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

Section 1. K.S.A. 2015 Supp. 59-29b46 is hereby amended to read as follows: 59-29b46. When used in the care and treatment act for persons with an alcohol or substance abuse problem:

(a) "Discharge" means the final and complete release from treatment, by either the head of a treatment facility acting pursuant to K.S.A. 59-29b50, and amendments thereto, or by an order of a court issued pursuant to K.S.A. 59-29b73, and amendments thereto.

(b) "Head of a treatment facility" means the administrative director of a treatment facility or such person's designee.

(c) "Law enforcement officer" shall have the meaning ascribed to it means the same as defined in K.S.A. 22-2202, and amendments thereto.

(d) "Licensed addiction counselor" means a person who engages in the practice of addiction counseling limited to substance use disorders and who is licensed by the behavioral sciences regulatory board. Such person shall engage in the practice of addiction counseling in a state-licensed or certified alcohol and other drug treatment program or in completing a Kansas domestic violence offender assessment for participants in a certified batterer intervention program pursuant to K.S.A. 2015 Supp. 75-7d01 through 75-7d13, and amendments thereto, unless otherwise exempt from licensure under subsection (n).

(e) "Licensed clinical addiction counselor" means a person who engages in the independent practice of addiction counseling and diagnosis and treatment of substance use disorders specified in the edition of the American psychiatric association's diagnostic and statistical manual of mental disorders (DSM) designated by the board by rules and regulations and is licensed by the behavioral sciences regulatory board.

(f) "Other facility for care or treatment" means any mental health clinic, medical care facility, nursing home, the detox units at either Osawatomie state hospital or Larned state hospital, any physician or any
other institution or individual authorized or licensed by law to give care or
treatment to any person.

(g) "Patient" means a person who is a voluntary patient, a
proposed patient or an involuntary patient.

(1) "Voluntary patient" means a person who is receiving treatment at
a treatment facility pursuant to K.S.A. 59-29b49, and amendments thereto.

(2) "Proposed patient" means a person for whom a petition pursuant
to K.S.A. 59-29b52 or 59-29b57, and amendments thereto, has been filed.

(3) "Involuntary patient" means a person who is receiving treatment
under order of a court or a person admitted and detained by a treatment
facility pursuant to an application filed pursuant to subsection (b) or (c) of
K.S.A. 59-29b54(b) or (c), and amendments thereto.

(h) "Person with an alcohol or substance abuse problem" means a
person who:

(1) Lacks self-control as to the use of alcoholic beverages or any
substance as defined in subsection (k) (l); or

(2) uses alcoholic beverages or any substance as defined in
subsection (k) (l) to the extent that the person's health may be substantially
impaired or endangered without treatment.

(1) "Person with an alcohol or substance abuse problem subject
to involuntary commitment for care and treatment" means a person with an
alcohol or substance abuse problem, as defined in subsection (h), who
also is incapacitated by alcohol or any substance and is likely to cause
harm to self or others.

(2) "Incapacitated by alcohol or any substance" means that the
person, as the result of the use of alcohol or any substance as defined in
subsection (l), has impaired judgment resulting in the person:

(A) Being incapable of realizing and making a rational decision with
respect to the need for treatment; or

(B) lacking sufficient understanding or capability to make or
communicate responsible decisions concerning either the person's well-
being or estate.

(3) "Likely to cause harm to self or others" means that the person, by
reason of the person's use of alcohol or any substance:

(A) Is likely, in the reasonably foreseeable future, to cause substantial
physical injury or physical abuse to self or others or substantial damage to
another's property, as evidenced by behavior threatening, attempting or
causing such injury, abuse or damage; except that if the harm threatened,
attempted or caused is only harm to the property of another, the harm must
be of such a value and extent that the state's interest in protecting the
property from such harm outweighs the person's interest in personal
liberty; or

(B) is substantially unable, except for reason of indigency, to provide
for any of the person's basic needs, such as food, clothing, shelter, health
or safety, causing a substantial deterioration of the person's ability to
function on the person's own.

(j) "Physician" means a person licensed to practice medicine and
surgery as provided for in the Kansas healing arts act or a person who is
employed by a state psychiatric hospital or by an agency of the United
States and who is authorized by law to practice medicine and surgery
within that hospital or agency.

