{As Amended by Senate Committee of the Whole}

As Amended by Senate Committee

Session of 2021

SENATE BILL No. 283

By Committee on Federal and State Affairs

3-1

AN ACT concerning the {governmental response to the COVID-19 1 2 pandemic in Kansas; extending the expanded use of telemedicine in response to the COVID-19 public health emergency; extending the 3 authority of the board of healing arts to grant certain temporary 4 emergency licenses; imposing requirements related thereto and 5 expiring such provisions; extending the suspension of certain 6 7 requirements related to medical care facilities and expiring such provisions; modifying the} COVID-19 response and reopening for 8 business liability protection act; modifying extending immunity {from 9 civil liability for certain healthcare providers and} for certain persons 10 conducting business in this state for COVID-19 claims accruing on or 11 after March 12, 2020, and prior to termination of the state of disaster 12 13 emergency related to the COVID-19 public health emergency until March 31, 2022; amending K.S.A. 2020 Supp. {48-963, as amended 14 by section 7 of 2021 Senate Bill No. 14, 48-964, 48-965, as amended 15 by section 8 of 2021 Senate Bill No. 14, 60-5503, 60-5504, as 16 amended by section 10 of 2021 Senate Bill No. 14, and 60-5508 60-17 18 5508 {and 65-468} and repealing the existing sections section 19 {sections}.

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

Section 1. K.S.A. 2020 Supp. 48-963, as amended by section 7 of
2021 Senate Bill No. 14, is hereby amended to read as follows: 48-963.
(a) A physician may issue a prescription for or order the administration
of medication, including a controlled substance, for a patient without
conducting an in-person examination of such patient.
(b) A physician under quarantine, including self-imposed

(b) A physician under quarantine, including self-imposed
 quarantine, may practice telemedicine.

(c) (1) A physician holding a license issued by the applicable
 licensing agency of another state may practice telemedicine to treat
 patients located in the state of Kansas, if such out-of-state physician:

32 (A) Advises the state board of healing arts of such practice in writing

and in a manner determined by the state board of healing arts; and 1

(B) holds an unrestricted license to practice medicine and surgery in 2 the other state and is not the subject of any investigation or disciplinary-3 action by the applicable licensing agency holds a temporary emergency 4 license granted pursuant to K.S.A. 2020 Supp. 48-965, and amendments 5 6 thereto.

7 The state board of healing arts may extend the provisions of this (2) subsection to other healthcare professionals licensed and regulated by 8 the board as deemed necessary by the board to address the impacts of 9 COVID-19 and consistent with ensuring patient safety. 10

(d) A physician practicing telemedicine in accordance with this 11 section shall conduct an appropriate assessment and evaluation of the 12 patient's current condition and document the appropriate medical 13 indication for any prescription issued. 14

(e) Nothing in this section shall supersede or otherwise affect the 15 16 provisions of K.S.A. 65-4a10, and amendments thereto, or K.S.A. 2020 17 Supp. 40-2,215, and amendments thereto.

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(f) As used in this section:

(1) "Physician" means a person licensed to practice medicine and 19 20 surgery.

21 (2) "Telemedicine" means the delivery of healthcare services by a 22 healthcare provider while the patient is at a different physical location. (g) This section shall expire on March 31, 20212022.

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Sec. 2. K.S.A. 2020 Supp. 48-964 is hereby amended to read as 24 follows: 48-964. (a) (1) A hospital may admit patients in excess of such 25 hospital's number of licensed beds or inconsistent with the licensed 26 classification of such hospital's beds to the extent that such hospital 27 determines is necessary to treat COVID-19 patients and to separate 28 COVID-19 patients and non-COVID-19 patients. 29

(2) A hospital admitting patients in such manner shall notify the 30 department of health and environment as soon as practicable but shall 31 32 not be required to receive prior authorization to admit patients in such 33 manner.

34 (b) (1) A hospital may utilize non-hospital space, including offcampus space, to perform COVID-19 testing, triage, quarantine or 35 patient care to the extent that such hospital determines is necessary to 36 37 treat COVID-19 patients and to separate COVID-19 patients and non-38 COVID-19 patients.

39 (2) The department of health and environment may impose reasonable safety requirements on such use of non-hospital space to 40 maximize the availability of patient care. 41

(3) Non-hospital space used in such manner shall be deemed to 42 43 meet the requirements of K.S.A. 65-431(d), and amendments thereto.

1 (4) A hospital utilizing non-hospital space in such manner shall 2 notify the department of health and environment as soon as practicable 3 but shall not be required to receive prior authorization to utilize non-4 hospital space in such manner.

