; and
(E) has paid the application fee fixed under K.S.A. 65-6618, and amendments thereto; or
(2) (A) has met the following requirements on or before July 1, 2016:
(i) Holds an active license by the board as an addiction counselor; and
(ii) has completed at least a master's degree in a related field from a college or university approved by the board; and
(B) has completed six hours of continuing education in the diagnosis and treatment of substance use disorders during the three years immediately preceding the application date.

c) Applications for licensure as a clinical addiction counselor shall be made to the board on a form and in the manner prescribed by the board. Each applicant shall furnish evidence satisfactory to the board that the applicant:

(1) Has attained the age of 21 years of age; and
(2) (A) (i) has completed at least a master's degree from an addiction counseling program that is part of a college or university approved by the board; and
(ii) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 4,000 3,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 150 100 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 25 hours of person-to-person individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and statistical manual of mental disorders of the American psychiatric association; or has completed not less than one year of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 2,000 hours of supervised professional experience including at least 750 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 75 hours of clinical supervision, including not less than 25 hours of person-to-person individual supervision, integrating diagnosis and
treatment of substance use disorders, with use of the diagnostic and statistical manual of mental disorders of the American psychiatric association, and such person has a doctoral degree in addiction counseling or a related field as approved by the board, except that the board may waive \( \frac{1}{2} \) of the hours required by this clause for an individual who has a doctoral degree in addiction counseling or a related field approved by the board and who completes the required \( \frac{1}{2} \) of the hours in not less than one year of supervised professional experience; or

(B) (i) has completed at least a master's degree from a college or university approved by the board. As part of or in addition to the master's degree coursework, such applicant shall also complete a minimum number of semester hours of coursework supporting the diagnosis and treatment of substance use disorders as approved by the board; and

(ii) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 4,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 500 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 50 hours of person-to-person individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and treatment of substance use disorders with use of the diagnostic and statistical manual of mental disorders of the American psychiatric association; or has completed not less than one year of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 2,000 hours of supervised professional experience including at least 750 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 500 hours of person-to-person individual supervision, except that the board may waive \( \frac{1}{2} \) of the hours required by this clause for an individual who has a doctoral degree in addiction counseling or a related field approved by the board and who completes the required \( \frac{1}{2} \) of the hours in not less than one year of supervised professional experience; or

(C) (i) has completed a master's degree from a college or university approved by the board and is licensed by the board as a licensed master's addiction counselor; and

(ii) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 4,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 500 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 50 hours of person-to-person individual supervision, except that the board may waive \( \frac{1}{2} \) of the hours required by this clause for an individual who has a doctoral degree in addiction counseling or a related field approved by the board and who completes the required \( \frac{1}{2} \) of the hours in not less than one year of supervised professional experience; or
supervised professional experience including at least 750 hours of direct client contact conducting substance abuse assessments and treatment with individuals, couples, families or groups and not less than 25 hours of clinical supervision, including not less than 25 hours of person-to-person individual supervision, integrating diagnosis and treatment of substance use disorders with use of the diagnostic and statistical manual of mental disorders of the American psychiatric association, and such person has a doctoral degree in addiction counseling or a related field as approved by the board, except that the board may waive \( \frac{1}{2} \) of the hours required by this clause for an individual who has a doctoral degree in addiction counseling or a related field approved by the board and who completes the required \( \frac{1}{2} \) of the hours in not less than one year of supervised professional experience; or

(D) is currently licensed in Kansas as a licensed psychologist, licensed specialist clinical social worker, licensed clinical professional counselor, licensed clinical psychotherapist or licensed clinical marriage and family therapist and provides to the board an attestation from a professional licensed to diagnose and treat mental disorders, or substance use disorders, or both, in independent practice or licensed to practice medicine and surgery stating that the applicant is competent to diagnose and treat substance use disorders;

(3) has passed an examination approved by the board; and

(4) has satisfied the board that the applicant is a person who merits the public trust; and

(5) has paid the application fee fixed under K.S.A. 65-6618, and amendments thereto.