(k) "Psychologist" means a licensed psychologist, as defined by
K.S.A. 74-5302, and amendments thereto.

(l) "State certified alcohol and drug abuse counselor" means a person
approved by the secretary for aging and disability services to perform
assessments using the American Society of Addiction Medicine criteria
and employed at a state funded and designated assessment center.

(m) "Substance" means:
(1) The same as the term "controlled substance" as defined in K.S.A.
2015 Supp. 21-5701, and amendments thereto; or
(2) fluorocarbons, toluene or volatile hydrocarbon solvents.

(m) "Treatment" means the broad range of emergency, outpatient,
intermediate and inpatient services and care, including diagnostic
evaluation, medical, psychiatric, psychological and social service care,
vocational rehabilitation and career counseling, which may be extended to
persons with an alcohol or substance abuse problem.

(m) (n) (1) "Treatment facility" means a treatment program, public or
private treatment facility, or any facility of the United States government
available to treat a person for an alcohol or other substance abuse problem,
but such term shall not include a licensed medical care facility, a licensed
adult care home, a facility licensed under K.S.A. 75-3307b, and
amendments thereto, a community-based alcohol and drug safety action
program certified under K.S.A. 8-1008, and amendments thereto, and
performing only those functions for which the program is certified to
perform under K.S.A. 8-1008, and amendments thereto, or a professional
licensed by the behavioral sciences regulatory board to diagnose and treat
mental disorders at the independent level or a physician, who may treat in
the usual course of the behavioral sciences regulatory board licensee's or
physician's professional practice individuals incapacitated by alcohol or
other substances, but who are not primarily engaged in the usual course of
the individual's professional practice in treating such individuals, or any
state institution, even if detoxification services may have been obtained at
such institution.

(2) "Private treatment facility" means a private agency providing
facilities for the care and treatment or lodging of persons with either an
alcohol or other substance abuse problem and meeting the standards
prescribed in either K.S.A. 65-4013 or 65-4603, and amendments thereto, and licensed under either K.S.A. 65-4014 or 65-4607, and amendments thereto.

(3) "Public treatment facility" means a treatment facility owned and operated by any political subdivision of the state of Kansas and licensed under either K.S.A. 65-4014 or 65-4603, and amendments thereto, as an appropriate place for the care and treatment or lodging of persons with an alcohol or other substance abuse problem.

(o) The terms defined in K.S.A. 59-3051, and amendments thereto, shall have the meanings provided by that section.

Sec. 2. K.S.A. 59-29b54 is hereby amended to read as follows: 59-29b54. (a) A treatment facility may admit and detain any person for emergency observation and treatment upon an ex parte emergency custody order issued by a district court pursuant to K.S.A. 59-29b58, and amendments thereto.

(b) A treatment facility or the detox unit at Osawatomie state hospital or at Larned state hospital may admit and detain any person presented for emergency observation and treatment upon written application of a law enforcement officer having custody of that person pursuant to K.S.A. 59-29b53, and amendments thereto. The application shall state:

(1) The name and address of the person sought to be admitted, if known;

(2) the name and address of the person's spouse or nearest relative, if known;

(3) the officer's belief that the person is or may be a person with an alcohol or substance abuse problem subject to involuntary commitment for care and treatment and is likely to cause harm to self or others if not immediately detained;

(4) the factual circumstances in support of that belief and the factual circumstances under which the person was taken into custody including any known pending criminal charges; and

(5) the fact that the law enforcement officer will file the petition provided for in K.S.A. 59-29b57, and amendments thereto, by the close of business of the first day thereafter that the district court is open for the transaction of business, or that the officer has been informed by a parent, legal guardian or other person, whose name shall be stated in the application will file the petition provided for in K.S.A. 59-29b57, and amendments thereto, within that time.

