

AN ACT relating to the provision of healthcare services.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

➔Section 1. KRS 214.610 is amended to read as follows:

~~(1)(a) The Cabinet for Health and Family Services [or the licensing board or certifying entity, subject to the board's or entity's discretion,] shall approve appropriate educational courses on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome, that may address appropriate behavior and attitude change[, to be completed as specified in the respective chapters by each person licensed or certified under KRS Chapters 311, 311A, 312, 313, 314, 315, 320, 327, 333, and 335. Each licensing board or certifying entity shall have the authority to determine whether it shall approve courses or use courses approved by the cabinet. Completion of the courses shall be required at the time of initial licensure or certification in the Commonwealth, as required under KRS 214.615 and 214.620, and shall not be required under this section or any other section more frequently than one (1) time every ten (10) years thereafter, unless the licensing board or certifying entity specifically requires more frequent completion under administrative regulations promulgated in accordance with KRS Chapter 13A].~~

(2)(b) The Department for Public Health shall publish on its Web site the current informational resources for the development of the educational courses or programs. To the extent possible, the educational courses or programs under this subsection shall:

(a)(1) Include changes in Kentucky law affecting HIV testing and reporting; confidentiality and privacy of HIV-related data, information, and reports; and advances in treatment protocols, intervention protocols, coordination of services, and other information deemed important by the Department for Public Health and the Centers for Disease Control and Prevention (CDC);

~~(b)[2.]~~ Inform all professions involved with or affected by the birthing process about the importance of HIV testing of pregnant women and the probability of preventing perinatal transmission of HIV with appropriate treatment; and

~~(c)[3.]~~ Update all health care professionals ~~[identified under paragraph (a) of this subsection]~~ requesting information about the potential involvement of their occupation in the treatment or prevention of blood-borne pathogens with the latest CDC guidelines on occupational exposure to HIV and other blood-borne pathogens.

~~[(2) Each licensee or certificate holder shall submit confirmation on a form provided by the cabinet of having completed the course by July 1, 1991, except persons licensed under KRS Chapters 314 and 327 for whom the completion date shall be July 1, 1992.]~~

➔ Section 2. KRS 214.620 is amended to read as follows:

(1) ~~[The boards of the professions in KRS Chapter 311A and KRS 311.450, 311.571, 311.601, 312.085, 312.175, 313.030, 313.035, 313.040, 313.045, 314.041, 314.042, 314.051, 314.073, 315.050, 315.065, 320.250, 320.280, 327.050, 333.100, 333.190, 335.080, 335.090, 335.100, and 335.150, and the Cabinet for Health and Family Services shall begin planning for the implementation of those sections listed above which require, as a part of initial licensure or certification, applicants for certain specified professions to complete an educational course on the transmission, control, treatment, and prevention of human immunodeficiency virus and acquired immunodeficiency syndrome. The planning shall include collecting information from the facilities and programs which educate and train the licensed professionals affected by the licensure requirements of those sections listed above and shall also include developing administrative regulations for the implementation of the licensure requirements.]~~

~~(2)]The Cabinet for Health and Family Services shall develop[, if requested by a~~

~~licensing board or certifying entity,] instructional material on the human immunodeficiency virus, including information related to methods of transmission, education, and infection control. [The materials developed under this section shall be provided to persons licensed under KRS Chapters 317 and 317A. Costs of production and distribution of the instructional materials shall be wholly assumed from the fees assessed by the licensing boards which regulate the professionals who are provided with educational materials under this section.]~~To expeditiously and economically develop, produce, and distribute the instructional material required under this section, the Cabinet for Health and Family Services shall consult with the professional associations of professions to determine whether suitable instructional materials already exist that may be lawfully reproduced or reprinted.

~~[(3) The Cabinet for Human Resources shall require that, by July 1, 1992, all employees of health facilities defined in KRS 216B.015 shall have completed an educational course on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change except for those employees who shall have completed such a course as required for their professional licensure or upon evidence that the employee received such a course from another health facility where the employee was previously employed.]~~

~~(2)~~(4) Information on the human immunodeficiency virus infection shall be presented to any person who receives treatment at any hospital, however named, skilled-nursing facilities, primary-care centers, rural health clinics, outpatient clinics, ambulatory-care facilities, ambulatory surgical centers, and emergency-care centers licensed pursuant to KRS Chapter 216B. The information shall include but not be limited to methods of transmission and prevention and appropriate behavior and attitude change.

~~[(5) Notwithstanding any provision of law to the contrary, the licensing board or~~

~~certifying entity of any profession required to complete the course described in subsection (1) or (2) of this section shall have the discretion to develop and approve its own instructional course to be required for the profession under the jurisdiction of the respective licensing board or certifying entity.]~~

➔Section 3. KRS 311.450 is amended to read as follows:

- (1) Every license issued for the practice of podiatry shall expire on June 30 following the date of issuance unless sooner revoked and canceled.
- (2) On or before June 1 of each year, the board shall send notices to all licensed podiatrists in this state, at their last known addresses, advising them that the annual license renewal fee is due on July 1 of each year. Every registered podiatrist shall renew his license on or before July 1 of each year by the payment to the board of an annual license renewal fee which shall be a reasonable fee set by regulation of the board and upon submission of a statement of compliance with the continuing education regulations of the board. ~~[The regulations shall include a requirement to complete the course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently.]~~ If such renewal fee is not paid or such statement of compliance is not submitted on or before July 1, the board shall notify the delinquent licensee by mail at his last known address that such fee and statement are past due and that a delinquent penalty fee is assessed, in addition to the renewal fee and that the renewal fee and penalty must be paid and the statement of compliance submitted on or before January 1. If such fees, penalties and statement are not submitted by January 1, it shall be the duty of the board to suspend or revoke the license for nonpayment of the annual renewal and delinquent fees or for failure to submit the statement of compliance for the current year.
- (3) All fees collected under the provisions of KRS 311.380 to 311.510, or the rules and regulations adopted pursuant thereto, shall be paid into the State Treasury, and

credited to a trust and agency fund to be used in defraying the costs and expenses in the administration of KRS 311.380 to 311.510 including, but not limited to, salaries and necessary travel expenses. No part of this fund shall revert to the general funds of this Commonwealth.

➔Section 4. KRS 311.571 is amended to read as follows:

- (1) No applicant who is a graduate of a medical or osteopathic school located within the United States and its territories and protectorates or Canada shall be eligible for a regular license to practice medicine in the Commonwealth unless the applicant:
 - (a) Is able to understandably speak, read, and write the English language;
 - (b) Has graduated from an accredited college or university or has satisfactorily completed a collegiate course of study necessary for entry into an approved medical or osteopathic school or college;
 - (c) Has graduated from a prescribed course of instruction in a medical or osteopathic school or college situated in the United States or Canada and approved by the board;
 - (d) Has satisfactorily completed a prescribed course of postgraduate training of a duration to be established by the board in an administrative regulation promulgated in accordance with KRS Chapter 13A, after consultation with the University of Kentucky College of Medicine, the University of Louisville School of Medicine, and the Pikeville College School of Osteopathic Medicine;
 - (e) Has successfully completed an examination prescribed by the board; ***and***
 - (f) ~~[Has complied with the requirements of KRS 214.615(1); and~~
 - ~~(g)~~ Has fulfilled all other reasonable qualifications for regular licensure that the board may prescribe by regulation.
- (2) No applicant who is a graduate of a medical or osteopathic school located outside the United States or Canada shall be eligible for a regular license to practice

medicine in the Commonwealth unless the applicant:

- (a) Is able to understandably speak, read, and write the English language;
 - (b) Has successfully completed a course of study necessary for entry into an approved medical or osteopathic school or college;
 - (c) Has graduated from a prescribed course of instruction in a medical or osteopathic school or college situated outside the United States or Canada and approved by the board or is a citizen of the United States and has been awarded a diploma by an approved medical or osteopathic school located within the United States or Canada as part of a program designed to allow for the transfer of students to such schools from schools located outside the United States or Canada;
 - (d) Has successfully completed an examination prescribed by the board;
 - (e) Has been certified by the educational commission for foreign medical graduates or by an approved United States specialty board;
 - (f) Has satisfactorily completed a prescribed course of postgraduate training of a duration to be established by the board in an administrative regulation promulgated in accordance with KRS Chapter 13A, after consultation with the University of Kentucky College of Medicine, the University of Louisville School of Medicine, and the Pikeville College School of Osteopathic Medicine; *and*
 - (g) ~~Has complied with the requirements of KRS 214.615(1); and~~
 - ~~(h)~~ Has fulfilled all other reasonable qualifications for regular licensure that the board may prescribe by regulation.
- (3) No applicant shall be eligible for a limited license-institutional practice unless the applicant:
- (a) Has fulfilled all the requirements for regular licensure as delineated in subsection (1) of this section; or

(b) Has fulfilled the requirements for regular licensure as delineated in ~~paragraphs (a) through (e) and (h) of~~ subsection (2)(a) to (e) and (g) of this section and in addition has satisfactorily completed a prescribed course of postgraduate training of at least one (1) full year's duration approved by the board;

and

(c) ~~[Has complied with the requirements of KRS 214.615(1); and~~

~~(d)]~~ Has fulfilled all other reasonable qualifications for limited licensure that the board may prescribe by regulation.