Sec. 26. K.S.A. 65-6612 is hereby amended to read as follows:

65-6612. (a) Upon written application and board approval, an individual who is licensed to engage in the independent clinical practice of addiction counseling at the clinical level in another jurisdiction, who is in good standing in that other jurisdiction and who has engaged in the clinical practice of addiction counseling in that jurisdiction for at least two years immediately preceding application may engage in the clinical practice of addiction counseling as provided by the addiction counselor licensure act, in this state for not more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any clinical addiction counseling services rendered within any 24-hour period shall count as one entire day of clinical addiction counseling services.

(c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year one year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice no more than 15 additional days not later than 30 days before the expiration of a temporary permit and under emergency circumstances, as defined by the board, the board may extend the temporary permit for not more than one additional year. Such extended temporary permit shall authorize the individual to practice in this state for an additional 30 days during the additional year. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(d) The board shall charge a fee for a temporary permit to practice and a fee for an extension of a temporary permit to practice as fixed under K.S.A. 65-6618, and amendments thereto.

(e) A person who holds a temporary permit to practice clinical addiction counseling in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of clinical addiction counseling in this state.

(f) In accordance with the Kansas administrative procedure act,
the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of clinical addiction counseling in this state without complying with the provisions of this section.

Sec. 27. K.S.A. 65-6615 is hereby amended to read as follows: 65-6615. (a) The board may refuse to issue, renew or reinstate a license, may condition, limit, revoke or suspend a license, may publicly or privately censure a licensee or may impose a fine not to exceed $1,000 per violation upon a finding that a licensee or an applicant for license:

(1) Is incompetent to practice addiction counseling—which "incompetent to practice addiction counseling" means:

(A) One or more instances involving failure to adhere to the applicable standard of care to a degree that constitutes gross negligence, as determined by the board;

(B) repeated instances involving failure to adhere to the applicable standard of care to a degree that constitutes ordinary negligence, as determined by the board; or

(C) a pattern of practice or other behavior that demonstrates a manifest incapacity or incompetence to practice addiction counseling;

(2) has been convicted of a felony offense and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(3) has been convicted of a misdemeanor against persons and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(4) is currently listed on a child abuse registry or an adult protective services registry as the result of a substantiated finding of abuse or neglect by any state agency, agency of another state, the District of Columbia or the United States, territory of the United States or another country and the applicant or licensee has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(5) has violated a provision of the addiction counselor licensure act or one or more of the rules and regulations of the board;

(6) has obtained or attempted to obtain a license or license renewal by bribery or fraudulent representation;

(7) has knowingly made a false statement on a form required by the board for license or license renewal;

(8) has failed to obtain continuing education credits required by rules and regulations of the board;

(9) has been found to have engaged in unprofessional conduct as defined by applicable rules and regulations adopted by the board; or

(10) has had a professional registration, license or certificate as an addiction counselor revoked, suspended or limited, or has had other disciplinary action taken, or an application for registration, license or certificate denied, by the proper regulatory authority of another state, territory, District of Columbia or another country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; or

(11) has violated any lawful order or directive of the board previously entered by the board.

(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

(c) Administrative proceedings and disciplinary actions regarding licensure under the addiction counselor licensure act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the addiction counselor licensure act shall be in accordance with the Kansas judicial review act.

Sec. 28. K.S.A. 74-5316a is hereby amended to read as follows: 74-5316a. (a) Upon written application and board approval, an
individual who is licensed to engage in the independent practice of psychology in another jurisdiction and who is in good standing in that other jurisdiction and who has engaged in the practice of psychology in that jurisdiction for at least two years immediately preceding application may engage in the independent practice of psychology as provided by K.S.A. 74-5301 et seq., and amendments thereto, in this state for not more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any psychology services rendered within any 24-hour period shall count as one entire day of psychology services.

(c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year one year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice no more than 15 additional days not later than 30 days before the expiration of a temporary permit and under emergency circumstances, as defined by the board, the board may extend the temporary permit for not more than one additional year. Such extended temporary permit shall authorize the individual to practice in this state for an additional 30 days during the additional year. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(d) The board may charge a fee of a maximum of $200 for a temporary permit to practice and a fee of a maximum of $200 for an extension of a temporary permit to practice as established by rules and regulations of the board.

(e) A person who holds a temporary permit to practice psychology in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of psychology in this state.

(f) In accordance with the Kansas administrative procedure act, the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of psychology in this state without complying with the provisions of this section.