(c) A treatment facility may admit and detain any person presented for emergency observation and treatment upon the written application of any individual. The application shall state:

(1) The name and address of the person sought to be admitted, if known;
(2) the name and address of the person's spouse or nearest relative, if known;
(3) the applicant's belief that the person may be a person with an alcohol or substance abuse problem subject to involuntary commitment and is likely to cause harm to self or others if not immediately detained;
(4) the factual circumstances in support of that belief;
(5) any pending criminal charges, if known;
(6) the fact that the applicant will file the petition provided for in K.S.A. 59-29b57, and amendments thereto, by the close of business of the first day thereafter that the district court is open for the transaction of business; and
(7) the application shall also be accompanied by a statement in writing of a physician, psychologist or state certified alcohol and drug abuse licensed addiction counselor finding that the person is likely to be a person with an alcohol or substance abuse problem subject to involuntary commitment for care and treatment under this act.

(d) Any treatment facility or personnel thereof, who in good faith renders treatment in accordance with law to any person admitted pursuant to subsection (b) or (c), shall not be liable in a civil or criminal action based upon a claim that the treatment was rendered without legal consent.

Sec. 3. K.S.A. 59-29b61 is hereby amended to read as follows: 59-29b61. (a) The order for an evaluation required by subsection (a)(5) of K.S.A. 59-29b60(a)(5), and amendments thereto, shall be served in the manner provided for in subsections (c) and (d) of K.S.A. 59-29b63(c) and (d), and amendments thereto. It shall order the proposed patient to submit to an evaluation to be conducted by a physician, psychologist or state certified alcohol and drug abuse licensed addiction counselor and to undergo such other medical examinations or evaluations as may be designated by the court in the order, except that any proposed patient who is not subject to a temporary custody order issued pursuant to K.S.A. 59-29b59, and amendments thereto, and who requests a hearing pursuant to K.S.A. 59-29b62, and amendments thereto, need not submit to such evaluations or examinations until that hearing has been held and the court finds that there is probable cause to believe that the proposed patient is a person with an alcohol or substance abuse problem subject to involuntary commitment for care and treatment under this act. The evaluation may be conducted at a treatment facility, the home of the proposed patient or any other suitable place that the court determines is not likely to have a harmful effect on the welfare of the proposed patient.

(b) At the time designated by the court in the order, but in no event later than three days prior to the date of the trial provided for in K.S.A. 59-29b65, and amendments thereto, the examiner shall submit to the court a report, in writing, of the evaluation which report also shall be made
available to counsel for the parties at least three days prior to the trial. The report also shall be made available to the proposed patient and to whomever the patient directs, unless for good cause recited in the order, the court orders otherwise. Such report shall state that the examiner has made an examination of the proposed patient and shall state the opinion of the examiner on the issue of whether or not the proposed patient is a person with an alcohol or substance abuse problem subject to involuntary commitment for care and treatment under this act and the examiner's opinion as to the least restrictive treatment alternative which will protect the proposed patient and others and allow for the improvement of the proposed patient if treatment is ordered.

Sec. 4. K.S.A. 2015 Supp. 59-3077 is hereby amended to read as follows: 59-3077. (a) At any time after the filing of the petition provided for in K.S.A. 59-3058, 59-3059, 59-3060 or 59-3061, and amendments thereto, any person may file in addition to that original petition, or as a part thereof, or at any time after the appointment of a temporary guardian as provided for in K.S.A. 59-3073, and amendments thereto, or a guardian as provided for in K.S.A. 59-3067, and amendments thereto, the temporary guardian or guardian may file, a verified petition requesting that the court grant authority to the temporary guardian or guardian to admit the proposed ward or ward to a treatment facility, as defined in subsection (h), and to consent to the care and treatment of the proposed ward or ward therein. The petition shall include:

(1) The petitioner's name and address, and if the petitioner is the proposed ward's or ward's court appointed temporary guardian or guardian, that fact;

(2) the proposed ward's or ward's name, age, date of birth, address of permanent residence, and present address or whereabouts, if different from the proposed ward's or ward's permanent residence;

(3) the name and address of the proposed ward's or ward's court appointed temporary guardian or guardian, if different from the petitioner;

(4) the factual basis upon which the petitioner alleges the need for the proposed ward or ward to be admitted to and treated at a treatment facility, or for the proposed ward or ward to continue to be treated at the treatment facility to which the proposed ward or ward has already been admitted, or for the guardian to have continuing authority to admit the ward for care and treatment at a treatment facility pursuant to subsection (b)(3) of K.S.A. 59-2949(b)(3) or subsection (b)(3) of K.S.A. 59-29b49(b)(3), and amendments thereto;

(5) the names and addresses of witnesses by whom the truth of this petition may be proved; and

(6) a request that the court find that the proposed ward or ward is in need of being admitted to and treated at a treatment facility, and that the
court grant to the temporary guardian or guardian the authority to admit
the proposed ward or ward to a treatment facility and to consent to the care
and treatment of the proposed ward or ward therein.

