

Bill Number and Sponsor	Bill Subject	Current Status	Last Action
<a href="#">SB 14</a>  Senate Financial Institutions and Insurance Committee  <a href="#">See Fiscal Note</a>	Updating the version of risk-based capital instructions in effect	In House Insurance	<b>02/13/2023 - House</b> Referred to Insurance

**Brief\***

SB 14 would amend the effective date specified in the Insurance Code for the risk-based capital (RBC) instructions promulgated by the National Association of Insurance Commissioners (NAIC) for property and casualty companies and for life insurance companies. The instructions currently specified became effective on December 31, 2021. The bill would update the effective date of the RBC instructions to December 31, 2022.

<a href="#">SB 15</a>  Senate Financial Institutions and Insurance Committee  <a href="#">See Fiscal Note</a>	Removing the requirement of a documented written demand for premiums as part of a prima facie case against agents or brokers who fail to pay premiums due	In House Insurance	<b>02/13/2023 - House</b> Referred to Insurance
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**Brief\***

SB 15 would remove the requirement of a documented written demand from an insurance company for unpaid premiums by an agent or broker.

Under current law, the failure of an agent or broker to pay premiums owed to an insurer after written demand is made is considered prima facie evidence that the agent or broker has used or applied the premium for another purpose. Such failure then subjects the agent or broker to the penalties listed in KSA 40-247(b).

The bill would remove the requirement of the written demand in establishing prima facie evidence.

<a href="#">SB 17</a>  Senate Financial Institutions and Insurance Committee  <a href="#">See Fiscal Note</a>	Modifying the requirement to report individuals who solicit memberships on behalf of prepaid service plans from semi-annually to annually and upon application for registration and discontinuing payment of annual registration fees for such plans	In House Insurance	<b>02/13/2023 - House</b> Referred to Insurance
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**Brief\***

SB 17 would modify requirements for reporting individuals who solicit memberships on behalf of prepaid service plans from semi-annually to annually. The bill would also discontinue payment of annual registration fees.

Under current law, each prepaid service plan authorized to do business in the state is required to register each individual who solicits memberships on their behalf, pay an annual registration fee of \$2 per individual, and provide a list of those individuals to the Kansas Insurance Department (Department) biannually, on January and July 1 of each year.

The bill would:

- Discontinue the annual registration fee of \$2 per individual who solicits memberships on behalf of the prepaid service plan;
- Change the list reporting requirements from a biannual to an annual basis, at the time the prepaid service plan files to continue its certificate of registration;
- Include the amendments to the registration requirements into KSA 40-4209; and
- Repeal the former location of the reporting requirements in statute, KSA 40-4203.

<p><a href="#">SB 18</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Adding certain legal entities to the definition of "person" thereby making such entities subject to penalties for violations of insurance law</p>	<p>In House Insurance</p>	<p><b>02/17/2023 - House</b> Referred to Insurance</p>
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<p><a href="#">SB 19</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Requiring certain premium taxes to be paid 90 days after each calendar year and basing such premium taxes upon the gross premiums collected for the previous calendar year</p>	<p>In House Insurance</p>	<p><b>02/13/2023 - House</b> Referred to Insurance</p>
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**Brief\***

SB 19 would amend provisions pertaining to premium taxes paid by municipal group-funded liability pools and group-funded workers' compensation pools to change the basis upon which the premium taxes for these pools are calculated.

The bill would change, from fiscal year to calendar year, the basis upon which the 1.0 percent annual premium tax is paid. (Under both the bill and current law, the premium tax is based on the annual gross premium collected by the pool for the preceding year. Payment must be made no later than 90 days after the conclusion of each year.)

The bill would also make technical changes.

<p><a href="#">SB 24</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Changing the required number of employees contained in the definitions of "large employer" and "small employer" for purposes of coverage for autism spectrum disorder</p>	<p>Passed in Senate</p>	<p><b>02/23/2023 - Senate</b> Emergenced to Final Action: Passed; Yeas 38, Nays 1</p>
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**Brief\***

SB 24 would amend the definitions of "small employer" and "large employer" in a statute pertaining to insurance coverage for autism spectrum disorder. The definitions of "small employer" and "large employer" pertain to group health benefit plans and are specified by the number of people employed on business days during the preceding calendar year, with at least one employee on the first day of the benefit plan year.

The bill would amend the definition of “small employer” from an average of at least 1 but not more than 100 employees to an average of at least 2 but not more than 50 employees. The bill would amend the definition of “large employer” from an average of at least 101 employees to an average of at least 51 employees.

The bill would also make technical amendments.

<p><a href="#">SB 25</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Decreasing the premium tax rate imposed on surplus lines insurance from 6% to 3%</p>	<p>In House Insurance</p>	<p><b>02/21/2023 - House</b> Scheduled Hearing in Insurance: Wednesday, 3/1, 3:30 PM, Rm 218-N</p>
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**Brief\***

SB 25, as amended, would amend a provision in the Insurance Code pertaining to the premium tax assessed for surplus lines business that is transacted on behalf of insureds (policyholders) whose home state is Kansas. The bill would reduce the prescribed tax rate from 6.0 percent to 4.0 percent.

Under current law, on March 1 of each year, licensed agents are required to collect and pay to the Commissioner of Insurance a tax of 6.0 percent on the total gross premiums charged, less any return premiums. The bill would amend this rate to 4.0 percent, commencing with the tax year beginning January 1, 2024.