(g) This section shall be a part of and supplemental to the licensure of psychologists act.

Sec. 29. K.S.A. 74-5324 is hereby amended to read as follows: 74-5324. (a) The board may refuse to issue, renew or reinstate a license, may condition, limit, revoke or suspend a license, may publicly or privately censure a licensee or may impose a fine not to exceed $1,000 per violation upon a finding that a licensee or an applicant for a license:

(1) Is incompetent to practice psychology, which “Incompetent to practice psychology” means:

(A) One or more instances involving failure to adhere to the applicable standard of care to a degree that constitutes gross negligence, as determined by the board;

(B) repeated instances involving failure to adhere to the applicable standard of care to a degree that constitutes ordinary negligence, as determined by the board; or

(C) a pattern of practice or other behavior that demonstrates a manifest incapacity or incompetence to practice psychology;

(2) has been convicted of a felony offense and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(3) has been convicted of a misdemeanor against persons and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(4) is currently listed on a child abuse registry or an adult protective services registry as the result of a substantiated finding of
abuse or neglect by any state agency, agency of another state or the United States, territory of the United States or another country and the applicant or licensee has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(5) has violated a provision of the licensure of psychologists act of the state of Kansas or one or more rules and regulations of the board;

(6) has obtained or attempted to obtain a license or license renewal by bribery or fraudulent representation;

(7) has knowingly made a false statement on a form required by the board for a license or license renewal;

(8) has failed to obtain continuing education credits as required by rules and regulations of the board;

(9) has been found to have engaged in unprofessional conduct as defined by applicable rules and regulations adopted by the board;

(10) has had a professional registration, license or certificate as a psychologist revoked, suspended or limited, or has had other disciplinary action taken, or an application for registration, license or certificate denied, by the proper regulatory authority of another state, territory, District of Columbia or another country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; or

(11) has violated any lawful order or directive of the board previously entered by the board.

(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

(c) Administrative proceedings and disciplinary actions regarding licensure under the licensure of psychologists act of the state of Kansas shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the licensure of psychologists of the state of Kansas act shall be in accordance with the Kansas judicial review act.

Sec. 30. K.S.A. 74-5363 is hereby amended to read as follows: 74-5363. (a) Any person who desires to be licensed under this act shall apply to the board in writing, on forms prepared and furnished by the board. Each application shall contain appropriate documentation of the particular qualifications required by the board and shall be accompanied by the required fee.

(b) The board shall license as a licensed master's level psychologist any applicant for licensure who pays the fee prescribed by the board under K.S.A. 74-5365, and amendments thereto, which shall not be refunded, who has satisfied the board as to such applicant's training and who complies with the provisions of this subsection. An applicant for licensure also shall submit evidence satisfactory to the board that such applicant:

(1) Is at least 21 years of age;

(2) has satisfied the board that the applicant is a person who merits public trust;

(3) has received at least 60 graduate hours including a master's degree in psychology based on a program of studies in psychology from an educational institution having a graduate program in psychology consistent with state universities of Kansas; or until July 1, 2003, has received at least a master's degree in psychology and during such master's or post-master's coursework completed a minimum of 12 semester hours or its equivalent in psychological foundation courses such as, but not limited to, philosophy of psychology, psychology of perception, learning theory, history of psychology, motivation, and statistics and 24 semester hours or its equivalent in professional core courses such as, but not limited to, two courses in psychological testing, psychopathology, two courses in psychotherapy, personality theories, developmental psychology, research methods, social psychology; or has passed comprehensive examinations or equivalent
final examinations in a doctoral program in psychology and during such graduate program completed a minimum of 12 semester hours or its equivalent in psychological foundation courses such as, but not limited to, philosophy of psychology, psychology of perception, learning theory, history of psychology, motivation, and statistics and 24 semester hours or its equivalent in professional core courses such as, but not limited to, two courses in psychological testing, psychopathology, two courses in psychotherapy, personality theories, developmental psychology, research methods, social psychology;

(4) has completed 750 clock hours of academically supervised practicum in the master's degree program or 1,500 clock hours of postgraduate supervised work experience; and

(5) has passed an examination approved by the board with a minimum score set by the board by rules and regulations.