(b) The petition may be accompanied by a report of an examination
and evaluation of the proposed ward or ward conducted by an
appropriately qualified professional, which shows that the criteria set out
in K.S.A. 39-1803, subsection (e) of K.S.A. 59-2946(e), subsection (f) of
K.S.A. 59-29b46(h) or K.S.A. 76-12b03, and amendments thereto, are
met.

(c) Upon the filing of such a petition, the court shall issue the
following:

(1) An order fixing the date, time and place of a hearing on the
petition. Such hearing, in the court's discretion, may be conducted in a
courtroom, a treatment facility or at some other suitable place. The time
fixed in the order shall in no event be earlier than seven days or later than
21 days after the date of the filing of the petition. The court may
consolidate this hearing with the trial upon the original petition filed
pursuant to K.S.A. 59-3058, 59-3059, 59-3060 or 59-3061, and
amendments thereto, or with the trial provided for in the care and
treatment act for mentally ill persons or the care and treatment act for
persons with an alcohol or substance abuse problem, if the petition also
incorporates the allegations required by, and is filed in compliance with,
the provisions of either of those acts.

(2) An order requiring that the proposed ward or ward appear at the
time and place of the hearing on the petition unless the court makes a
finding prior to the hearing that the presence of the proposed ward or ward
will be injurious to the person's health or welfare, or that the proposed
ward's or ward's impairment is such that the person could not meaningfully
participate in the proceedings, or that the proposed ward or ward has filed
with the court a written waiver of such ward's right to appear in person. In
any such case, the court shall enter in the record of the proceedings the
facts upon which the court has found that the presence of the proposed
ward or ward at the hearing should be excused. Notwithstanding the
foregoing provisions of this subsection, if the proposed ward or ward files
with the court at least one day prior to the date of the hearing a written
notice stating the person's desire to be present at the hearing, the court
shall order that the person must be present at the hearing.

(3) An order appointing an attorney to represent the proposed ward or
ward. The court shall give preference, in the appointment of this attorney,
to any attorney who has represented the proposed ward or ward in other
matters, if the court has knowledge of that prior representation. The
proposed ward, or the ward with the consent of the ward's conservator, if
one has been appointed, shall have the right to engage an attorney of the
proposed ward's or ward's choice and, in such case, the attorney appointed by the court shall be relieved of all duties by the court. Any appointment made by the court shall terminate upon a final determination of the petition and any appeal therefrom, unless the court continues the appointment by further order.

(4) An order fixing the date, time and a place that is in the best interest of the proposed ward or ward, at which the proposed ward or ward shall have the opportunity to consult with such ward's attorney. This consultation shall be scheduled to occur prior to the time at which the examination and evaluation ordered pursuant to subsection (d)(1), if ordered, is scheduled to occur.

(5) A notice similar to that provided for in K.S.A. 59-3066, and amendments thereto.

(d) Upon the filing of such a petition, the court may issue the following:

(1) An order for a psychological or other examination and evaluation of the proposed ward or ward, as may be specified by the court. The court may order the proposed ward or ward to submit to such an examination and evaluation to be conducted through a general hospital, psychiatric hospital, community mental health center, community developmental disability organization, or by a private physician, psychiatrist, psychologist or other person appointed by the court who is qualified to examine and evaluate the proposed ward or ward. The costs of this examination and evaluation shall be assessed as provided for in K.S.A. 59-3094, and amendments thereto.

(2) If the petition is accompanied by a report of an examination and evaluation of the proposed ward or ward as provided for in subsection (b), an order granting temporary authority to the temporary guardian or guardian to admit the proposed ward or ward to a treatment facility and to consent to the care and treatment of the proposed ward or ward therein. Any such order shall expire immediately after the hearing upon the petition, or as the court may otherwise specify, or upon the discharge of the proposed ward or ward by the head of the treatment facility, if the proposed ward or ward is discharged prior to the time at which the order would otherwise expire.