<p><a href="#">SB 26</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Specifying certain requirements necessary to demonstrate fiscal soundness for health maintenance organizations and medicare provider organizations applying for certificates of authority</p>	<p>In House Insurance</p>	<p><b>02/13/2023 - House</b> Referred to Insurance</p>
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**Brief\***

SB 26 would amend law relating to the financial documentation demonstrating fiscal soundness that must be submitted by a health maintenance organization (HMO) or a Medicare provider organization (MPO) when applying for a certificate of authority to provide health care in the state.

The bill would amend requirements pertaining to statements of fiscal soundness to:

- Require financial projections for a minimum of three years from the date of application [Note: Current law requires the projections for a minimum of three years from the anticipated date of certification and on a monthly basis from the date of certification through one year.];
- Limit the projections for each deficit year and for one year thereafter required when a HMO or MPO expects to incur a deficit to a maximum of five years;
- Eliminate the requirement for monthly statements of revenue and expense for the first year on a gross dollar and a per-member-per-month basis; and
- Change the required balance sheet for all financial projections from quarterly to yearly.

The bill would also make technical amendments.

<p><a href="#">SB 27</a></p> <p>Senate Financial Institutions and Insurance Committee</p>	<p>Authorizing the commissioner of insurance to set the amount of certain fees</p>	<p>Passed in Senate</p>	<p><b>02/23/2023 - Senate</b> Final Action: Passed; Yeas 38, Nays 2</p>
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**Brief\***

SB 27 would amend provisions in the Uniform Insurance Agents Licensure Act and the Public Adjusters Licensing Act to allow the Commissioner of Insurance (Commissioner) to set fees in an amount lower than the maximum amount of the fees established in law. The bill would also amend fingerprinting criteria for resident agents.

***Resident Agents and Non-resident Agents***

**Resident agents.** Under current law, an applicant for a resident agent license must pay a nonrefundable fee of \$30 to the Commissioner. The bill would instead require each applicant to pay the fee in an amount not to exceed \$30. The bill would require the Commissioner, no later than December 1, to annually set and publish the application fee for the next calendar year in the Kansas Register.

The bill would also amend law permitting the Commissioner to use information from an applicant's background check, fingerprinting, and criminal history for the purpose of verifying identification and fitness of the applicant to be issued a license to require, rather than allow, the Commissioner to use this information in determining whether a license should be issued.

**Non-resident agents.** Under current law, an applicant for a non-resident agent license must pay a nonrefundable application fee of \$30 and a biennial fee of \$50. The bill would instead require non-resident agents to pay the respective fees in an amount not to exceed \$30 and \$50. The bill would also require the Commissioner to annually set and publish this application fee for the next calendar year.

***Public Adjusters***

Under current law, an applicant for public adjuster licensure must pay an application fee of \$100. The bill would instead require the applicants to pay a fee in an amount not to exceed \$100. The bill would also require the Commissioner to annually set and publish this application fee for the next calendar year.

<p><a href="#">SB 28</a></p> <p>Senate Financial Institutions and Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Discontinuing payments to certain group-funded insurance pools, refunding existing balances thereof and abolishing such funds and establishing the group-funded pools refund fund</p>	<p>Passed in Senate</p>	<p><b>02/23/2023 - Senate</b> Final Action: Passed; Yeas 39, Nays 1</p>
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**Brief\***

SB 28 would establish the Group-funded Pools Refund Fund and amend and repeal law to eliminate assessments paid by municipal group-funded liability pools and group-funded workers' compensation pools in order to refund existing balances in two associated fee funds and wind down such funds.

The bill would specify that moneys in the Group-funded Pools Refund Fund could be used only for the purpose of refunding entities that have paid into the Group-funded Pools Fee Fund (pursuant to KSA 12-2623) and the Group-funded Workers' Compensation Fee Fund (pursuant to KSA 44-587) on a pro-rata basis based upon taxes paid by each entity in fiscal year 2022. The bill would provide for a July 1, 2023, transfer from the two existing fee funds into the Group-funded Pools Refund Fund. On July 1, 2024, this fund would be abolished.

The bill would also make a technical update to another group-funded workers' compensation statute to remove reference to one of the fees being eliminated by this bill.

<p><a href="#">SB 38</a></p> <p>Senate Federal and State Affairs Committee</p>	<p>Increasing the maximum compensation benefits payable by an employer for permanent total disability suffered by an injured employee</p>	<p>In Senate Commerce</p>	<p><b>01/18/2023 - Senate</b> Referred to Commerce</p>
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<p style="text-align: center;"><a href="#">SB 62</a></p> <p style="text-align: center;">Senate Financial Institutions and Insurance Committee</p> <p style="text-align: center;"><a href="#">See Fiscal Note</a></p>	<p>Enacting the protect vulnerable adults from financial exploitation act, requiring reporting of instances of suspected financial exploitation under certain circumstances and providing civil and administrative immunity to individuals who make such reports</p>	<p>In Senate Ways and Means</p>	<p><b>02/23/2023 - Senate</b> Withdrawn from Financial Institutions and Insurance; referred to Ways and Means</p>
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<p style="text-align: center;"><a href="#">SB 74</a></p> <p style="text-align: center;">Senate Judiciary Committee</p> <p style="text-align: center;"><a href="#">See Fiscal Note</a></p>	<p>Providing for joint liability for costs and sanctions in third-party funded litigation, requiring certain discovery disclosures and requiring payment of certain costs for nonparty subpoenas</p>	<p>In Senate Ways and Means</p>	<p><b>02/23/2023 - Senate</b> Withdrawn from Judiciary; referred to Ways and Means</p>
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<p style="text-align: center;"><a href="#">SB 75</a></p> <p style="text-align: center;">Senate Judiciary Committee</p> <p style="text-align: center;"><a href="#">See Fiscal Note</a></p>	<p>Changing the legal rate of interest from a fixed rate to a variable rate based on the statutory rate provided for interest on judgments</p>	<p>Passed in Senate</p>	<p><b>02/23/2023 - Senate</b> Final Action: Passed as amended; Yeas 38, Nays 0</p>
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**Brief\***

SB 75 would amend law governing the rate of legal interest when creditors have not agreed upon a rate in a civil judgment.