(c) (1) Applications for licensure as a clinical psychotherapist shall be made to the board on a form and in the manner prescribed by the board. Each applicant shall furnish evidence satisfactory to the board that the applicant:

(A) Is licensed by the board as a licensed master's level psychologist or meets all requirements for licensure as a master's level psychologist;

(B) has completed 15 credit hours as part of or in addition to the requirements under subsection (b) supporting diagnosis or treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, through identifiable study of: Psychopathology, diagnostic assessment, interdisciplinary referral and collaboration, treatment approaches and professional ethics;

(C) has completed a graduate level supervised clinical practicum of supervised professional experience including psychotherapy and assessment with individuals, couples, families or groups, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual, with not less than 350 hours of direct client contact or additional postgraduate supervised experience as determined by the board;

(D) has completed not less than two years of postgraduate supervised professional experience in accordance with a clinical supervision plan approved by the board of not less than 3,000 hours of supervised professional experience including at least 1,500 hours of direct client contact conducting psychotherapy and assessments with individuals, couples, families or groups and not less than 100 hours of face-to-face clinical supervision, as defined by the board in rules and regulations, including not less than 50 hours of person-to-person individual supervision, except that the board may waive the requirement that such supervision be face-to-face upon a finding of extenuating circumstances, integrating diagnosis and treatment of mental disorders with use of the American psychiatric association's diagnostic and statistical manual;

(E) for persons earning a degree under subsection (b) prior to July 1, 2003, in lieu of the education requirements under subparagraphs (B) and (C), has completed the education requirements for licensure as a licensed master's level psychologist in effect on the day immediately preceding the effective date of this act;

(F) for persons who apply for and are eligible for a temporary license to practice as a licensed master's level psychologist on the day immediately preceding the effective date of this act, in lieu of the education and training requirements under subparagraphs (B), (C) and (D), has completed the education and training requirements for licensure as a master's level psychologist in effect on the day immediately preceding the effective date of this act;

(G) has passed an examination approved by the board with the same minimum passing score as that set by the board for licensed psychologists; and

(H) has paid the application fee, if required by the board.

(2) A person who was licensed or registered as a master's level
psychologist in Kansas at any time prior to the effective date of this act, who has been actively engaged in the practice of master's level psychology as a registered or licensed master's level psychologist within five years prior to the effective date of this act and whose last license or registration in Kansas prior to the effective date of this act was not suspended or revoked, upon application to the board, payment of fees and completion of applicable continuing education requirements, shall be licensed as a licensed clinical psychotherapist by providing demonstration of competence to diagnose and treat mental disorders through at least two of the following areas acceptable to the board:

(A) Either: (i) Graduate coursework; or (ii) passing a national, clinical examination;

(B) either: (i) Three years of clinical practice in a community mental health center, its contracted affiliate or a state mental hospital; or (ii) three years of clinical practice in other settings with demonstrated experience in diagnosing or treating mental disorders; or

(C) attestation from one professional licensed to diagnose and treat mental disorders in independent practice or licensed to practice medicine and surgery that the applicant is competent to diagnose and treat mental disorders.

(3) A licensed clinical psychotherapist may engage in the independent practice of master's level psychology and is authorized to diagnose and treat mental disorders specified in the edition of the diagnostic and statistical manual of mental disorders of the American psychiatric association designated by the board by rules and regulations. When a client has symptoms of a mental disorder, a licensed clinical psychotherapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical psychotherapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

(d) The board shall adopt rules and regulations establishing the criteria upon which that an educational institution shall satisfy in meeting the requirements established under subsection (b)(3). The board may send a questionnaire developed by the board to any educational institution for which the board does not have sufficient information to determine whether the educational institution meets the requirements of subsection (b)(3) and rules and regulations adopted under this section. The questionnaire providing the necessary information shall be completed and returned to the board in order for the educational institution to be considered for approval. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about educational institutions. In entering such contracts the authority to approve educational institutions shall remain solely with the board.