(3) For good cause shown, an order of continuance of the hearing.

(4) For good cause shown, an order of advancement of the hearing.

(5) For good cause shown, an order changing the place of the hearing.

(e) The hearing on the petition shall be held at the time and place specified in the court's order issued pursuant to subsection (c), unless an order of advancement, continuance, or a change of place of the hearing has been issued pursuant to subsection (d). The petitioner and the proposed ward or ward shall each be afforded an opportunity to appear at the
hearing, to testify and to present and cross-examine witnesses. If the
hearing has been consolidated with a trial being held pursuant to either the
care and treatment act for mentally ill persons or the care and treatment act
for persons with an alcohol or substance abuse problem, persons not
necessary for the conduct of the proceedings may be excluded as provided
for in those acts. The hearing shall be conducted in as informal a manner
as may be consistent with orderly procedure. The court shall have the
authority to receive all relevant and material evidence which may be
offered, including the testimony or written report, findings or
recommendations of any professional or other person who has examined
or evaluated the proposed ward or ward pursuant to any order issued by
the court pursuant to subsection (d). Such evidence shall not be privileged
for the purpose of this hearing.

(f) Upon completion of the hearing, if the court finds by clear and
convincing evidence that the criteria set out in K.S.A. 39-1803, subsection
(e) of K.S.A. 59-2946(e), subsection (f) of K.S.A. 59-29b46(h) or K.S.A.
76-12b03, and amendments thereto, are met, and after a careful
consideration of reasonable alternatives to admission of the proposed ward
or ward to a treatment facility, the court may enter an order granting such
authority to the temporary guardian or guardian as is appropriate,
including continuing authority to the guardian to readmit the ward to an
appropriate treatment facility as may later become necessary. Any such
grant of continuing authority shall expire two years after the date of final
discharge of the ward from such a treatment facility if the ward has not had
to be readmitted to a treatment facility during that two-year period of time.
Thereafter, any such grant of continuing authority may be renewed only
after the filing of another petition seeking authority in compliance with the
provision of this section.

(g) Nothing herein shall be construed so as to prohibit the head of a
treatment facility from admitting a proposed ward or ward to that facility
as a voluntary patient if the head of the treatment facility is satisfied that
the proposed ward or ward at that time has the capacity to understand such
ward's illness and need for treatment, and to consent to such ward's
admission and treatment. Upon any such admission, the head of the
treatment facility shall give notice to the temporary guardian or guardian
as soon as possible of the ward's admission, and shall provide to the
temporary guardian or guardian copies of any consents the proposed ward
or ward has given. Thereafter, the temporary guardian or guardian shall
timely either seek to obtain proper authority pursuant to this section to
admit the proposed ward or ward to a treatment facility and to consent to
further care and treatment, or shall otherwise assume responsibility for the
care of the proposed ward or ward, consistent with the authority of the
temporary guardian or guardian, and may arrange for the discharge from
the facility of the proposed ward or ward, unless the head of the treatment facility shall file a petition requesting the involuntary commitment of the proposed ward or ward to that or some other facility.

(h) As used herein, "treatment facility" means the Kansas neurological institute, Larned state hospital, Osawatomie state hospital, Parsons state hospital and training center, the rainbow mental health facility, any intermediate care facility for people with intellectual disability, any psychiatric hospital licensed pursuant to K.S.A. 75-3307b, and amendments thereto, and any other facility for mentally ill persons or people with intellectual or developmental disabilities licensed pursuant to K.S.A. 75-3307b, and amendments thereto, if the proposed ward or ward is to be admitted as an inpatient or resident of that facility.

Sec. 5. K.S.A. 65-4016 is hereby amended to read as follows: 65-4016. The secretary shall adopt rules and regulations with respect to treatment facilities to be licensed and designed to further the accomplishment of the purposes of this law in promoting a safe and adequate treatment program for individuals in treatment facilities in the interest of public health, safety and welfare including, but not limited to, minimum qualifications for employees of licensed or certified programs which are less than the qualifications required for a registered alcohol and other drug abuse counselor. Boards of trustees or directors of institutions licensed under this act shall have the right to select the professional staff members of such institutions and to select and employ interns, nurses and other personnel.