Current law sets the interest rate at 10.0 percent. The bill would provide such rate would be set at two percentage points below the rate specified as calculated and published by the Secretary of State each July, as provided by continuing law. [Note: KSA 16-204(e)(1) outlines the calculation and publication schedule for such rates.]

The bill would also make a technical change.

<p style="text-align: center;"><a href="#">SB 76</a></p> <p style="text-align: center;">Senate Financial Institutions and Insurance Committee</p> <p style="text-align: center;"><a href="#">See Fiscal Note</a></p>	<p>Providing for an exemption from continuing education licensure requirements for certain insurance producers</p>	<p>In Senate Financial Institutions and Insurance</p>	<p><b>02/08/2023 - Senate</b> Scheduled Hearing in Financial Institutions and Insurance: Thursday, 2/16, 9:30 AM, Rm 546-S</p>
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<p style="text-align: center;"><a href="#">SB 82</a></p> <p style="text-align: center;">Senate Education Committee</p> <p style="text-align: center;"><a href="#">See Fiscal Note</a></p>	<p>Requiring schools to establish policies and concussion management teams to prevent and manage concussions within school</p>	<p>On General Orders in Senate</p>	<p><b>02/23/2023 - Senate</b> Committee of the Whole: Be passed over and retain a place on the Calendar</p>
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**Brief\***

SB 82 would amend the School Sports Head Injury Prevention Act to require schools to establish a comprehensive concussion education program.

Under current law, if a school athlete suffers, or is suspected of having suffered, a concussion or other head injury during a sport competition or practice session, the athlete must be removed from the competition or practice until a health care provider clears the athlete to return to play or to return to practice. The bill would require schools to appoint a concussion management team and to establish a concussion education program that would provide for the policies and procedures governing the prevention and management of concussions.

### ***Definitions***

The bill would define new terms to be used throughout the School Sports Head Injury Prevention Act, including:

- “Activity” would mean any school activity or contest in the fields of athletics, music, forensics, dramatics, and any other interschool activity by students in grades 7-12;
- “Athlete” would mean a student who prepares for or participates in an activity;
- “Concussion” would mean a complex pathophysiological process affecting the brain that is caused by traumatic biochemical forces;
- “Concussion management team” would mean an interdisciplinary team of professionals vested in the education of an athlete when a concussion affects the athlete’s ability to learn due to an activity health condition;
- “Parent” would mean a natural parent, a stepparent, a guardian, or a foster parent of a student; and
- “School” would be amended to mean any public or accredited nonpublic high school or middle school, including home school entities.

In addition, the bill would replace the word “sport” with “activity.” It would also replace the term “school athlete” with the word “athlete.”

### ***Concussion Education Program***

The bill would require schools to establish a concussion education program to allow persons to review the school’s policies and procedures governing the prevention and management of concussions. [Note: The policies and procedures would address concussions that occur during activities, but the policies and procedures could be applied to all concussions.] Policies and procedures would include, but not be limited to, the following:

- The prevention and management of concussions;
- Dangers and risks associated with concussions;
- Signs and symptoms of concussions; and
- Return-to-learn and return-to-play protocols, as defined in the bill. [Note: The return-to-learn and return-to-play protocols are explained in detail, below.]

### ***Concussion Training Program***

At least biennially, the following individuals, as defined in the bill unless otherwise noted, would be required to complete a concussion training program that has been approved by the State Board of Education and the Kansas State High School Activities Association:

- Coach;
- Licensed athletic trainer;
- Licensed school counselor;
- Game official;
- Nurse;
- Athletic director;
- Licensed speech-language pathologist; and
- School marching band director, whether employed by the school district or a volunteer.

### ***Concussion Management Team***

The bill would authorize schools to appoint a concussion management team to establish the school’s return-to-play and return-to-learn protocols. To the extent possible, the concussion management team would include, but would not be limited to, the following individuals, as defined in the bill:

- Licensed athletic trainer, if employed or contracted by the school district;
- Athletic director;
- Designated teacher;
- Licensed school counselor;
- School administrator;

- Nurse;
- Licensed speech-language pathologist; and
- Any other licensed individual deemed appropriate by the school.

A designee from the concussion management team, other than a coach, would be required to supervise the persons responsible for complying with the concussion management protocols.

*Return-to-learn Protocol*

The bill would require schools to establish a return-to-learn protocol based on scientific evidence-based practices consistent with the guidelines recommended by the federal Centers for Disease Control and Prevention and the Kansas State High School Activities Association.

The return-to-learn protocol would be required to recognize that a concussed student who returns to school prior to full recovery may need academic accommodations and monitoring by medical or academic staff. An athlete who sustains a concussion would be required to completely participate in school without concussion-related accommodations prior to participating in any activity competition or practice session.

*Return-to-play Protocol*

The bill would require the school’s concussion management team to establish a return-to-play protocol based on scientific evidence-based practices consistent with the guidelines recommended by the federal Centers for Disease Control and Prevention and the Kansas State High School Activities Association.