Sec. 31. K.S.A. 74-5367a is hereby amended to read as follows: 74-5367a. (a) Upon written application and board approval, an individual who is licensed to engage in the independent clinical practice of masters level psychology at the clinical level in another jurisdiction and who has engaged in the clinical practice of masters level psychology in that jurisdiction for at least two years immediately preceding application may engage in the independent practice of clinical masters level psychology as provided by K.S.A. 74-5361 et seq., and amendments thereto, in this state for not more than 30 days per year upon receipt of a temporary permit to practice issued by the board. Such individual engaging in such practice in this state shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

(b) Any clinical masters level psychology services rendered within
any 24-hour period shall count as one entire day of clinical masters level psychology services.

c) The temporary permit to practice shall be effective on the date of approval by the board and shall expire December 31 of that year one year after issuance. Upon written application and for good cause shown, the board may extend the temporary permit to practice no more than 15 additional days not later than 30 days before the expiration of a temporary permit and under emergency circumstances, as defined by the board, the board may extend the temporary permit for not more than one additional year. Such extended temporary permit shall authorize the individual to practice in this state for an additional 30 days during the additional year. Such individual engaging in such practice shall provide quarterly reports to the board on a form approved by the board detailing the total days of practice in this state.

d) The board may charge a fee of a maximum of $200 for a temporary permit to practice and a fee of a maximum of $200 for an extension of a temporary permit to practice as established by rules and regulations of the board.

e) A person who holds a temporary permit to practice clinical masters level psychology in this state shall be deemed to have submitted to the jurisdiction of the board and shall be bound by the statutes and regulations that govern the practice of clinical masters level psychology in this state.

(f) In accordance with the Kansas administrative procedure act, the board may issue a cease and desist order or assess a fine of up to $1,000 per day, or both, against a person licensed in another jurisdiction who engages in the independent practice of clinical masters level psychology in this state without complying with the provisions of this section.

g) This act shall be a part of and supplemental to the licensure of masters level psychologists act.

Sec. 32. K.S.A. 74-5369 is hereby amended to read as follows: 74-5369. (a) The board may refuse to issue, renew or reinstate a license, may condition, limit, revoke or suspend a license, may publicly or privately censure a licensee or may impose a fine not to exceed $1,000 per violation upon a finding that a licensee or an applicant for licensure:

(1) Is incompetent to practice psychology, which "Incompetent to practice psychology" means:

(A) One or more instances involving failure to adhere to the applicable standard of care to a degree that constitutes gross negligence, as determined by the board;

(B) repeated instances involving failure to adhere to the applicable standard of care to a degree that constitutes ordinary negligence, as determined by the board; or

(C) a pattern of practice or other behavior that demonstrates a manifest incapacity or incompetence to practice master's level psychology;

(2) has been convicted of a felony offense and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(3) has been convicted of a misdemeanor against persons and has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(4) is currently listed on a child abuse registry or an adult protective services registry as the result of a substantiated finding of abuse or neglect by any state agency, agency of another state, the District of Columbia or the United States, territory of the United States or another country and the applicant or licensee has not demonstrated to the board's satisfaction that such person has been sufficiently rehabilitated to merit the public trust;

(5) has violated a provision of the licensure of master's level psychologists act or one or more rules and regulations of the board;

(6) has obtained or attempted to obtain a license or license renewal
by bribery or fraudulent representation;

(7) has knowingly made a false statement on a form required by the board for a license or license renewal;

(8) has failed to obtain continuing education credits as required by rules and regulations adopted by the board;

(9) has been found to have engaged in unprofessional conduct as defined by applicable rules and regulations of the board;

(10) has had a professional registration, license or certificate as a master's level psychologist revoked, suspended or limited, or has had other disciplinary action taken, or an application for a registration, license or certificate denied, by the proper regulatory authority of another state, territory, District of Columbia or another country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; or

(11) has violated any lawful order or directive of the board previously entered by the board.

(b) For issuance of a new license or reinstatement of a revoked or suspended license for a licensee or applicant for licensure with a felony conviction, the board may only issue or reinstate such license by a 2/3 majority vote.

(c) Administrative proceedings and disciplinary actions regarding licensure under the licensure of master's level psychologists act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under the licensure of master's level psychologists act shall be in accordance with the Kansas judicial review act.


Sec. 34. This act shall take effect and be in force from and after its publication in the Kansas register.

I hereby certify that the above Bill originated in the House, and was adopted by that body.

__________________________
Speaker of the House.

__________________________
Chief Clerk of the House.

Passed the Senate as amended

__________________________
President of the Senate.

__________________________
Secretary of the Senate.

APPROVED

__________________________
Governor.