(4) The board may grant an applicant a limited license-institutional practice for a renewable period of one (1) year if the applicant:

(a) Has fulfilled the requirements for regular licensure as delineated in ~~paragraphs (a), (b), (d), (e), and (h) of~~ subsection (2)(a), (b), (d), (e), and (g) of this section;

(b) Has fulfilled the requirements for a limited license-institutional practice as indicated in subsection (3)(c)~~[(d)]~~ of this section; and

(c) Has satisfactorily completed a prescribed course of postgraduate training of at least one (1) full year's duration approved by the board~~;~~ and

~~(d) [Has complied with the requirements of KRS 214.615(1)].~~

(5) The board may grant an applicant a fellowship training license for a renewable period of one (1) year if the applicant:

(a) Has been accepted for a fellowship approved by the administration of any of Kentucky's medical schools and conducted under the auspices of that medical school; or

(b) Has graduated from a medical school located outside the United States or Canada that has been approved by the board, and:

1. Has been certified by the appropriate licensing authority in his or her home country in the subject specialty of the fellowship; and
2. Is able to demonstrate that he or she is a physician of good character and

is in good standing in the country where he normally practices medicine.

- (6) (a) The board may grant an applicant a special faculty license for a renewable period of one (1) year if the applicant:
1. Holds or has been offered a full-time faculty appointment at an accredited Kentucky medical or osteopathic school approved by the board and is nominated for a special faculty license by the dean of the school of medicine or school of osteopathy;
 2. Possesses a current valid license to practice medicine or osteopathy issued by another state, country, or other jurisdiction;
 3. Is able to understandably speak, read, and write the English language;
 4. Is board certified in his or her specialty;
 5. Is not otherwise eligible for a regular license under this chapter; and
 6. Is not subject to denial of a license under any provision of this chapter.
- (b) The applicant shall submit the fee established by administrative regulation promulgated by the board for an initial license to practice medicine.
- (c) An applicant approved for a license under this subsection shall not engage in the practice of medicine or osteopathy outside an accredited medical school program or osteopathic school program and any affiliated institution or program for which the medical school or osteopathic school has assumed direct responsibility.
- (d) The board may grant a regular license to practice medicine or osteopathy to a person who has had a special faculty license for a period of at least five (5) consecutive years.
- (7) An applicant seeking regular licensure in the Commonwealth who was originally licensed in another state may obtain licensure in the Commonwealth without further testing and training if the applicant:
- (a) Has been endorsed in writing by the applicant's original licensing state as

- being licensed in good standing in that state; and
- (b) Would have satisfied all the requirements for regular licensure described in the preceding subsections had the applicant sought original licensure in this state.
- (8) No applicant shall be granted licensure in the Commonwealth unless the applicant has successfully completed an examination prescribed by the board in accordance with any rules that the board may establish by regulation concerning passing scores, testing opportunities and test score recognition.
- (9) Notwithstanding any of the requirements for licensure established by subsections (1) to (8) of this section and after providing the applicant or reregistrant with reasonable notice of its intended action and after providing a reasonable opportunity to be heard, the board may deny licensure to an applicant or the reregistrant of an inactive license without a prior evidentiary hearing upon a finding that the applicant or reregistrant has violated any provision of KRS 311.595 or 311.597 or is otherwise unfit to practice. Orders denying licensure may be appealed pursuant to KRS 311.593.
- (10) Notwithstanding any of the foregoing, the board may grant licensure to an applicant in extraordinary circumstances upon a finding by the board that based on the applicant's exceptional education, training, and practice credentials, the applicant's practice in the Commonwealth would be beneficial to the public welfare.
- (11) Notwithstanding any provision of this section, the board may exercise its discretion to grant a visiting professor license to an applicant after considering the following:
- (a) Whether the applicant meets the qualifications for a regular license;
- (b) Whether the applicant is licensed to practice medicine in other states or in other countries; and
- (c) The recommendation of the program director of an accredited medical school that confirms the applicant's employment as a visiting professor and that

includes, if necessary, written justification for a waiver of the requirements specified in subsections (1) and (2) of this section.

Orders denying applications for a visiting professor license shall not be appealed under KRS 311.593.

➔Section 5. KRS 311.601 is amended to read as follows:

- (1) The board may adopt reasonable rules and regulations to effectuate and implement the provisions of KRS 311.550 to 311.620, including but not limited to regulations designed to ensure~~insure~~ the continuing professional competency of present and future licensees. As an adjunct to the power conferred upon the board by this section, the board may require licensees to submit to interrogation as to the nature and extent of their postgraduate medical education and to require licensees found to be deficient in their efforts to keep abreast of new methods and technology, to obtain additional instruction and training therein.
- (2) ~~[Any continuing medical education requirement which the board may institute by regulation shall include the completion of a one (1) hour course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently. The provisions of this subsection shall expire on December 31, 2016.~~
- (3) ~~]~~As part of the continuing medical education which the board adopts to ensure continuing professional competency of present and future licensees, the board shall ensure that:
 - (a) Current practicing pediatricians, including those certified in medicine and pediatrics, radiologists, family practitioners, and those physicians practicing in an emergency medicine or urgent care setting, demonstrate completion of a one (1) time course of at least one (1) hour of continuing medical education approved by the board and covering the recognition and prevention of pediatric abusive head trauma, as defined in KRS 620.020, prior to December

31, 2017; and

- (b) Future practicing pediatricians, including those certified in medicine and pediatrics, radiologists, family practitioners, and those physicians who will practice in an emergency medicine or urgent care setting, demonstrate completion of a one (1) time course of at least one (1) hour of continuing medical education, or its equivalent, approved by the board and covering the recognition and prevention of pediatric abusive head trauma, as defined in KRS 620.020, within five (5) years of licensure.

➔Section 6. KRS 311.674 is amended to read as follows:

- (1) To be licensed by the board as an acupuncturist, an applicant shall:
 - (a) Submit an application approved by the board, with all sections completed, with the required fee;
 - (b) Be of good character and reputation;
 - (c) Have achieved a passing score on the acupuncture examination administered by the National Commission for Certification of Acupuncture and Oriental Medicine; and
 - (d) Have graduated from a course of training of at least one thousand eight hundred (1,800) hours, including three hundred (300) clinical hours, that is approved by the Accreditation Commission for Acupuncture and Oriental Medicine.

All provisions of this subsection, including graduation from an approved course of training as specified in paragraph (d) of this subsection, must be met by all applicants before initial licensure as an acupuncturist may be granted.

- (2) An acupuncturist who is legally authorized to practice acupuncture in another state and who is presently in good standing in that other state may be licensed by endorsement from the state of his or her credentialing if that state has standards substantially equivalent to those of this Commonwealth.

- (3) The board may request any reasonable information from the applicant and from collateral sources that is necessary for the board to make an informed decision. The applicant will execute any necessary waiver or release so that the board may obtain necessary information from collateral sources. An application will be considered completed when the applicant has fully answered all sections of the approved application and the board has received all necessary additional information from the applicant and collateral sources.
- (4) An acupuncturist's license shall be renewed every two (2) years upon fulfillment of the following requirements:
 - (a) The applicant has submitted a renewal application approved by the board within the time specified, with all sections completed, with the required fee;
and
 - (b) The applicant is of good character and reputation~~[-; and~~
 - ~~(c) The applicant has provided evidence of completion of the required continuing education during the previous period of licensure, including evidence of completion of a continuing education course on the human immunodeficiency virus and acquired immunodeficiency syndrome in the previous ten (10) years that meets the requirements of KRS 214.610].~~
- (5) The board shall notify each applicant in writing of the action it takes on an application within one hundred twenty (120) days following the board's receipt of a completed application.
- (6) Notwithstanding any of the requirements for licensure established in this section, and after providing the applicant with reasonable notice of its intended action and after providing a reasonable opportunity to be heard, the board may deny licensure to an applicant without a prior evidentiary hearing upon a finding that the applicant has violated any provision of this section or is otherwise unfit to practice. If the board denies an application, it shall notify the applicant of the grounds on which the

denial is based. Orders denying a license may be appealed pursuant to KRS 311.593.