An athlete would be required to be removed immediately from a competition or practice session if one of the following individuals believes that the athlete might have sustained a concussion:

- Coach;
- Health care provider;
- Game official;
- Licensed athletic trainer;
- The athlete;
- The athlete’s parent, or other person with the legal authority to make medical decisions on behalf of the athlete; or
- Any other person deemed appropriate under the school’s return-to-play protocol.

Further, the athlete would not be able to return to competition or practice until a health care provider evaluates the athlete and provides the athlete with a written clearance to return to play or to practice. In addition, the athlete would not be able to return to play or to practice until the athlete successfully completes:

- Each requirement of the school’s return-to-learn protocol, which is necessary for the athlete to return to learn; and
- Each requirement of the school’s return-to-play protocol, which is necessary for the athlete to return to play.

<a href="#">SB 85</a>	Enacting the Kansas travel insurance act	In House Insurance	<b>02/23/2023 - House</b> Referred to Insurance
Senate Financial Institutions and Insurance Committee			
<a href="#">See Fiscal Note</a>			

**Brief\***

SB 85 would enact the Kansas Travel Insurance Act (Act) as part of the Kansas Insurance Act. The bill would address the licensure and registration of limited lines travel insurance producers (travel insurance producers) and travel retailers, establish a premium tax for travel insurers, regulate the sale and marketing of travel insurance and travel protection plans, provide for travel administrators, and establish standards for travel insurance policies.

The bill would also make technical amendments and remove outdated statutory language.

The bill would be effective on and after January 1, 2024, and its publication in the statute book.

### ***Purpose and Application (New Section 2)***

The purpose of the Act would be to promote the public welfare by establishing a comprehensive legal framework within which travel insurance may be sold.

The requirements of the Act would apply to travel insurance that covers Kansas residents that is sold, solicited, negotiated, or offered in the state and to policies and certificates delivered or issued for delivery in the state. The Act would not apply to cancellation fee waivers or travel assistance services, except as expressly provided in the Act.

All applicable provisions of the insurance laws of the state would apply to travel insurance, but specific provisions of the Act would supersede any general provisions of law that would be applicable to travel insurance.

### ***Definitions (New Section 3)***

The bill would define terms used in the Act, including:

- “Aggregator site” would mean a website that provides access to information regarding insurance products for more than one insurer, including product and insurer information, for use in comparison shopping;
- “Blanket travel insurance” would mean a policy of travel insurance issued by any eligible group providing coverage for specific classes of persons defined in the policy with coverage provided to all members of the eligible group without a separate charge to individual members of the eligible group;
- “Cancellation fee waiver” would mean a contractual agreement between a supplier of travel services and its customer to waive some or all of the nonrefundable cancellation fee provisions of the supplier’s underlying form of reimbursement. “Cancellation fee waiver” would not be considered insurance;
- “Commissioner” would mean the Commissioner of Insurance;
- “Delivery” would mean handing fulfillment materials to the policyholder or certificate holder or sending such fulfillment materials to the policyholder or certificate holder using United States mail or electronic means;
- “Eligible group” would mean two or more persons who are engaged in a common enterprise, or have an economic, educational, or social affinity or relationship. An eligible group would include 13 various groups of similarly-situated entities itemized in the bill;
- “Fulfillment materials” would mean documentation sent to the purchaser of a travel protection plan that confirms the purchase and provides details of the coverage and assistance of the travel protection plan;
- “Group travel insurance” would mean travel insurance issued to any eligible group;
- “Limited lines travel insurance producer” would mean a licensed managing general agent or third party administrator; a licensed insurance producer, including a limited lines producer; or a travel administrator;
- “Offer and disseminate” means providing general information including a description of the coverage and price, as well as processing of the application and collecting premiums;
- “Primary certificate holder” would mean an individual person who elects and purchases travel insurance under a group policy;
- “Primary policy holder” would mean an individual person who elects and purchases individual travel insurance;
- “Travel administrator” would mean a person who directly or indirectly underwrites, collects charges, collateral, or premiums from, or adjusts or settles claims on, Kansas residents in connection with travel insurance. Entities not considered to be travel administrators would be as identified in the bill;
- “Travel assistance services” would mean non-insurance services for which the customer is not indemnified based on a fortuitous event and where providing the service does not result in transfer or shifting of risk that would constitute the business of insurance. The bill would list non-exclusive examples of travel assistance services;
- “Travel insurance” would mean insurance coverage for personal risks incidental to planned travel as outlined in the bill. The bill would also clarify that travel insurance would not include major medical plans that provide comprehensive medical protection for travelers with trips lasting longer than six months, including those working or residing overseas as an expatriate, or any other product that would require a specific insurance producer license;
- “Travel protection plans” would mean plans that provide one or more of the following: travel insurance, travel assistance services, or cancellation fee waivers; and
- “Travel retailer” would mean a business entity that makes, arranges, or offers planned travel and may offer and disseminate travel insurance as a service to its customers on behalf of and under the direction of a limited lines travel insurance producer.

### ***Licensure Requirements (New Section 4)***

The bill would provide for the licensure of limited lines travel insurance producers and the registration of travel retailers that may sell travel insurance under the license of a travel insurance producer. The Commissioner of Insurance (Commissioner) would be authorized to issue a limited lines travel insurance producer license to an individual or entity that files with the Commissioner an application for such licensure in a form and manner prescribed by the Commissioner. Such travel insurance producer would be licensed to sell, solicit, or



negotiate travel insurance through a licensed insurer. The bill would require travel insurance producers or travel insurance retailers to be properly licensed or registered, respectively.