Sec. 6. K.S.A. 2015 Supp. 65-4024a is hereby amended to read as follows: 65-4024a. As used in this act:

(a) "Act" means the alcohol or other drug addiction treatment act.

(b) "Alcohol or other drug addiction" means a pattern of substance use, leading to significant impairment or distress, manifested by three or more of the following occurring at any time in the same 12-month period:

1. Tolerance, defined as: (A) A need for markedly increased amounts of the substance to achieve intoxication or desired effect; or (B) a markedly diminished effect with continued use of the same amount of substance;
2. withdrawal, as manifested by either of the following: (A) The characteristic withdrawal syndrome for the substance; or (B) the same or a closely related substance is taken to relieve or avoid withdrawal symptoms;
3. the substance is often taken in larger amounts or over a longer period than was intended;
4. there is a persistent desire or unsuccessful efforts to cut down or control substance use;
5. a great deal of time is spent in activities necessary to obtain the
substance, use the substance or recover from its effects;

(6) important social, occupational or recreational activities are given up or reduced because of substance use;

(7) the substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.

(c) "Care or treatment" means such necessary services as are in the best interests of the physical and mental health of the patient.

(d) "Committee" means the Kansas citizens committee on alcohol and other drug abuse.

(e) "Counselor" means an individual whose education, experience and training has been evaluated and approved by the Kansas department for aging and disability services to provide the scope of practice afforded to an alcohol and drug credentialed counselor or counselor assistant working in a licensed, certified alcohol and drug treatment program.

(f) "Department" means the Kansas department for aging and disability services.

(g) "Designated state funded assessment center" or "assessment center" means a treatment facility designated by the secretary.

(h) "Discharge" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

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

(j) "Head of the treatment facility" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(k) "Incapacitated by alcohol" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(l) "Intoxicated individual" means an individual who is under the influence of alcohol or drugs or both.

(m) "Law enforcement officer" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(m) "Licensed addiction counselor" means a person who engages in the practice of addiction counseling limited to substance use disorders and who is licensed by the behavioral sciences regulatory board. Such person shall engage in the practice of addiction counseling in a state-licensed or certified alcohol and other drug treatment program or in completing a Kansas domestic violence offender assessment for participants in a certified batterer intervention program pursuant to K.S.A. 2015 Supp. 75-7d01 through 75-7d13, and amendments thereto, unless otherwise exempt.
from licensure under K.S.A. 59-29b46(n), and amendments thereto.

(n) "Licensed clinical addiction counselor" means a person who engages in the independent practice of addiction counseling and diagnosis and treatment of substance use disorders specified in the edition of the American psychiatric association's diagnostic and statistical manual of mental disorders (DSM) designated by the board by rules and regulations and is licensed by the behavioral sciences regulatory board.

(o) "Patient" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(p) "Private treatment facility" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(q) "Public treatment facility" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(r) "Treatment" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(s) "Treatment facility" shall have the meaning ascribed to it means the same as defined in K.S.A. 59-29b46, and amendments thereto.

(t) "Secretary" means the secretary for aging and disability services.

Sec. 7. K.S.A. 2015 Supp. 65-6608 is hereby amended to read as follows: 65-6608. As used in the addictions counselor licensure act:

(a) "Board" means the behavioral sciences regulatory board created under K.S.A. 74-7501, and amendments thereto.

(b) "Addiction counseling" means the utilization of special skills to assist persons with addictions, and to assist such persons' families and friends to achieve resolution of addiction through the exploration of the disease and its ramifications, the examination of attitudes and feelings, the consideration of alternative solutions and decision making, as these relate specifically to addiction. Evaluation and assessment, treatment including treatment plan development, crisis intervention, referral, record keeping and clinical consultation specifically related to addiction are within the scope of addiction counseling. Additionally, at the clinical level of licensure, addiction counseling includes independent practice and the diagnosis and treatment of substance use disorders.

(c) "Licensed addiction counselor" means a person who engages in the practice of addiction counseling limited to substance use disorders and who is licensed under this act. Such person shall engage in the practice of addiction counseling in a state-licensed or certified alcohol and other drug treatment program or in completing a Kansas domestic violence offender assessment for participants in a certified batterer intervention program pursuant to K.S.A. 2015 Supp. 75-7d01 through 75-7d13, and amendments
thereto, unless otherwise exempt from licensure under subsection (m) of K.S.A. 59-29b46(n), and amendments thereto.