➔Section 7. KRS 311.844 is amended to read as follows:

- (1) To be licensed by the board as a physician assistant, an applicant shall:
 - (a) Submit a completed application form with the required fee;
 - (b) Be of good character and reputation;
 - (c) Be a graduate of an approved program; and
 - (d) Have passed an examination approved by the board within three (3) attempts.
- (2) A physician assistant who is authorized to practice in another state and who is in good standing may apply for licensure by endorsement from the state of his or her credentialing if that state has standards substantially equivalent to those of this Commonwealth.
- (3) A physician assistant's license shall be renewed upon fulfillment of the following requirements:
 - (a) The holder shall be of good character and reputation;
 - (b) The holder shall provide evidence of completion during the previous two (2) years of a minimum of one hundred (100) hours of continuing education approved by the American Medical Association, the American Osteopathic Association, the American Academy of Family Physicians, the American Academy of Physician Assistants, or by another entity approved by the board;
 - (c) The holder shall provide evidence of completion of a continuing education course on the human immunodeficiency virus and acquired immunodeficiency syndrome~~[in the previous ten (10) years that meets the requirements of KRS 214.610];~~
 - (d) As a part of the continuing education requirements that the board adopts to ensure continuing competency of present and future licensees the board shall ensure that physician's assistants shall demonstrate completion of a one-time

training course of one and one-half (1.5) hours of training covering the prevention and recognition of pediatric abusive head trauma, as defined in KRS 620.020. The one and one-half (1.5) hours of continuing education required under this section shall be included in the current number of required continuing education hours~~[- Current practicing physician's assistants shall demonstrate completion of this course by December 31, 2013];~~ and

- (e) The holder shall provide proof of current certification with the National Commission on Certification of Physician Assistants.

➔Section 8. KRS 311.901 is amended to read as follows:

- (1) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A relating to the licensure and regulation of athletic trainers. The regulations shall include but shall not be limited to the establishment of fees and continuing education requirements. The board shall require, as a part of any continuing educational requirement, that persons licensed as athletic trainers complete an educational course on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome. The course on the human immunodeficiency virus shall be approved by the Cabinet for Health and Family Services~~[- and shall be given in accordance with KRS 214.610].~~
- (2) There is hereby created the Kentucky Athletic Trainers Advisory Council, composed of nine (9) members appointed by the Governor. The council shall review and make recommendations to the board regarding all matters relating to athletic trainers that come before the board, including but not limited to:
- (a) Applications for athletic training licensure;
 - (b) Licensure renewal requirements;
 - (c) Approval of supervising physicians;
 - (d) Disciplinary investigations or action, when specifically requested by one (1) of

- the board's panels established under KRS 311.591; and
- (e) Promulgation of administrative regulations.
- (3) Except for initial appointments, members of the council shall be appointed by the board for four (4) year terms and shall consist of:
- (a) Five (5) practicing licensed athletic trainers who shall each be selected by the board from a list of three (3) licensed athletic trainers submitted by the Kentucky Athletic Trainers Society, Inc. for each vacancy;
 - (b) Two (2) supervising physicians;
 - (c) One (1) member of the board; and
 - (d) One (1) citizen at large.
- (4) The chair of the council shall be elected by a majority vote of the council members and shall preside over meetings. The meetings shall be held quarterly. Additional meetings may be held on the call of the chair or upon the written request of four (4) council members.
- (5) Initial appointments shall be for staggered terms. Three (3) members shall serve a four (4) year term, two (2) members shall serve a three (3) year term, two (2) members shall serve a two (2) year term, and two (2) members shall serve a one (1) year term.
- (6) Members of the council shall not be compensated for their service but shall receive reimbursement for expenditures relating to attendance at committee meetings, consistent with state policies for the reimbursement of travel expenses for state employees.
- (7) A council member may be removed by the board for good cause or if he or she misses two (2) consecutive council meetings without good cause.
- (8) Upon the death, resignation, or removal of any member, the vacancy for the unexpired term shall be filled by the board in the same manner as the original appointment.

- (9) The quorum required for any meeting of the council shall be five (5) members. No action by the council or its members shall have any effect unless a quorum of the council is present at the meeting where the action is taken.
- (10) The board shall not be required to implement or adopt the recommendations of the council.

➔Section 9. KRS 311A.115 is amended to read as follows:

The Kentucky Board of Emergency Medical Services shall, by regulation, require an applicant for licensure as a paramedic to have completed a board or Cabinet for Health and Family Services-approved educational course on the transmission, control, treatment and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change. ~~[The board shall require continuing education that updates this training at least one (1) time every ten (10) years that is consistent with and as required for other health care providers under KRS 214.610.]~~

➔Section 10. KRS 311A.120 is amended to read as follows:

- (1) As a condition of being issued a certificate or license as an emergency medical technician or first responder, the applicant shall have completed a Kentucky Board of Emergency Medical Services approved educational course on the transmission, control, treatment, and prevention of the human immunodeficiency virus and acquired immunodeficiency syndrome with an emphasis on appropriate behavior and attitude change. ~~[The board shall require continuing education that updates this training at least one (1) time every ten (10) years that is consistent with and as required for other health care providers under KRS 214.610.]~~
- (2) The board shall require continuing education for emergency medical technicians or first responders that includes the completion of one and one-half (1.5) hours of board approved continuing education covering the recognition and prevention of pediatric abusive head trauma, as defined in KRS 620.020, at least one (1) time

every five (5) years. The one and one-half (1.5) hours required under this section shall be included in the current number of required continuing education hours.

➔Section 11. KRS 312.085 is amended to read as follows:

- (1) Any persons desiring to practice chiropractic in this state shall make application to the board, in the form and manner established by the board by the promulgation of administrative regulations. Each applicant shall have satisfactorily completed not less than sixty (60) semester credit hours of study from a college or university accredited by the Southern Association of Colleges and Schools or other regional accrediting agencies as recognized by the United States Department of Education and the Council on Higher Education Accreditation, be a graduate of a college or university accredited by the Council on Chiropractic Education or their successors, and which maintains a standard and reputability approved by the board~~, and meet the requirements of KRS 214.610 and KRS 214.615].~~
- (2) The board may by administrative regulation require a two-year pre-chiropractic course of instruction to be completed prior to entry into chiropractic college. The board may by administrative regulation establish a preceptorship program where students or graduates of accredited chiropractic colleges as stated in this section may work with and under the direction and supervision of a licensed doctor of chiropractic prior to the taking of the appropriate licensing examination.
- (3) Applications shall be signed in applicant's own handwriting, and shall be sworn to and before an officer authorized to administer oaths, and shall recite the history of the applicant as to his educational experience, his length of study of chiropractic, what collateral branches he has studied, the length of time he has been engaged in clinical practice, accompanying same with a diploma, or diplomas awarded to applicant by a college or colleges in which such studies were pursued. Certificates of attendance from the college or colleges from which he is a graduate, stating dates of matriculation, graduation, and number of months and hours in attendance shall

accompany the application, with satisfactory evidence of good character and reputation. No license shall be issued to any person convicted of a felony unless he has been pardoned and approved by the board.

➔Section 12. KRS 312.175 is amended to read as follows:

- (1) Each person licensed to practice chiropractic in this state shall, on or before the first day of March, annually renew his license and pay a renewal fee of not more than one hundred dollars (\$100) for each inactive licensee and not more than five hundred dollars (\$500) for each active licensee each year to the board. In addition to the payment of the renewal fee, the active licensee applying for a license renewal shall furnish to the board satisfactory evidence that he has attended an educational program in the year preceding each application for renewal. Satisfactory evidence of attendance of postgraduate study at an institution approved by the board shall be considered equivalent. ~~[Any education shall include completion of the course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently.]~~ Provided, however, that licenses may be renewed by the board, at its discretion, and the applicant may be excused from paying the renewal fee or attending the annual educational program, or both, in instances where the applicant submits an affidavit to the board evidencing that he, for good cause assigned, suffered a hardship which prevented the applicant from renewing the license or attending the educational program at the proper time.
- (2) The board shall send a written notice to every person holding a valid license to practice chiropractic within this state at least forty-five (45) days prior to the first day of March in each year, directed to the last known address of the licensee, and shall enclose with the notice proper blank forms for application for annual license renewal. The board shall, within forty-five (45) days, notify every person failing to renew his license after it is due that he is delinquent and is subject to a late penalty

of three hundred dollars (\$300). If the licensee fails to renew his license within forty-five (45) days after the mailing of the delinquent notice then his license shall be revoked for nonrenewal. Any licensee whose license has been revoked for failure to renew his license may have his license restored upon the payment of a restoration fee not to exceed five hundred dollars (\$500) for each delinquent year or any part thereof in addition to the renewal fee of not more than five hundred dollars (\$500) and upon presentation of satisfactory evidence of postgraduate study of a standard approved by the state board or upon a showing that he is an exception as provided for in subsection (1) of this section.

- (3) Any licensee whose license has been revoked for less ~~than~~than ~~that~~ four (4) years, may not apply for a license pursuant to KRS 312.085. The licensee may only apply for restoration pursuant to subsection (2) of this section.
- (4) Any licensee whose license has been revoked for more than four (4) years may apply for a license by examination, as long as the licensee pays a restoration fee not to exceed five hundred dollars (\$500) for each delinquent year, or any part thereof, in addition to the renewal fee of not less than five hundred dollars (\$500) and not more than three thousand dollars (\$3,000).