The bill would establish the conditions under which a travel retailer would be allowed to offer and disseminate travel insurance under a travel insurance producer business entity license. The conditions would include:

- The travel insurance producer or travel retailer provides certain information to purchasers of travel insurance;
- The travel insurance producer establishes a register of each travel retailer that offers travel insurance on the travel insurance producer's behalf and maintains and updates such register, submits the register to the Department upon reasonable request, and certifies the travel retailer complies with federal law pertaining to crimes by or affecting persons engaged in the business of insurance whose activities affect interstate commerce;
- The travel insurance producer designates one of its employees, who is a licensed individual producer, as a designated responsible producer responsible for compliance with travel insurance laws and regulations applicable to the travel insurance producer and its registrants;
- The designated responsible producer, president, secretary, treasurer, and any other officer or person who directs or controls the travel insurance producer's insurance operations complies with the fingerprinting requirements applicable to insurance producers in such producers resident state;
- The travel insurance producer has paid all applicable licensing fees required by state law; and
- The travel insurance producer requires each of the employee and authorized representative of the travel insurance retailer whose duties include offering and disseminating travel insurance to receive a program of instruction or training, which is subject to review and approval at the discretion of the Commissioner. The content of such training material would be as provided for in the bill.

Any travel retailer offering or disseminating travel insurance would be required to make available to the prospective purchaser brochures or written materials containing specific information outlined in the bill.

The bill would prohibit a travel retailer employee or authorized representative, who is not a licensed insurance producer, from performing certain acts.

Despite any other provision in law, a travel retailer whose insurance-related activities and the activities of the employees and authorized representative of such travel retailer are limited to offering and disseminating travel insurance on behalf of and under the direction of a travel insurance producer that meets the conditions stated in the Act would be authorized to receive related compensation, upon registration by the travel insurance producer.

As the insurer's designee, the travel insurance producer would be responsible for the acts of the travel retailer and would be authorized to use reasonable means to ensure the travel retailer's compliance with this Act.

#### ***Premium Tax (New Section 5)***

The travel insurer would be required to pay premium tax on travel insurance premiums paid by entities identified in the bill. The travel insurer would also be required to document the state of residence or principal place of business of each policy holder or certificate holder and report as premium only the amount allocable to travel insurance.

#### ***Travel Protection Plan Requirements (New Section 6)***

The bill would provide that travel protection plans may combine the features such plans offer in the state for one price if:

- Clear disclosure is provided to the consumer at or prior to the time of purchase regarding the content of such plan, and an opportunity is provided to the consumer at or prior to the time of purchase regarding the features and pricing of each plan; and
- The fulfillment materials meet the requirements outlined in the bill.

#### ***Sales and Marketing Requirements (Section 7)***

Each person offering travel insurance to Kansas residents would be subject to the Unfair Trade Practices Law, except as otherwise provided in this section of the bill. If a conflict arose between the Act and the Kansas Insurance Act regarding the sale and marketing of travel insurance and travel protections plans, the provisions of the Act would control. The bill establishes that offering or selling a travel insurance policy that could never result in payment of any claims for any insured under the policy would be an unfair practice under the Unfair Trade Practices Law.

The bill would require each person who offers travel insurance policies or travel protection plans to comply with the following:

- All documents provided to a consumer prior to the purchase of travel insurance must be consistent with the travel insurance policy itself;
- For each travel insurance policy or certificate containing pre-existing condition exclusions, information and an opportunity to learn more about such exclusions must be provided to the consumer prior to the time of purchase and in the coverage's fulfillment materials;
- Fulfillment information and the information required to be provided to purchasers of travel insurance by a travel insurance producer or travel retailer in Section 4(b)(1) of the bill must be provided to a policy holder or certificate holder as soon as practicable following the purchase of a travel insurance protection plan. Unless the policy holder or certificate holder has started a covered trip or filed a claim under the travel insurance coverage, such policyholder or certificate holder would be allowed to cancel a policy or certificate for a full refund of the travel protection plan price from the date of purchase until at least:
  - 15 days following the date of delivery of the travel protection plan's fulfillment materials by means other than postal mail; or
  - 10 days following the date of delivery of the travel protection plan's fulfillment materials by means other than postal mail;
- The company must disclose in the policy documentation and fulfillment materials whether the travel insurance is primary or secondary to other applicable coverage; and
- Where travel insurance is marketed directly to the consumer through the insurer's website or by others through an aggregator site, it would not be an unfair trade practice or other violation of law when an accurate summary or short description of coverage was provided if the consumer has access to the full provisions of the policy through electronic means.

No person offering, soliciting, or negotiating travel insurance or travel protection plans on an individual or group basis may do so by using a negative option or opt out, that would require a consumer to take an affirmative action to deselect coverage. Marketing blanket travel insurance coverage as free would be an unfair trade practice.

If the jurisdiction of a consumer's destination requires insurance coverage, it would not be an unfair trade practice to require such consumer, as a condition of purchasing a trip or travel package, to choose between purchasing the required coverage through the travel retailer or travel insurance producer supplying the trip or travel package, or the consumer agreeing to obtain and provide proof of coverage that meets the jurisdiction's requirements prior to departure.

#### ***Travel Administrator Conditions (Section 8)***

The bill would prohibit a person from acting or representing themselves as a travel administrator for travel insurance in Kansas unless he or she is a licensed property and casualty insurance producer in Kansas for activities permitted under that producer license or holds a valid managing general agent license or a valid third-party administrator license in Kansas.