5 (c) A medical care facility may permit healthcare providers 6 authorized to provide healthcare services in the state of Kansas to 7 provide healthcare services at such medical care facility without 8 becoming a member of the medical care facility's medical staff.

9 (d) As used in this section, "hospital" and "medical care facility" 10 mean the same as defined in K.S.A. 65-425, and amendments thereto.

(e) This section shall expire 120 calendar days after the expiration or
 termination of the state of disaster emergency proclamation issued by the
 governor in response to the COVID-19 public health emergency, or any
 extension thereof on March 31, 2022.

15 Sec. 3. K.S.A. 2020 Supp. 48-965, as amended by section 8 of 2021 16 Senate Bill No. 14, is hereby amended to read as follows: 48-965. (a) Notwithstanding any statute to the contrary, the state board of healing 17 arts may grant a temporary emergency license to practice any profession 18 19 licensed, certified, registered or regulated by the board to an applicant with qualifications the board deems sufficient to protect public safety 20 and welfare within the scope of professional practice authorized by the 21 22 temporary emergency license for the purpose of preparing for, responding to or mitigating any effect of COVID-19. 23

(b) Notwithstanding any statute to the contrary, an applicant may
practice in Kansas pursuant to a temporary emergency license upon
submission of a non-resident healthcare provider certification form to the
Kansas healthcare stabilization fund and without paying the surcharge
required by K.S.A. 40-3404, and amendments thereto.

(c) This section shall expire on March 31, 20212022.

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Sec. 4. K.S.A. 2020 Supp. 60-5503 is hereby amended to read as 30 follows: 60-5503. (a) Notwithstanding any other provision of law, except 31 32 as provided in subsection (c), a healthcare provider is immune from civil liability for damages, administrative fines or penalties for acts, 33 omissions, healthcare decisions or the rendering of or the failure to 34 render healthcare services, including services that are altered, delayed 35 36 or withheld, as a direct response to any state of disaster emergency-37 declared pursuant to K.S.A. 48-924, and amendments thereto, related to 38 the COVID-19 public health emergency.

(b) The provisions of this section shall apply to any claims for
damages or liability that arise out of or relate to acts, omissions or
healthcare decisions occurring during any state of disaster emergency
declared pursuant to K.S.A. 48-924, and amendments thereto
between
March 12, 2020, and March 31, 2022, related to the COVID-19 public

1 *health emergency.*

2 (c) (1) The provisions of this section shall not apply to civil liability
3 when it is established that the act, omission or healthcare decision
4 constituted gross negligence or willful, wanton or reckless conduct.

5 (2) The provisions of this section shall not apply to healthcare 6 services not related to COVID-19 that have not been altered, delayed or 7 withheld as a direct response to the COVID-19 public health emergency. 8 (d) The provisions of this section shall expire on March 31, 2022.

9 Section 1. {Sec. 5.} K.S.A. 2020 Supp. 60-5504, as amended by section 10 of 2021 Senate Bill No. 14, is hereby amended to read as 10 follows: 60-5504. (a) Notwithstanding any other provision of law. a 11 person, or an agent of such person, conducting business in this state shall 12 be immune from liability in a civil action for a COVID-19 claim if such 13 person was acting pursuant to and in substantial compliance with public 14 15 health directives applicable to the activity giving rise to the cause of action 16 when the cause of action accrued.

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(b) The provisions of this section shall expire on March 31, 2021.

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(b) The provisions of this section shall expire on March 31, 2022.

See. 2. K.S.A. 2020 Supp. 60-5508 is hereby amended to read asfollows: 60-5508. (a) The provisions of K.S.A. 2020 Supp. 60-5504, 605505 and 60-5507, and amendments thereto, shall apply retroactively to
any cause of action accruing on or after March 12, 2020.

(b) The provisions of K.S.A. 2020 Supp. 60-5503, 60-5504 and 60 5506, and amendments thereto, shall apply retroactively to any cause of
 action accruing on or after March 12, 2020, and prior to termination of the
 state of disaster emergency related to the COVID-19 public health emergency declared pursuant to K.S.A. 48-924, and amendments thereto.

28 Sec. 6. K.S.A. 2020 Supp. 60-5508 is hereby amended to read as 29 follows: 60-5508. (a) The provisions of K.S.A. 2020 Supp. 60-5504, 60-30 5505 and 60-5507, and amendments thereto, shall apply retroactively 31 to any cause of action accruing on or after March 12, 2020.

(b) The provisions of K.S.A. 2020 Supp. <u>60-5503 and</u> 60-5506, and amendments thereto, shall apply retroactively to any cause of action accruing on or after March 12, 2020, and prior to termination of the state of disaster emergency related to the COVID-19 public health emergency declared pursuant to K.S.A. 48-924, and amendments thereto.