➔Section 13. KRS 314.041 is amended to read as follows:

- (1) An applicant for a license to practice as a registered nurse shall file with the board a written application for a license and submit evidence, verified by oath, that the applicant:
- (a) Has completed the basic curriculum for preparing registered nurses in an approved school of nursing and has completed requirements for graduation therefrom;
 - (b) ~~[Has fulfilled the requirements of KRS 214.615(1);~~
 - (c) ~~—~~Is able to understandably speak and write the English language and to read the English language with comprehension; and

- ~~(c)~~~~(d)~~ Has passed the jurisprudence examination approved by the board as provided by subsection (4) of this section.
- (2) An applicant shall be required to pass a licensure examination in any subjects as the board may determine. Application for licensure by examination shall be received by the board at the time determined by the board by administrative regulation.
 - (3) Upon request, an applicant who meets the requirements of subsection (1) of this section shall be issued a provisional license that shall expire no later than six (6) months from the date of issuance.
 - (4) The jurisprudence examination shall be prescribed by the board and be conducted on the licensing requirements under this chapter and board regulations and requirements applicable to the nursing profession in this Commonwealth. The board shall promulgate an administrative regulation in accordance with KRS Chapter 13A establishing the provisions to meet this requirement.
 - (5) An individual who holds a provisional license shall have the right to use the title "registered nurse applicant" and the abbreviation "R.N.A." An R.N.A. shall only work under the direct supervision of a registered nurse and shall not engage in independent nursing practice.
 - (6) Upon the applicant's successful completion of all requirements for registered nurse licensure, the board may issue to the applicant a license to practice nursing as a registered nurse, if in the determination of the board the applicant is qualified to practice as a registered nurse in this state.
 - (7) The board may issue a license to practice nursing as a registered nurse to any applicant who has passed the licensure examination and the jurisprudence examination prescribed by the board or their equivalent and been licensed as a registered nurse under the laws of another state, territory, or foreign country, if in the opinion of the board the applicant is qualified to practice as a registered nurse in this state.

- (8) The applicant for licensure to practice as a registered nurse shall pay a licensure application fee, and licensure examination fees if applicable, as set forth in a regulation by the board promulgated pursuant to the provisions of KRS Chapter 13A.
- (9) Any person who holds a license to practice as a registered nurse in this state shall have the right to use the title "registered nurse" and the abbreviation "R.N." No other person shall assume the title or use the abbreviation or any other words, letters, signs, or figures to indicate that the person using the same is a registered nurse. No person shall practice as a registered nurse unless licensed under this section.
- (10) (a) On November 1, 2006, and thereafter, a registered nurse who is retired, upon payment of a one-time fee, may apply for a special license in recognition of the nurse's retired status. A retired nurse may not practice nursing but may use the title "registered nurse" and the abbreviation "R.N."
- (b) A retired registered nurse who wishes to return to the practice of nursing shall apply for reinstatement.
- (c) The board shall promulgate an administrative regulation pursuant to KRS Chapter 13A to specify the fee required in paragraph (a) of this subsection and reinstatement under paragraph (b) of this subsection.
- (11) Any person heretofore licensed as a registered nurse under the licensing laws of this state who has allowed the license to lapse by failure to renew may apply for reinstatement of the license under the provisions of this chapter. A person whose license has lapsed for one (1) year or more shall pass the jurisprudence examination approved by the board as provided in subsection (4) of this section.
- (12) A license to practice registered nursing may be limited by the board in accordance with regulations promulgated by the board and as defined in this chapter.
- (13) A graduate of an approved prelicensure registered nurse program who has not

successfully completed the licensure examination for registered nurses shall be eligible for admission to the licensure examination for licensed practical nurses following successful completion of a board-approved practical nursing role delineation course. This course shall include content on the roles and responsibilities of a licensed practical nurse and direct supervised clinical instruction.

- (14) A person who has completed a prelicensure registered nurse program and holds a current, active licensed practical nurse license from another jurisdiction may apply for licensure by endorsement as a licensed practical nurse in this state.

➔Section 14. KRS 314.042 is amended to read as follows:

- (1) An applicant for licensure to practice as an advanced practice registered nurse shall file with the board a written application for licensure and submit evidence, verified by oath, that the applicant has completed an approved organized postbasic program of study and clinical experience; ~~has fulfilled the requirements of KRS 214.615(1);~~ is certified by a nationally established organization or agency recognized by the board to certify registered nurses for advanced practice registered nursing; and is able to understandably speak and write the English language and to read the English language with comprehension.
- (2) The board may issue a license to practice advanced practice registered nursing to an applicant who holds a current active registered nurse license issued by the board or holds the privilege to practice as a registered nurse in this state and meets the qualifications of subsection (1) of this section. An advanced practice registered nurse shall be:
- (a) Designated by the board as a certified nurse anesthetist, certified nurse midwife, certified nurse practitioner, or clinical nurse specialist; and
 - (b) Certified in at least one (1) population focus.
- (3) The applicant for licensure or renewal thereof to practice as an advanced practice

registered nurse shall pay a fee to the board as set forth in regulation by the board.

- (4) An advanced practice registered nurse shall maintain a current active registered nurse license issued by the board or hold the privilege to practice as a registered nurse in this state and maintain current certification by the appropriate national organization or agency recognized by the board.
- (5) Any person who holds a license to practice as an advanced practice registered nurse in this state shall have the right to use the title "advanced practice registered nurse" and the abbreviation "APRN." No other person shall assume the title or use the abbreviation or any other words, letters, signs, or figures to indicate that the person using the same is an advanced practice registered nurse. No person shall practice as an advanced practice registered nurse unless licensed under this section.
- (6) Any person heretofore licensed as an advanced practice registered nurse under the provisions of this chapter who has allowed the license to lapse may be reinstated on payment of the current fee and by meeting the provisions of this chapter and regulations promulgated by the board pursuant to the provisions of KRS Chapter 13A.
- (7) The board may authorize a person to practice as an advanced practice registered nurse temporarily and pursuant to applicable regulations promulgated by the board pursuant to the provisions of KRS Chapter 13A if the person is awaiting the results of the national certifying examination for the first time or is awaiting licensure by endorsement. A person awaiting the results of the national certifying examination shall use the title "APRN Applicant" or "APRN App."
- (8) (a) Except as authorized by KRS 314.196 and subsection (9) of this section, before an advanced practice registered nurse engages in the prescribing or dispensing of nonscheduled legend drugs as authorized by KRS 314.011(8), the advanced practice registered nurse shall enter into a written "Collaborative Agreement for the Advanced Practice Registered Nurse's Prescriptive

- Authority for Nonscheduled Legend Drugs" (CAPA-NS) with a physician that defines the scope of the prescriptive authority for nonscheduled legend drugs.
- (b) The advanced practice registered nurse shall notify the Kentucky Board of Nursing of the existence of the CAPA-NS and the name of the collaborating physician and shall, upon request, furnish to the board or its staff a copy of the completed CAPA-NS. The Kentucky Board of Nursing shall notify the Kentucky Board of Medical Licensure that a CAPA-NS exists and furnish the collaborating physician's name.
 - (c) The CAPA-NS shall be in writing and signed by both the advanced practice registered nurse and the collaborating physician. A copy of the completed collaborative agreement shall be available at each site where the advanced practice registered nurse is providing patient care.
 - (d) The CAPA-NS shall describe the arrangement for collaboration and communication between the advanced practice registered nurse and the collaborating physician regarding the prescribing of nonscheduled legend drugs by the advanced practice registered nurse.
 - (e) The advanced practice registered nurse who is prescribing nonscheduled legend drugs and the collaborating physician shall be qualified in the same or a similar specialty.
 - (f) The CAPA-NS is not intended to be a substitute for the exercise of professional judgment by the advanced practice registered nurse or by the collaborating physician.
 - (g) The CAPA-NS shall be reviewed and signed by both the advanced practice registered nurse and the collaborating physician and may be rescinded by either party upon written notice via registered mail to the other party, the Kentucky Board of Nursing, and the Kentucky Board of Medical Licensure.
- (9) (a) Before an advanced practice registered nurse may discontinue or be exempt

from a CAPA-NS required under subsection (8) of this section, the advanced practice registered nurse shall have completed four (4) years of prescribing as a nurse practitioner, clinical nurse specialist, nurse midwife, or as a nurse anesthetist. For nurse practitioners and clinical nurse specialists, the four (4) years of prescribing shall be in a population focus of adult-gerontology, pediatrics, neonatology, family, women's health, acute care, or psychiatric-mental health.