The bill would require that an insurer be responsible for the acts of a travel administrator that administers travel insurance underwritten by the insurer and ensure the travel administrator maintains all books and records relevant to the insurer and makes such books and records available to the Commissioner upon request.

#### ***Travel Insurance Classification and Filing (New Section 9)***

Despite any other Kansas Insurance Act provision, the bill would require travel insurance to be classified and filed for purposes of rates and forms under an inland marine line of insurance [Note: Inland marine insurance covers products being transported over land or temporarily housed by a third party]. Travel insurance could be in the form of an individual, group, or blanket policy. Eligibility and underwriting standards for travel insurance could be developed and provided based on travel protection plans designed for individual or identified marketing or distribution channels, provided those standards also meet Kansas underwriting standards for inland marine insurance.

#### ***Rules and Regulations Authority (New Section 10)***

The bill would authorize the Commissioner to adopt rules and regulations to implement and enforce the provisions of this Act.

#### ***Categorization of Travel Insurance (Section 11)***

The bill would amend travel insurance, as one of the lines of authority for which an insurance agent may qualify for licensure, to add the following personal risks incidental to planned travel that would be covered: emergency evacuations, repatriation of remains, or any other

contractual obligations to indemnify or pay a specified amount to the traveler upon determinable contingencies related to travel as approved by the Commissioner.

<a href="#">SB 116</a> Senate Federal and State Affairs Committee <a href="#">See Fiscal Note</a>	Standardizing firearms safety programs in school districts	In House Federal and State Affairs	<b>02/20/2023 - House</b> Referred to Federal and State Affairs
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**Brief\***

SB 116 would create law related to firearm safety education programs conducted in public school districts.

The bill would allow local school boards (local board) to provide firearm safety education programs. The State Board of Education (State Board) would be directed to establish curriculum guidelines for a standardized firearm safety education program, which would be required to include accident prevention.

The bill would provide that specific programs would be used based on the grade level of students, as follows:

- Kindergarten through grade five guidelines would be based on the Eddie Eagle Gunsafe program (Eddie Eagle program) offered by the National Rifle Association (NRA) or any successor program;
- Grades six through eight guidelines would be based on either the Eddie Eagle program, or any successor program, or the Hunter Education in Our Schools program (Hunter Education), offered by the Kansas Department of Wildlife and Parks (KDWP), or any successor program; and
- Grades nine through twelve guidelines would be based on Hunter Education or any successor program.

The bill would provide that if a local board elects to provide firearm safety education, such instruction must be in accordance with the guidelines established by the State Board. Further, if a local board elects to provide firearm safety education courses, such instruction would have to be offered so as to ensure all students are provided the opportunity to take the course.

<a href="#">SB 119</a> Senate Financial Institutions and Insurance Committee <a href="#">See Fiscal Note</a>	Updating certain obsolete statutory references in chapter 40 of the Kansas Statutes Annotated	Passed in Senate	<b>02/23/2023 - Senate</b> Final Action: Passed; Yeas 40, Nays 0
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**Brief\***

SB 119 would clarify the definition of “insurance company” and make other technical corrections and reconciling changes in the Insurance Code.

<a href="#">SB 148</a> Senate Public Health and Welfare Committee <a href="#">See Fiscal Note</a>	Enacting the ensuring transparency in prior authorization act to impose requirements and limitations on the use of prior authorization in healthcare	In Senate Public Health and Welfare	<b>02/03/2023 - Senate</b> Referred to Public Health and Welfare
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<a href="#">SB 161</a>	Imposing certain health insurance coverage requirements for screening and diagnostic examinations for breast cancer	In Senate Public Health and Welfare	<b>02/03/2023 - Senate</b> Referred to Public Health and Welfare
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Senate Public Health and Welfare Committee			
<a href="#">See Fiscal Note</a>			
<a href="#">SB 165</a>	Permitting workers compensation benefits for first responders who suffer from post-traumatic stress disorder	In Senate Commerce	<b>02/07/2023 - Senate</b> Referred to Commerce
Senate Commerce Committee			
<a href="#">SB 213</a>	Requiring healthcare providers to charge the same amount for medical record requests related to a patient's social security disability, workers' compensation, medical malpractice or personal injury claims whether requested by a patient or the patient's legal representative	In Senate Public Health and Welfare	<b>02/09/2023 - Senate</b> Referred to Public Health and Welfare
Marci Francisco, D-2nd			
<a href="#">See Fiscal Note</a>			
<a href="#">SB 219</a>	Designating certain healthcare providers as being ineligible to purchase professional liability insurance from the healthcare stabilization fund	Passed in Senate	<b>02/23/2023 - Senate</b> Final Action: Passed; Yeas 26, Nays 12
Senate Federal and State Affairs Committee			
<a href="#">See Fiscal Note</a>			
<b>Brief*</b>			
<p>SB 219 would amend the Health Care Provider Insurance Availability Act to add facilities where elective abortions are performed to the list of entities that are not healthcare providers as defined in the bill, which would make such facilities ineligible to purchase professional liability insurance from the Health Care Stabilization Fund (Fund).</p> <p>The bill would require such facilities to maintain continuous professional liability insurance coverage equivalent to that provided by the Fund as a condition of licensure and to submit satisfactory proof of such coverage to the Fund's Board of Governors, which administers the Fund and advises the appropriate licensing and disciplinary authorities regarding the qualifications of healthcare providers.</p>			
<a href="#">SB 224</a>	Enacting the Kansas protection of pensions and businesses against ideological interference act, relating to ideological boycotts involving environmental, social or governance standards, requiring KPERS to divest from and prohibiting state contracts or the deposit of state moneys with entities engaged in such boycotts as determined by the state treasurer and prohibiting discriminatory practices in the financial services industry based on such boycotts	In Senate Federal and State Affairs	<b>02/10/2023 - Senate</b> Referred to Federal and State Affairs
Senate Federal and State Affairs Committee			
<a href="#">SB 258</a>	Enacting the act against abusive access litigation to create a civil action for determining whether litigation that alleges any access violation under the Americans with disabilities act or similar law constitutes abusive litigation and authorize penalties for such abusive litigation	In Senate Judiciary	<b>02/17/2023 - Senate</b> Referred to Judiciary
Senate Federal and State Affairs Committee			