(d) "Licensed clinical addiction counselor" means a person who engages in the independent practice of addiction counseling and diagnosis and treatment of substance use disorders specified in the edition of the American psychiatric association's diagnostic and statistical manual of mental disorders (DSM) designated by the board by rules and regulations and is licensed under this act.

Sec. 8. K.S.A. 2015 Supp. 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; and

(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 in a related field that includes a minimum number of semester hours of coursework on substance use disorders as approved by the board; or

(C) has completed at least a baccalaureate degree from a college or university approved by the board in a related field with additional coursework in addiction counseling from a college or university approved by the board, and such degree program and the additional coursework includes a minimum number of semester hours of coursework on substance use disorders as approved by the board; or

(D) 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; or

(E) is currently licensed in Kansas as a licensed master social worker, licensed professional counselor, licensed marriage and family therapist or licensed masters level psychologist; and

(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) each applicant has paid the application fee established by the board under K.S.A. 2015 Supp. 65-6618, and amendments thereto.

(b) 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; 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 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 hours of clinical supervision, including not less than 50 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; or 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 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; or
(B) (i) has completed a master's degree from a college or university approved by the board in a related field that includes 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 150 hours of clinical supervision, including not less than 50 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; or 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 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; or

(C) (i) has completed a master's degree from a college or university approved by the board in a related field with additional coursework in addiction counseling from a college or university approved by the board and such degree program and additional coursework includes 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 150 hours of clinical supervision, including not less than 50 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; or 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 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; or

(D) (i) has completed a master's degree in a related field from a college or university approved by the board and is licensed by the board as a licensed 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 150 hours of clinical supervision, including not less than 50 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.
disorders of the American psychiatric association; or 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 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; or

(E) 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; and

(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. 2015 Supp. 65-6618, and amendments thereto.

(c) A person who was registered by the behavioral sciences regulatory board as an alcohol and other drug counselor or credentialing by the Kansas department for aging and disability services as an alcohol and drug credentialed counselor or credentialing by the Kansas association of addiction professionals as an alcohol and other drug abuse counselor in Kansas at any time prior to the effective date of this act, who was registered in Kansas as an alcohol and other drug counselor, an alcohol and drug credentialed counselor or a credentialing alcohol and other drug abuse counselor within three years prior to the effective date of this act and whose last registration or credential 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 addiction counselor by providing demonstration acceptable to the board of competence to perform the duties of an addiction counselor.

(d) Any person who was registered by the behavioral sciences regulatory board as an alcohol and other drug counselor or credentialing by the department of social and rehabilitation services as an alcohol and drug


credentialed counselor or credentialed by the Kansas association of
addiction professionals as an alcohol and other drug abuse counselor in
Kansas at any time prior to the effective date of this act, and who is also
licensed to practice independently as a mental health practitioner or person
licensed to practice medicine and surgery, and who was registered or
credentialed in Kansas as an alcohol and other drug counselor within three
years prior to the effective date of this act and whose last registration or
credential 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 addiction counselor and may engage in the
independent practice of addiction counseling and is authorized to diagnose
and treat substance use 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.
(e) Any person who was credentialed by the department of social and
rehabilitation services as an alcohol and drug counselor and has been
actively engaged in the practice, supervision or administration of addiction
counseling in Kansas for not less than four years and holds a master's
degree in a related field from a college or university approved by the board
and whose last registration or credential 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 clinical addiction counselor and may
engage in the independent practice of addiction counseling and is
authorized to diagnose and treat substance use 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.
(f) A licensed addiction counselor shall engage in the practice of
addiction counseling only in a state licensed or certified alcohol and other
drug treatment program, unless otherwise exempt from licensure under
subsection (m) of K.S.A. 59-29b46(m), and amendments thereto.
Sec. 9. K.S.A. 59-29b54, 59-29b61 and 65-4016 and K.S.A. 2015
Supp. 59-29b46, 59-3077, 65-4024a, 65-6608 and 65-6610 are hereby
repealed.
Sec. 10. This act shall take effect and be in force from and after its
publication in the statute book.