- (b) After four (4) years of prescribing with a CAPA-NS in collaboration with a physician:
 - 1. An advanced practice registered nurse whose license is in good standing at that time with the Kentucky Board of Nursing and who will be prescribing nonscheduled legend drugs without a CAPA-NS shall notify that board that the four (4) year requirement has been met and that he or she will be prescribing nonscheduled legend drugs without a CAPA-NS;
 - 2. The advanced practice registered nurse will no longer be required to maintain a CAPA-NS and shall not be compelled to maintain a CAPA-NS as a condition to prescribe after the four (4) years have expired, but an advanced practice registered nurse may choose to maintain a CAPA-NS indefinitely after the four (4) years have expired; and
 - 3. If the advanced practice registered nurse's license is not in good standing, the CAPA-NS requirement shall not be removed until the license is restored to good standing.
- (c) An advanced practice registered nurse wishing to practice in Kentucky through licensure by endorsement is exempt from the CAPA-NS requirement if the advanced practice registered nurse:
 - 1. Has met the prescribing requirements in a state that grants independent prescribing to advanced practice registered nurses; and

2. Has been prescribing for at least four (4) years.
- (d) An advanced practice registered nurse wishing to practice in Kentucky through licensure by endorsement who had a collaborative prescribing agreement with a physician in another state for at least four (4) years is exempt from the CAPA-NS requirement.
- (e) After July 15, 2014:
1. An advanced practice registered nurse whose license is in good standing at that time with the Kentucky Board of Nursing and who will be prescribing nonscheduled legend drugs without a CAPA-NS shall notify that board that the four (4) year requirement has been met and that he or she will be prescribing nonscheduled legend drugs without a CAPA-NS;
 2. An advanced practice registered nurse who has maintained a CAPA-NS for four (4) years or more will no longer be required to maintain a CAPA-NS and shall not be compelled to maintain a CAPA-NS as a condition to prescribe after the four (4) years have expired, but an advanced practice registered nurse may choose to maintain a CAPA-NS indefinitely after the four (4) years have expired; and
 3. An advanced practice registered nurse who has maintained a CAPA-NS for less than four (4) years shall be required to continue to maintain a CAPA-NS until the four (4) year period is completed, after which the CAPA-NS will no longer be required.
- (10) (a) Before an advanced practice registered nurse engages in the prescribing of Schedules II through V controlled substances as authorized by KRS 314.011(8), the advanced practice registered nurse shall enter into a written "Collaborative Agreement for the Advanced Practice Registered Nurse's Prescriptive Authority for Controlled Substances" (CAPA-CS) with a physician that defines the scope of the prescriptive authority for controlled

substances.

- (b) The advanced practice registered nurse shall notify the Kentucky Board of Nursing of the existence of the CAPA-CS and the name of the collaborating physician and shall, upon request, furnish to the board or its staff a copy of the completed CAPA-CS. The Kentucky Board of Nursing shall notify the Kentucky Board of Medical Licensure that a CAPA-CS exists and furnish the collaborating physician's name.
- (c) The CAPA-CS shall be in writing and signed by both the advanced practice registered nurse and the collaborating physician. A copy of the completed collaborative agreement shall be available at each site where the advanced practice registered nurse is providing patient care.
- (d) The CAPA-CS shall describe the arrangement for collaboration and communication between the advanced practice registered nurse and the collaborating physician regarding the prescribing of controlled substances by the advanced practice registered nurse.
- (e) The advanced practice registered nurse who is prescribing controlled substances and the collaborating physician shall be qualified in the same or a similar specialty.
- (f) The CAPA-CS is not intended to be a substitute for the exercise of professional judgment by the advanced practice registered nurse or by the collaborating physician.
- (g) Before engaging in the prescribing of controlled substances, the advanced practice registered nurse shall:
 - 1. Have been licensed to practice as an advanced practice registered nurse for one (1) year with the Kentucky Board of Nursing; or
 - 2. Be nationally certified as an advanced practice registered nurse and be registered, certified, or licensed in good standing as an advanced

practice registered nurse in another state for one (1) year prior to applying for licensure by endorsement in Kentucky.

- (h) Prior to prescribing controlled substances, the advanced practice registered nurse shall obtain a Controlled Substance Registration Certificate through the U.S. Drug Enforcement Agency.
 - (i) The CAPA-CS shall be reviewed and signed by both the advanced practice registered nurse and the collaborating physician and may be rescinded by either party upon written notice via registered mail to the other party, the Kentucky Board of Nursing, and the Kentucky Board of Medical Licensure.
 - (j) The CAPA-CS shall state the limits on controlled substances which may be prescribed by the advanced practice registered nurse, as agreed to by the advanced practice registered nurse and the collaborating physician. The limits so imposed may be more stringent than either the schedule limits on controlled substances established in KRS 314.011(8) or the limits imposed in regulations promulgated by the Kentucky Board of Nursing thereunder.
- (11) Nothing in this chapter shall be construed as requiring an advanced practice registered nurse designated by the board as a certified nurse anesthetist to enter into a collaborative agreement with a physician, pursuant to this chapter or any other provision of law, in order to deliver anesthesia care.

➔Section 15. KRS 314.051 is amended to read as follows:

- (1) An applicant for a license to practice as a licensed practical nurse shall file with the board a written application for a license verified by oath, that the applicant:
 - (a) ~~Has fulfilled the requirements of KRS 214.615(1);~~
 - ~~(b)~~ Has completed the required educational program in practical nursing at an approved school of nursing and has completed requirements for graduation therefrom;
 - ~~(b)(c)~~ Is able to understandably speak and write the English language and to

read the English language with comprehension; and

~~(c)~~~~(d)~~ Has passed the jurisprudence examination approved by the board as provided by subsection (4) of this section.

- (2) The applicant for licensure to practice as a licensed practical nurse shall pay a licensure application fee, and licensure examination fees if applicable, as set forth in a regulation by the board.
- (3) An applicant shall be required to pass a licensure examination in any subjects the board may determine. Application for licensure by examination shall be received by the board at the time determined by the board by administrative regulation.
- (4) The jurisprudence examination shall be prescribed by the board and be conducted on the licensing requirements under this chapter and board regulations and requirements applicable to the nursing profession in this Commonwealth. The board shall promulgate an administrative regulation in accordance with KRS Chapter 13A establishing the provisions to meet this requirement.
- (5) Upon request, an applicant who meets the requirements of subsection (1) of this section shall be issued a provisional license that shall expire no later than six (6) months from the date of issuance.
- (6) An individual who holds a provisional license shall have the right to use the title "licensed practical nurse applicant" and the abbreviation "L.P.N.A." An L.P.N.A. shall only work under the direct supervision of a nurse and shall not engage in independent nursing practice.
- (7) Upon the applicant's successful completion of all requirements for licensed practical nurse licensure, the board may issue to the applicant a license to practice as a licensed practical nurse if, in the determination of the board, the applicant is qualified to practice as a licensed practical nurse in this state.
- (8) The board may issue a license to practice as a licensed practical nurse to any applicant who has passed the licensure examination and the jurisprudence

examination prescribed by the board or their equivalent, and has been licensed or registered as a licensed practical nurse or a person licensed to perform similar services under a different title, under the laws of another state, territory or foreign country if, in the opinion of the board, the applicant meets the requirements for a licensed practical nurse in this state.

- (9) Any person who holds a license to practice as a licensed practical nurse in this state shall have the right to use the title "licensed practical nurse" and the abbreviation "L.P.N." No other person shall assume the title or use the abbreviation or any other words, letters, signs, or figures to indicate that the person using the same is a licensed practical nurse. No person shall practice as a licensed practical nurse unless licensed under this chapter.
- (10) (a) Beginning November 1, 2005, for a licensed practical nurse who is retired, upon payment of a one-time fee, the board may issue a special license to a licensed practical nurse in recognition of the nurse's retired status. A retired nurse may not practice nursing but may use the title "licensed practical nurse" and the abbreviation "L.P.N."
- (b) A retired licensed practical nurse who wishes to return to the practice of nursing shall apply for reinstatement.
- (c) The board shall promulgate an administrative regulation pursuant to KRS Chapter 13A to specify the fee required in paragraph (a) of this subsection and reinstatement under paragraph (b) of this subsection.
- (11) Any person heretofore licensed as a practical nurse under the licensing laws of this state who has allowed the license to lapse by failure to renew may apply for reinstatement of the license under the provisions of this chapter. A person whose license has lapsed for one (1) year or more shall pass the jurisprudence examination approved by the board as provided in subsection (4) of this section.
- (12) A license to practice practical nursing may be limited by the board in accordance

with regulations promulgated by the board and as defined in this chapter.

