SB 32 amends the Medical Student Loan Act (Act) and the statute establishing the Kansas Medical Residency Bridging Program (Program), and it restricts the outsourcing and privatization of certain state operations and facilities.

**Medical Student Loan Act**

The bill amends the Act by expanding the eligible practice areas loan recipients may engage in to meet their loan obligations under the Act. The bill adds general psychiatry and child psychiatry to the definitions of “approved postgraduate residency training program” and “service commitment area.” The bill also allows a loan recipient under the Act to meet the loan obligation to engage in the full-time practice of medicine and surgery in a service commitment area if the person served as a full-time faculty member of the University of Kansas School of Medicine (KUMC) in general or child psychiatry. Additionally, the bill allows a loan recipient to satisfy the obligation to engage in the full-time practice of medicine and surgery in a service commitment area by performing at least 100 hours per month of on-site mental health care at a medical facility, a community mental health center, Larned State Hospital (LSH), Osawatomie State Hospital (OSH), or any facility that provides mental health services and is operated by a state agency.

The bill requires, subject to appropriations, KUMC to enter into medical student loan agreements with six individuals who commit to satisfying their loan obligations by practicing or teaching, as described above, general or child psychiatry. The bill creates the Psychiatry Medical Loan Repayment Fund in the State Treasury, and all moneys credited to the Fund shall be expended only for expenses associated with general or child psychiatry students under the Act. The bill specifies that no moneys shall be transferred from the Comprehensive Grant Program account of the State Board of Regents to the Medical Loan Repayment Fund or the Psychiatry Medical Loan Repayment Fund or expended for any related purposes.

**Kansas Medical Residency Bridging Program**

The bill amends the statute establishing the Program by expanding the eligible practice areas. The bill adds persons in a mental health care residency training program in general or child psychiatry to the list of persons with whom KUMC may enter into residency bridging loan agreements.

The bill requires, subject to appropriations, KUMC to enter into residency bridging loan agreements with three medical residents training in general or child psychiatry. The bill creates the Rural Health Bridging Psychiatry Fund in the State Treasury, and all moneys credited to the Fund shall be expended only for expenses associated with general psychiatry or child psychiatry residents under the Program. The bill specifies that no moneys shall be transferred from the Comprehensive Grant Program account of the State Board of Regents to the Rural Health Bridging Psychiatry Fund or expended for any related purposes.
Restrictions on Outsourcing and Privatization of Certain State Operations and Facilities

The bill prohibits the outsourcing or privatization of any operation or facility of LSH, OSH, or any facility that provides mental health services and is operated by a state agency, including, but not limited to, any action to transfer all or any part of the rated bed capacity at LSH or OSH without specific authorization by the Legislature. Additionally, the Secretary for Aging and Disability Services shall not be allowed to transfer or assign any person admitted to an institution for the purpose of circumventing the outsourcing or privatization restrictions imposed in law (KSA 2016 Supp. 75-3373).