

The following regulations have been adopted and published in the Kansas Register. They will become effective on the final date listed in the history section that follows each regulation. Regulations become effective 15 days after publication in the Kansas Register unless a later effective date is given in the body of the regulation.

State of Kansas

Board of Healing Arts

Permanent Administrative Regulation

Article 6. — LICENSES

100-6-6. Reentry active license; medicine and surgery and osteopathic medicine. (a) Any physician, whether an applicant or a licensee, who has not engaged in the practice of the healing arts for the two-year period immediately preceding the filing of an application for a license or change of designation type pursuant to K.S.A. 65-2809, and amendments thereto, may be required to complete the terms and conditions of a reentry agreement that has been approved by the board, as a condition of licensure.

(b) Each physician who has not practiced the healing arts for the two-year period immediately preceding the filing of an application for a license or change of designation type shall submit a proposed reentry plan for review by the board. The proposed reentry plan shall contain the following:

- (1) The name of a supervising physician, who shall be approved by the board;
 - (2) an assessment of the physician's current strengths and weaknesses in the intended area or areas of practice. The assessment may include testing and evaluation by colleagues, educators, or others;
 - (3) an education component that addresses the physician's area or areas of needed improvement, if any, and consists of a reentry period of monitored practice and education upon terms based on the factors listed in subsection (c); and
 - (4) documentation that an insurer intends to issue the physician a policy of professional liability insurance pursuant to K.S.A. 40-3402, and amendments thereto, and certification from the physician that the premium surcharges pursuant to K.S.A. 40-3404, and amendments thereto, will be paid.
- (c) Factors that may affect the length and the scope of the reentry plan shall include the following:
- (1) The physician's amount of time out of practice;
 - (2) the prior work schedule when practicing;
 - (3) the reason for the interruption in practice;
 - (4) the physician's activities during the interruption in practice, including the amount of practice-relevant continuing medical education or any healthcare-related volunteer work;
 - (5) the physician's previous and intended area or areas of practice;
 - (6) the changes in each intended area of practice during the time that the physician has been out of continuous practice;
 - (7) the number of years since the physician completed graduate medical education, including fellowship if ap-

plicable; and

(8) the physician's length of active practice after completing graduate medical education.

(d) Depending on the amount of time out of practice, the physician may be required to meet one or more of the following requirements:

(1) Undergo a competency evaluation or assessment approved by the board;

(2) practice for a specified period of time under a supervising physician, who shall provide periodic reports to the board;

(3) complete any accredited postgraduate or clinical fellowship training approved by the board, if the need for this training is indicated by the competency evaluation or assessment; or

(4) complete a board-approved reentry-to-practice or monitoring program.

(e) If the board approves the physician's proposed reentry plan, the approved agreement shall be a professional development plan pursuant to K.S.A. 65-2838a, and amendments thereto, or shall be incorporated by reference into a nondisciplinary approved reentry plan and executed by the physician, the board, and any applicable board staff.

(f) After the reentry plan has been signed and approved by the board, the physician shall receive a reentry active license. While holding a reentry active license, the physician shall not practice outside the scope of the approved reentry plan during the reentry period.

(g) Each reentry active license for medicine and surgery and osteopathic medicine shall expire on June 30 of each year, if not renewed. The reentry active license may be renewed one time without board approval. Each additional renewal of the reentry active license shall be subject to board approval.

(h) The license may be cancelled upon any of the following, subject to notice and an opportunity for a hearing:

(1) The licensee practiced outside the scope of the approved reentry plan.

(2) The licensee did not satisfactorily complete the approved reentry plan.

(3) The licensee failed to maintain a policy of professional liability insurance pursuant to K.S.A. 40-3402, and amendments thereto, and to pay the premium surcharges pursuant to K.S.A. 40-3404, and amendments thereto.

(i) Upon successful completion of the approved reentry plan, the physician shall be granted an active license.

(j) A reentry active license shall not be issued to a physician who ceased practice as a result of revocation of that individual's license or voluntary surrender of the license in lieu of formal proceedings. (Authorized by and implementing K.S.A. 65-2809; effective Nov. 11, 2022.)

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