➔Section 16. KRS 314.073 is amended to read as follows:

- (1) As a prerequisite for license renewal, all individuals licensed under provisions of this chapter shall be required to document continuing competency during the immediate past licensure period as prescribed in regulations promulgated by the board.
- (2) The continuing competency requirement shall be documented and reported as set forth by the board in administrative regulations promulgated in accordance with KRS Chapter 13A.
- (3) The board shall approve providers of continuing education. The approval may include recognition of providers approved by national organizations and state boards of nursing with comparable standards. Standards for these approvals shall be set by the board in administrative regulations promulgated in accordance with the provisions of KRS Chapter 13A.
- (4) The board shall work cooperatively with professional nursing organizations, approved nursing schools, and other potential sources of continuing education programs to ensure~~assure~~ that adequate continuing education offerings are available statewide. The board may enter into contractual agreements to implement the provisions of this section.
- (5) The board shall be responsible for notifying applicants for licensure and licensees applying for license renewal, of continuing competency requirements.
- (6) ~~{The continuing competency requirements shall include the completion of the course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently.~~
- (7) ~~]~~As a part of the continuing education requirements that the board adopts to ensure continuing competency of present and future licensees, the board shall ensure practitioners licensed under KRS Chapter 314 complete a one-time training course

of at least one and one-half (1.5) hours covering the recognition and prevention of pediatric abusive head trauma, as defined in KRS 620.020. The one and one-half (1.5) hours required under this section shall be included in the current number of required continuing education hours. Current practicing nurses shall demonstrate completion of this course by December 31, 2013.

~~(7)~~~~(8)~~ In order to offset administrative costs incurred in the implementation of the mandatory continuing competency requirements, the board may charge reasonable fees as established by regulation in accordance with the provisions of KRS Chapter 13A.

~~(8)~~~~(9)~~ The continuing competency requirements shall include at least five (5) contact hours in pharmacology continuing education for any person registered as an advanced practice registered nurse.

➔Section 17. KRS 315.050 is amended to read as follows:

- (1) Every applicant for licensure as a pharmacist shall be not less than eighteen (18) years of age, of good mental health and moral character, a graduate of a school or college of pharmacy program approved by the board, ~~shall have fulfilled the requirements of KRS 214.615(1),~~ and shall file proof satisfactory to the board, substantiated by proper affidavits, of completion of an approved internship.
- (2) After the applicant has passed a satisfactory examination conducted before the board under regulations prescribed by the board, he shall be entitled to a license as a pharmacist.
- (3) The examination for licensure shall be given by the board at least two (2) times during each year. The examination shall be prepared to measure the competency of the applicant to engage in the practice of pharmacy. The board may employ and cooperate with any organization or consultant in the preparation and grading of an appropriate examination, but shall retain the sole discretion and responsibility of determining which applicants have successfully passed such an examination.

- (4) The board shall by regulation establish standards for pharmacist intern certification and an approved internship program and shall determine appropriate qualifications for pharmacists supervising approved internship programs.
- (5) The board shall issue certificates of internship which shall be valid for six (6) years from date of issuance. The fee for a certificate shall be set by administrative regulation of the board, not to exceed fifty dollars (\$50).

➔Section 18. KRS 315.065 is amended to read as follows:

- (1) Because of the continuous introduction of new therapeutic and diagnostic agents and changing concepts in the practice of pharmacy, it is essential that a pharmacist undertake a program of continuing education to maintain his professional competency to practice in the public interest.
- (2) No pharmacist's license shall be renewed until the license holder is able to submit written proof to the board that he has satisfactorily completed, in the previous renewal period, a continuing education program acceptable to the board. Such continuing education requirements shall be determined by regulation of the board, ~~and shall include, at least one (1) time every ten (10) years, the course described in KRS 214.610(1),~~ but they shall not require more than an average of one and one-half (1-1/2) continuing education units (CEU) per year. ~~The board may in its discretion require completion of the course described in KRS 214.610(1) more frequently.~~
- (3) The board shall adopt rules and regulations to carry out the provisions of this section, to include guidelines and criteria for reviewing and approving continuing education programs.

➔Section 19. KRS 320.250 is amended to read as follows:

- (1) Licenses to engage in the practice of optometry shall be issued only to those who qualify under the provisions of KRS 320.260 or 320.270, or who successfully pass examinations conducted or approved by the board at a time and place fixed by the

board. ~~[Each applicant shall comply with the provisions of KRS 214.615(1).]~~ Each license certificate shall be signed by the president and secretary-treasurer and authenticated by the seal of the board.

- (2) The examinations may consist of written, clinical, or practical examinations and shall relate to the skills needed for the practice of optometry in this Commonwealth at the time of the examination and shall seek to determine the applicant's preparedness to exercise these skills. The examining board may:
 - (a) Prepare, administer, and grade the examination;
 - (b) Accept the scores of the applicant from an examination prepared, administered, and graded by the National Board of Examiners in Optometry or any other organization approved by the board as qualified to administer the examination; and
 - (c) Require passage of an examination on Kentucky optometric law.
- (3) Any person seeking a license to practice optometry under the provisions of this section shall submit an application to the board on forms furnished by the board. The applicant shall show proof of the following:
 - (a) The applicant is not less than eighteen (18) years of age and is of good moral character;
 - (b) The applicant is a graduate of a school or college of optometry that is accredited by a regional or professional accreditation organization that is recognized or approved by the council on postsecondary accreditation, or by the United States Department of Education, and is in good standing, as approved by the board. All applicants shall have transcript credit of at least six (6) semester hours in a course or courses from a school or college as described in this subsection in general and ocular pharmacology with particular emphasis on diagnostic pharmaceutical agents applied topically to the eye and six (6) semester hours in ocular pathology and therapy with emphasis on

utilization of therapeutic pharmaceutical agents. All hours shall be from a school or college as described in this subsection;

- (c) All other information requested by the board as is set out on the application.
- (4) The nonrefundable fee for each license application shall not exceed six hundred dollars (\$600).
- (5) No application shall be considered by the board after one (1) year from the date in which the board received the application has lapsed. After the lapse of the one (1) year period, an applicant shall submit a new application and another nonrefundable fee for further consideration by the board.

➔Section 20. KRS 320.280 is amended to read as follows:

- (1) All optometrists desiring to continue practice shall annually, prior to March 1, secure from the secretary-treasurer of the board a renewal certificate upon the payment of a fee of not more than two hundred dollars (\$200). Not later than February 15 of each year the board shall notify by mail all optometrists of the renewal date and fee. Application for a renewal shall be upon a form prescribed by the board and the optometrist shall furnish the information required by the form.
- (2) As a prerequisite for license renewal, all optometrists now or hereafter licensed in the Commonwealth of Kentucky are and shall be required to take annual courses of study in subjects relating to the practice of optometry to the end that the utilization and application of new techniques, scientific and clinical advances, and the achievement of research will assure expansive and comprehensive care to the public. ~~{The annual courses of study shall include the course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently.}~~The length and content of study shall be prescribed by the board but shall not exceed eight (8) hours in any calendar year, with the exception of those optometrists who are authorized to prescribe therapeutic agents who shall be required to have additional credit hours of

continuing education in ocular therapy and pharmacology, the amount of required credit hours to be determined by the board, but not to exceed an additional seventeen (17) credit hours, for a total not to exceed twenty-five (25) credit hours per year. Attendance shall be at a course or by a sponsor approved by the board. Attendance at any course or courses of study is to be certified to the board upon a form provided by the board and shall be submitted by each licensed optometrist at the time he makes application to the board for the renewal of his license and payment of his renewal fee. The board may waive the continuing education requirement in cases of illness or undue hardship.

- (3) Failure of any optometrist to secure his renewal certificate within sixty (60) days after March 1, shall constitute sufficient cause for the board to revoke his license.

➔Section 21. KRS 327.050 is amended to read as follows:

- (1) Before applying for licensure by the board as a physical therapist, a person shall have successfully completed an accredited program in physical therapy approved by the board ~~and shall have fulfilled the requirements of KRS 214.615(1)~~. No school shall be approved by the board unless it has been approved for the educational preparation of physical therapists by the recognized national accrediting agency for physical therapy educational programs.
- (2) Any person who possesses the qualifications required by this chapter and who desires to apply for licensure as a physical therapist in Kentucky shall make written application to the board, on forms to be provided by the board. The application shall be accompanied by a nonrefundable application fee in an amount to be determined by the board, but not to exceed two hundred fifty dollars (\$250).
- (3) If it appears from the application that the applicant possesses the qualifications required by this chapter and has not yet successfully completed the board-approved examination, the applicant shall be allowed to sit for the examination and tested in the subjects the board may determine to be necessary.