<p><a href="#">HB 2019</a></p> <p>House Transportation Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Establishing conditions for when a driver is an independent contractor for a transportation network company</p>	<p>Passed in House</p>	<p><b>02/23/2023 - House</b> Final Action: Passed; Yeas 84, Nays 38</p>
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**Brief\***

HB 2019 would establish conditions in the Kansas Transportation Network Company Services Act for when a driver for a transportation network Company (TNC) is an independent contractor.

The bill would specify that a driver for a TNC is an independent contractor and not an employee provided that the TNC:

- Does not determine the hours when the driver must be logged in to its system;
- Does not restrict the driver’s ability to use the digital networks of other TNCs;
- Does not restrict the driver from engaging in any other occupation or business; and
- Agrees in writing with the driver that the driver is an independent contractor for the TNC.

<p><a href="#">HB 2020</a></p> <p>House Transportation Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Providing that the employment status of a driver of a motor carrier does not change as a result of the inclusion of safety improvements on a vehicle</p>	<p>Passed in House</p>	<p><b>02/23/2023 - House</b> Final Action: Passed; Yeas 122, Nays 0</p>
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**Brief\***

HB 2020 would add to employment-related law that a requirement for or use of a motor carrier safety improvement will not affect or change the worker status of a driver.

The bill would define two terms:

- “Motor carrier safety improvement,” to mean any device, equipment, software, technology, procedure, training, policy, program, or operational practice intended and used primarily to improve or facilitate compliance with traffic or motor carrier safety laws or the safety of the vehicle, the vehicle operator, or a third-party public roadway user; and
- “Worker status,” to mean the classification under state law of a motor vehicle driver who transports property for compensation as an agent, employee, jointly employed employee, borrowed servant, or independent contractor for a motor carrier.

<p><a href="#">HB 2042</a></p> <p>House Commerce, Labor and Economic Development Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Authorizing towing by self-storage unit operators of motor vehicles, watercraft or trailers for nonpayment of rent or abandonment and providing for notice to occupants, a right of redemption prior to towing and liability protection for operators</p>	<p>In Senate Commerce</p>	<p><b>02/22/2023 - Senate</b> Scheduled Hearing in Commerce: Thursday, 3/2, 10:30 AM, Rm 546-S</p>
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**Brief\***

HB 2042, as amended, would add self-storage unit operators (operators) to the list of persons who may direct the towing of a vehicle and permit the operators to have motor vehicles, trailers, and watercraft towed when the occupant of the storage space is in default for a period of 45 days.

The bill would require the operator to provide notice to an occupant prior to towing the property. The occupant could avoid a tow by paying the amount necessary to satisfy the operator's lien at any time before the tow.

The bill would exempt operators from liability for damages to motor vehicles, trailers, or watercraft after the towing service takes possession if the towing service has a certificate of public service from the Kansas Corporation Commission. The bill would limit tows under the bill to those permitted by a city ordinance or county resolution of the city or county where the storage facility is located.

The bill would provide for the operator's lien on the motor vehicle, trailer, or watercraft to be extinguished after the property is towed from the self-storage facility.

<p><a href="#">HB 2063</a></p> <p>House Commerce, Labor and Economic Development Committee</p>	<p>Limiting current workers compensation benefit reductions that are based on the receipt of retirement benefits to reductions only to permanent disability compensation and only when retirement benefits begin after the accident</p>	<p>In House Commerce, Labor and Economic Development</p>	<p><b>01/19/2023 - House</b> Referred to Commerce, Labor and Economic Development</p>
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<p><a href="#">HB 2089</a></p> <p>House Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Modifying the requirement to report individuals who solicit memberships on behalf of prepaid service plans from semi-annually to annually and upon application for registration and discontinuing payment of annual registration fees for such plans</p>	<p>In Senate Financial Institutions and Insurance</p>	<p><b>02/22/2023 - Senate</b> Referred to Financial Institutions and Insurance</p>
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**Brief\***

HB 2089 would modify requirements for reporting individuals who solicit memberships on behalf of prepaid service plans from semi-annually to annually. The bill would also discontinue payment of annual registration fees.

Under current law, each prepaid service plan authorized to do business in the state is required to register each individual who solicits memberships on their behalf, pay an annual registration fee of \$2 per individual, and provide a list of those individuals to the Kansas Insurance Department (Department) biannually, on January and July 1 of each year.

The bill would:

- Discontinue the annual registration fee of \$2 per individual who solicits memberships on behalf of the prepaid service plan;
- Change the list reporting requirements from a biannual to an annual basis at the time the prepaid service plan files to continue its certificate of registration;
- Include the amendments to the registration requirements into KSA 40-4209; and
- Repeal the former location of the reporting requirements in KSA 40-4203.