(c) The provisions of K.S.A. 2020 Supp. 60-5503, and amendments
thereto, shall apply retroactively to any cause of action accruing on or
after March 12, 2020, and prior to March 31, 2022.

41 {Sec.<u>-6.</u> 7. K.S.A. 2020 Supp. 65-468 is hereby amended to read as 42 follows: 65-468. As used in K.S.A. 65-468 through 65-474, and 43 amendments thereto: 1 (a) "Healthcare provider" means any person licensed or otherwise 2 authorized by law to provide health care services in this state or a 3 professional corporation organized pursuant to the professional 4 corporation law of Kansas by persons who are authorized by law to form 5 such corporation and who are health care providers as defined by this 6 subsection, or an officer, employee or agent thereof, acting in the course 7 and scope of employment or agency.

8 (b) "Member" means any hospital, emergency medical service, 9 local health department, home health agency, adult care home, medical 10 clinic, mental health center or clinic or nonemergency transportation 11 system.

12 (c) "Mid-level practitioner" means a physician assistant or 13 advanced practice registered nurse who has entered into a written 14 protocol with a rural health network physician.

15 (d) "Physician" means a person licensed to practice medicine and 16 surgery.

17 "Rural health network" means an alliance of members, (e) 18 including at least one critical access hospital and at least one other 19 hospital, that has developed a comprehensive plan submitted to and 20 approved by the secretary of health and environment regarding: Patient referral and transfer; the provision of emergency and nonemergency 21 transportation among members; the development of a network-wide 22 emergency services plan; and the development of a plan for sharing 23 patient information and services between hospital members concerning 24 25 medical staff credentialing, risk management, quality assurance and 26 peer review.

27 (f) (1) "Critical access hospital" means a member of a rural health 28 network that: Makes available 24-hour emergency care services; 29 provides not more than 25 acute care inpatient beds or in the case of a facility with an approved swing-bed agreement a combined total of 30 extended care and acute care beds that does not exceed 25 beds; provides 31 32 acute inpatient care for a period that does not exceed, on an annual 33 average basis, 96 hours per patient; and provides nursing services under the direction of a licensed professional nurse and continuous licensed 34 professional nursing services for not less than 24 hours of every day 35 when any bed is occupied or the facility is open to provide services for 36 37 patients unless an exemption is granted by the licensing agency 38 pursuant to rules and regulations. The critical access hospital may 39 provide any services otherwise required to be provided by a full-time, onsite dietician, pharmacist, laboratory technician, medical technologist 40 and radiological technologist on a part-time, off-site basis under written 41 agreements or arrangements with one or more providers or suppliers 42 recognized under medicare. The critical access hospital may provide 43

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inpatient services by a physician assistant, advanced practice registered
nurse or a clinical nurse specialist subject to the oversight of a physician
who need not be present in the facility. In addition to the facility's 25
acute beds or swing beds, or both, the critical access hospital may have a
psychiatric unit or a rehabilitation unit, or both. Each unit shall not
exceed 10 beds and neither unit shall count toward the 25-bed limit or be
subject to the average 96-hour length of stay restriction.

(2) Notwithstanding the provisions of paragraph (1), prior to June 8 30, 2021March 31, 2022, to the extent that a critical access hospital 9 determines it is necessary to treat COVID-19 patients or to separate 10 COVID-19 patients and non-COVID-19 patients, such critical access 11 hospital shall not be limited to 25 beds or, in the case of a facility with an 12 approved swing bed agreement, to a combined total of 25 extended care 13 and acute care beds, and shall not be limited to providing acute inpatient 14 care for a period of time that does not exceed, on an annual average 15 16 basis, 96 hours per patient.

17 (g) "Hospital" means a hospital other than a critical access 18 hospital that has entered into a written agreement with at least one 19 critical access hospital to form a rural health network and to provide 20 medical or administrative supporting services within the limit of the 21 hospital's capabilities.}

Sec. 3. 2. [7.]
K.S.A. 2020 Supp. [48-963, as amended by section
7 of 2021 Senate Bill No. 14, 48-964, 48-965, as amended by section 8 of
2021 Senate Bill No. 14, 60-5503,] 60-5504, as amended by section 10 of
2021 Senate Bill No. 14, and 60-5508 are is 60-5508 [and 65-468 are]
hereby repealed.

27 Sec. 4. 3. <u>{8.</u>] 9. This act shall take effect and be in force from and 28 after its publication in the Kansas register.