- (4) Examinations shall be held within the state at least once a year at the time and place as the board shall determine.
- (5) An applicant who is admitted to the examination or an applicant who has submitted satisfactory evidence that he has been accepted as a candidate for licensure by examination in a state which offers an examination approved by the board may be granted a temporary permit which shall be valid until his examination is graded and he is notified by the board of his score. The board may summarily withdraw a temporary permit upon determination that the person has made any false statement to the board on the application, or the person fails to pass an examination approved by the board.
- (6) An applicant who receives a passing score as determined by the board and who meets the other qualifications required by this chapter shall be licensed as a physical therapist.
- (7) An applicant who fails to receive a passing score on his examination shall not be licensed, but the board may, by administrative regulation, permit applicants to take the examination more than once.
- (8) All licenses and certificates shall be renewed biennially, upon payment on or before March 31 of each uneven-numbered year of a renewal fee in an amount to be promulgated by the board by administrative regulations. ~~Any licensed or certified person seeking renewal shall be required to complete the course described in KRS 214.610(1) at least one (1) time every ten (10) years, but the board may in its discretion require completion of the course more frequently. Proof of completion of the course shall be retained for three (3) years following completion.~~
- (9) Licenses and certificates which are not renewed by March 31 of each uneven-numbered year shall lapse.
- (10) This chapter shall not be construed to affect or prevent:
 - (a) A student of physical therapy from engaging in clinical practice under the

- supervision of a licensed physical therapist, as part of the student's educational program;
- (b) A physical therapist who is licensed to practice in another state or country from conducting or participating in a clinical residency under the supervision of a physical therapist licensed in Kentucky and for a period of not more than ninety (90) days;
 - (c) A physical therapist who is licensed to practice in another state or country from conducting or participating in the teaching of physical therapy in connection with an educational program and for a period of not more than ninety (90) days;
 - (d) A physical therapist licensed in another state or country from performing therapy on members of the out-of-state sports or entertainment group they accompany to Kentucky; or
 - (e) The practice of chiropractic as defined in KRS 312.015(3).

➔Section 22. KRS 327.060 is amended to read as follows:

- (1) The board shall issue a license to:
 - (a) An individual who holds a valid license from another state, who meets requirements specified in KRS 327.050 and who has no imposed or pending disciplinary actions.
 - (b) An individual who has been educated as a physical therapist outside the United States and who has:
 - 1. Completed the application process;
 - 2. Provided satisfactory evidence to the board that his or her education is substantially equivalent to the requirements for physical therapists educated in United States accredited educational programs;
 - 3. Provided written proof that the school of physical therapy education outside the United States is recognized by its own ministry of education;

4. Successfully completed the examinations provided for in KRS 327.050;
 5. Passed the board-approved English language proficiency examinations if English is not his or her native language;
 6. Successfully completed, prior to licensure, a board-approved, supervised practice period of not less than three (3) months nor more than six (6) months, under the direct supervision of a physical therapist who holds an unrestricted Kentucky license. This requirement may be satisfied by at least three (3) months of supervised practice as a physical therapist in a state with license requirements comparable to or more stringent than those of Kentucky;
 7. ~~Fulfilled the requirements of KRS 214.615(1);~~
 8. ~~Provided proof of legal authorization to reside and seek employment in the United States or its territories;~~
 - 8~~9~~. Provided proof of authorization to practice as a physical therapist without limitations in the country where the professional education occurred;
 - 9~~10~~. Submitted to a prescreening process by an agency approved by the board; and
 - 10~~11~~. Submitted educational credentials to the board for evaluation by an agency approved by the board.
- (2) The board may approve an agency to prescreen applicants for initial licensure under this section.
 - (3) The board may approve one (1) or more services to provide an evaluation of the applicant's educational credentials for board approval for licensing under this section.
 - (4) The board may waive the requirements of ~~subparagraphs 3., 10., and 11. of paragraph (b) of~~ subsection (1) (b) 3., 9., and 10. of this section if the applicant is a

graduate of a professional physical therapy education program preapproved by the board.

➔Section 23. KRS 333.100 is amended to read as follows:

The cabinet may prescribe minimal qualifications for medical laboratory personnel including, but not limited to~~[-]~~ microbiology, serology, chemistry, hematology, immunohematology, biophysics, cytology, or pathology.~~[In addition, laboratory personnel, trainees, assistants, or other individuals employed by a medical laboratory shall fulfill the requirements of KRS 214.615(1).]~~

➔Section 24. KRS 333.190 is amended to read as follows:

A medical laboratory license may be denied, revoked, suspended, limited, annulled, or renewal thereof denied for any of the following reasons:

- (1) Making false statements on an application for medical laboratory license or any other documents required by the cabinet.
- (2) Permitting unauthorized persons to perform technical procedures or to issue or sign reports.
- (3) Demonstrating incompetence or making frequent errors in the performance or reporting of medical laboratory examinations and procedures.
- (4) Performing a test and rendering a report thereon to a person not authorized by law to receive such services.
- (5) Reporting the results determined on a specimen by a medical laboratory which has not been licensed or exempted under this chapter.
- (6) Rendering a report on medical laboratory work actually performed in another medical laboratory without designating the name of the director and the name and address of the medical laboratory in which the test was performed.
- (7) Knowingly having professional connection with or knowingly lending the use of the name of the licensed medical laboratory or its director to an unlicensed medical laboratory.

- (8) Violating or aiding and abetting in the violation of any provision of this chapter or the rules or regulations promulgated hereunder.
- (9) Failing to submit to the cabinet any report required by the provisions of this chapter or the reasonable rules and regulations promulgated hereunder.

~~[(10) Failure of medical laboratory personnel, trainees, assistants or other individuals employed by a medical laboratory, to complete the course specified in KRS 214.610(1) at least one (1) time every ten (10) years, unless the cabinet requires, by promulgation of an administrative regulation in accordance with KRS Chapter 13A, completion of the course more frequently.]~~

➔Section 25. KRS 335.080 is amended to read as follows:

- (1) The board shall issue a license as "certified social worker" to an applicant who meets the following requirements:
 - (a) Is at least eighteen (18) years of age;
 - (b) Is a person of good moral character;
 - (c) Has received a master's degree or doctorate degree in social work from an educational institution approved by the board;
 - (d) Has paid to the board an examination fee established by the board by promulgation of an administrative regulation;
 - (e) Has passed an examination prepared by the board;
 - (f) Has not within the preceding three (3) months failed to pass an examination given by the board; **and**
 - (g) Has paid an initial license fee established by the board by promulgation of an administrative regulation~~[-; and~~
 - ~~(h) Has complied with KRS 214.615(1)].~~
- (2) The license shall be displayed in the licensee's principal place of practice, and shall entitle the licensee to hold himself forth to the public as providing services as authorized by KRS 335.010 to 335.160 and 335.990.

- (3) A certified social worker may engage in the practice of clinical social work by contracting, in writing, with a licensed clinical social worker who shall assume responsibility for and supervise the certified social worker's practice as directed by the board by promulgation of administrative regulations. The certified social worker shall, for purposes of this section, be an employee of an institution or organization in which the certified social worker has no direct or indirect interest other than employment. No certified social worker shall enter into a practice of clinical social work until this contract has been approved by the board, and shall cease the practice of clinical social work immediately upon the termination of the contract. At the termination of the contract, the certified social worker shall apply for licensure as a licensed clinical social worker or request an extension of the contract from the board.

➔Section 26. KRS 335.090 is amended to read as follows:

- (1) The board shall issue a license as "licensed social worker" to an applicant who meets the following requirements:
- (a) Is at least eighteen (18) years of age;
 - (b) Is a person of good moral character;
 - (c)
 1. Has received a baccalaureate degree in a social work or social welfare program accredited by the Council on Social Work Education; or
 2. Has received a baccalaureate degree and has completed courses equivalent to a social work or social welfare program as determined by the board;
 - (d) Has paid to the board an examination fee established by the board by promulgation of an administrative regulation;
 - (e) Has passed an examination prepared by the board;
 - (f) Has not within the preceding three (3) months failed to pass an examination given by the board; **and**

- (g) Has paid an initial license fee established by the board by promulgation of an administrative regulation~~[-; and~~
 - ~~(h) Has complied with KRS 214.615(1)].~~
- (2) The license shall be displayed in the licensee's principal place of practice, and shall entitle the licensee to hold himself forth to the public as providing services as authorized by KRS 335.010 to 335.160 and 335.990.

➔Section 27. KRS 335.100 is amended to read as follows:

- (1) The board shall issue a license as "licensed clinical social worker" to an applicant who meets the following requirements:
- (a) Has received a master's degree or doctoral degree in social work from an educational institution approved by the board;
 - (b) Has had a minimum of two (2) years of full time post-master's experience, consisting of at least thirty (30) hours per week, or three (3) years of part time, consisting of at least twenty (20) hours per week, post-master's degree experience acceptable to the board in the use of specialty methods and measures to be employed in clinical social work practice, the experience having been acquired under appropriate supervision as established by the board by promulgation of an administrative regulation;
 - (c) Has paid to the board an examination fee established by the board by promulgation of an administrative regulation;
 - (d) Has passed an examination prepared by the board for this purpose;
 - (e) Has not within the preceding three (3) months failed to pass an examination given by the board; and
 - (f) Has paid an initial license fee established by the board by promulgation of an administrative regulation~~[-; and~~
 - ~~(g) Has complied with KRS 214.615(1)].~~
- (2) The license shall be displayed in the licensee's principal place of practice, and shall

entitle the licensee to hold himself forth to the public as providing services as authorized by KRS 335.010 to 335.160 and KRS 335.990.

- (3) A licensed clinical social worker may contract with a certified social worker in the practice of clinical social work as provided in KRS 335.080(3). The licensed clinical social worker shall assume responsibility for and supervise the certified social worker's practice as directed by the board by promulgation of administrative regulations.

➔Section 28. KRS 335.150 is amended to read as follows:

- (1) The board may revoke, suspend, or refuse to issue or renew; impose probationary or supervisory conditions upon; impose an administrative fine; issue a written reprimand or admonishment; or any combination of actions regarding any applicant, license, or licensee upon proof that the applicant or licensee has:
 - (a) Committed any act of dishonesty or corruption. If the act constitutes a crime, conviction in a criminal proceeding is not a condition precedent to disciplinary action. Upon conviction of the crime, the judgment and sentence creates a rebuttable presumption at the ensuing disciplinary hearing of the guilt of the applicant or licensee. Conviction includes all instances in which a plea of no contest is the basis of the conviction;
 - (b) Misrepresented or concealed a material fact in obtaining a license, or in reinstatement thereof;
 - (c) Committed any unfair, false, misleading, or deceptive act or practice;
 - (d) Been incompetent or negligent in the practice of social work;
 - (e) Violated any state statute or administrative regulation governing the practice of social work or any activities undertaken by a social worker;
 - (f) Failed to comply with an order issued by the board or an assurance of voluntary compliance;
 - (g) Violated the code of ethical conduct as set forth by the board by promulgation

- of an administrative regulation;
- (h) Been legally declared mentally incompetent;
 - (i) Aided or abetted another person in falsely procuring or attempting to procure a license; **or**
 - (j) Aided or abetted an unlicensed person in the practice of social work~~;~~ ~~or~~
 - ~~(k) Failed to comply with the requirements of KRS 214.615(1)}~~.
- (2) Five (5) years from the date of a revocation, any person whose license has been revoked may petition the board for reinstatement. The board shall investigate the petition and may reinstate the license upon a finding that the individual has complied with any terms prescribed by the board and is again able to engage competently in the practice of social work.
- (3) If an alleged violation is not of a serious nature and the evidence presented to the board, after the investigation and appropriate opportunity for the licensee to respond, provides a clear indication that the alleged violation did in fact occur, the board may issue a written admonishment to the licensee. A copy of the admonishment shall be placed in the permanent file of the licensee. The licensee shall have the right to file a response within thirty (30) days of its receipt and to have the response placed in the licensee's permanent file. Alternatively, the licensee may file a request for a hearing, within thirty (30) days of the receipt of the written admonishment. Upon receipt of this request, the board shall set aside the written admonishment and set the matter for hearing.
- (4) At any time during the investigative or hearing processes, the board may enter into an agreed order with, or accept an assurance of voluntary compliance from, the licensee that effectively satisfies the complaint.
- (5) The board may reconsider, modify, or reverse its decision regarding probation, suspension, or any other disciplinary action.
- (6) Upon proof substantiating that sexual contact occurred between a social worker

licensed by the board and a client while the client was under the care of or in a professional relationship with the social worker, the social worker's license may be revoked or suspended with mandatory treatment of the social worker as prescribed by the board. The board may require the social worker to pay a specified amount for mental health services for the client which are needed as a result of the sexual contact.

- (7) The board may revoke the license of a social worker if the social worker has been convicted of a misdemeanor offense under KRS Chapter 510 involving a client or a felony offense under KRS Chapter 510, 530.064(1)(a), or 531.310, or has been found to have had sexual contact as defined in KRS 510.010(7) with a client while the client was under the care of the social worker.

➔SECTION 29. A NEW SECTION OF KRS CHAPTER 311 IS CREATED TO READ AS FOLLOWS:

As used in Sections 29 to 31 of this Act:

- (1) **"Anaphylaxis" means an allergic reaction resulting from sensitization following prior contact with an antigen which can be a life-threatening emergency, including reactions triggered by, among other agents, foods, drugs, injections, insect stings, and physical activity;**
- (2) **"Administer" means to directly apply an epinephrine auto-injector to the body of an individual;**
- (3) **"Authorized entity" means an entity that may at any time have allergens present that are capable of causing a severe allergic reaction and has an individual who holds a certificate issued under Section 30 of this Act on the premises or officially associated with the entity. The term includes but is not limited to restaurants, recreation camps, youth sports leagues, theme parks and resorts, and sports arenas;**
- (4) **"Certified individual" means an individual who successfully completes an**

approved educational training program and obtain a certificate, as described in Section 30 of this Act;

(5) "Epinephrine auto-injector" means a single-use device used to administer a premeasured dose of epinephrine;

(6) "Health-care practitioner" means a physician or other health-care provider who has prescriptive authority; and

(7) "Self-administration" means an individual's administration of an epinephrine auto-injector on herself or himself.

➔SECTION 30. A NEW SECTION OF KRS CHAPTER 311 IS CREATED TO READ AS FOLLOWS:

(1) A health-care practitioner may prescribe epinephrine auto-injectors in the name of an authorized entity or to a certified individual for use in accordance with this section.

(2) A pharmacist may dispense epinephrine auto-injectors pursuant to a prescription issued in the name of an authorized entity or to a certified individual.

(3) The Department for Public Health, the Kentucky Board of Medical Licensure, the Kentucky Board of Nursing, the American Red Cross, or other training programs approved by the Department for Public Health may conduct in-person or on-line training for administering lifesaving treatment to persons believed in good faith to be experiencing severe allergic reactions and issue a certificate of training to persons completing the training. The training shall include instructions for recognizing the symptoms of anaphylaxis and administering an epinephrine auto-injector.

(4) An individual who has a certificate issued under this section may:

(a) Receive a prescription for epinephrine auto-injectors from a health-care practitioner;

(b) Possess prescribed epinephrine auto-injectors; and

- (c) In an emergency situation when a physician is not immediately available and the certified individual in good faith believes a person is experiencing a severe allergic reaction regardless of whether the person has a prescription for an epinephrine auto-injector or has previously been diagnosed with an allergy:
1. Administer an epinephrine auto-injector to the person; and
 2. Provide an epinephrine auto-injector to the person for immediate self-administration.
- (5) An authorized entity that acquires and stocks a supply of epinephrine auto-injectors with a valid prescription shall:
- (a) Store the epinephrine auto-injectors in accordance with manufacturer's instructions and with any additional requirements established by the department; and
 - (b) Designate an employee or agent who holds a certificate issued under this section to be responsible for the storage, maintenance, and general oversight of epinephrine auto-injectors acquired by the authorized entity.
- (6) Any individual or entity who administers or provides an epinephrine auto-injector to a person who is experiencing a severe allergic reaction shall contact the local emergency medical services system as soon as possible.
- (7) Any individual or entity who acquires and stocks a supply of epinephrine auto-injectors in accordance with this section shall notify an agent of the local emergency medical services system and the local emergency communications or vehicle dispatch center of the existence, location, and type of the epinephrine auto-injectors acquired if a severe allergic reaction has occurred.

➔SECTION 31. A NEW SECTION OF KRS CHAPTER 311 IS CREATED TO READ AS FOLLOWS:

- (1) Any individual or entity who, in good faith and without compensation, renders

emergency care or treatment by the use of an epinephrine auto-injector shall be immune from civil liability for any personal injury as a result of the care or treatment, or as a result of any act or failure to act in providing or arranging further medical treatment, if the person acts as an ordinary, reasonable prudent person would have acted under the same or similar circumstances.

(2) The immunity from civil liability for any personal injury under subsection (1) of this section includes:

(a) A health-care practitioner who prescribes or authorizes the emergency use of the epinephrine auto-injector;

(b) A pharmacist who fills a prescription for the epinephrine auto-injector;

(c) A certified individual who provides or administers the epinephrine auto-injector;

(d) An authorized entity who stores or provides the epinephrine auto-injector to a certified individual or authorized noncertified individual; and

(e) An individual trainer or training entity providing the certified individual.

(3) The immunity from civil liability under subsection (1) of this section shall not apply if the personal injury results from the gross negligence or willful or wanton misconduct of the person rendering the emergency care.

(4) The requirements of subsection (6) of Section 30 of this Act shall not apply to any individual who provides or administers an epinephrine auto-injector if that individual is acting as a Good Samaritan under KRS 313.035 and 411.148.

→Section 32. Sections 29 to 31 of this Act may be cited as the Emergency Allergy Treatment Act.

→Section 33. The following KRS section is repealed:

214.615 Required educational course on transmission, control, treatment, and prevention of AIDS.