<p><a href="#">HB 2090</a></p> <p>House Insurance Committee</p> <p><a href="#">See Fiscal Note</a></p>	<p>Authorizing the commissioner of insurance to set the amount of certain fees</p>	<p>In Senate Financial Institutions and Insurance</p>	<p><b>02/22/2023 - Senate</b> Referred to Financial Institutions and Insurance</p>
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**Brief\***

HB 2090 would amend provisions in the Uniform Insurance Agents Licensure Act and the Public Adjusters Licensing Act to allow the Commissioner of Insurance (Commissioner) to set fees in an amount lower than the maximum amount of the fees established in law. The bill would also amend fingerprinting criteria for resident agents.

***Resident Agents and Non-Resident Agents***

**Resident agents.** Under current law, an applicant for a resident agent license must pay a nonrefundable fee of \$30 to the Commissioner. The bill would instead require each applicant to pay the fee in an amount not to exceed \$30. The bill would require the Commissioner, no later than December 1, to annually set and publish the application fee for the next calendar year in the Kansas Register.

The bill would also amend law permitting the Commissioner to use information from an applicant’s background check, fingerprinting, and criminal history for the purpose of verifying identification and fitness of the applicant to be issued a license to require, rather than allow, the Commissioner to use this information in determining whether a license should be issued.

**Non-resident agents.** Under current law, an applicant for a nonresident agent license must pay a nonrefundable application fee of \$30 and a biennial fee of \$50. The bill would instead provide these agents must pay the respective fees in an amount not to exceed \$30 and \$50. The bill would also require the Commissioner to annually set and publish this application fee for the next calendar year.

**Public Adjusters**

Under current law, an applicant for public adjuster licensure must pay an application fee of \$100. The bill would instead require these applicants to pay a fee in an amount not to exceed \$100. The bill would also require the Commissioner to annually set and publish this application fee for the next calendar year.

<a href="#">HB 2093</a>	Discontinuing payments to certain group-funded insurance pools, refunding existing balances thereof and abolishing such funds and establishing the group-funded pools refund fund	In Senate Financial Institutions and Insurance	<b>02/22/2023 - Senate Scheduled Hearing in Financial Institutions and Insurance:</b> Wednesday, 3/1, 9:30 AM, Rm 546-S
House Insurance Committee			
<a href="#">See Fiscal Note</a>			

**Brief\***

HB 2093 would establish the Group-funded Pools Refund Fund and amend and repeal law to eliminate assessments paid by municipal group-funded liability pools and group-funded workers’ compensation pools in order to refund existing balances in two associated fee funds and wind down such funds.

The bill would specify that moneys in the Group-funded Pools Refund Fund could only be used for the purpose of refunding entities that have paid into the Group-funded Pools Fee Fund (pursuant to KSA 12-2623) and the Group-funded Workers’ Compensation Fee Fund (pursuant to KSA 44-587). The bill would provide for a July 1, 2023, transfer from the two existing fee funds into the Group-funded Pools Refund Fund. On July 1, 2024, this fund would be abolished.

The bill would also make a technical update to another group-funded workers’ compensation law to remove reference to one of the fees being eliminated by this bill.

<a href="#">HB 2094</a>	Specifying certain requirements necessary to demonstrate fiscal soundness for health maintenance organizations and medicare provider organizations applying for certificates of authority	In Senate Financial Institutions and Insurance	<b>03/01/2023 - Senate Referred to Financial Institutions and Insurance</b>
House Insurance Committee			
<a href="#">See Fiscal Note</a>			

**Brief\***

HB 2094 would amend law relating to the financial documentation demonstrating fiscal soundness that must be submitted by a health maintenance organization (HMO) or a Medicare provider organization (MPO) when applying for a certificate of authority to provide health care in the state.

The bill would amend requirements pertaining to statements of fiscal soundness to:

- Require financial projections for a minimum of three years from the date of application [Note: Current law requires the projections for a minimum of three years from the anticipated date of certification and on a monthly basis from the date of certification through one year.];



- Limit the projections for each deficit year and for one year thereafter required when a HMO or MPO expects to incur a deficit to a maximum of five years;
- Eliminate the requirement for monthly statements of revenue and expense for the first year on a gross dollar and a per-member-per-month basis; and
- Change the required balance sheet for all financial projections from quarterly to yearly.

The bill would also make technical amendments.

<a href="#">HB 2095</a>  House Insurance Committee  <a href="#">See Fiscal Note</a>	Changing the required number of employees contained in the definitions of "large employer" and "small employer" for purposes of coverage of autism spectrum disorder	In House Insurance	<b>01/20/2023 - House</b> Referred to Insurance
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<a href="#">HB 2096</a>  House Insurance Committee  <a href="#">See Fiscal Note</a>	Requiring certain premium taxes to be paid 90 days after each calendar year and basing such premium taxes upon the gross premiums collected for the previous calendar year	In Senate Financial Institutions and Insurance	<b>02/22/2023 - Senate</b> Scheduled Hearing in Financial Institutions and Insurance: Wednesday, 3/1, 9:30 AM, Rm 546-S
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**Brief\***

HB 2096 would amend provisions pertaining to premium taxes paid by municipal group-funded liability pools and group-funded workers' compensation pools to change the basis upon which the premium taxes for these pools are calculated.

The bill would change, from fiscal year to calendar year, the basis upon which the 1.0 percent annual premium tax is paid. (Under both the bill and current law, the premium tax is based on the annual gross premium collected by the pool for the preceding year. Payment must be made no later than 90 days after the conclusion of each year.)

The bill would also make technical changes.

<a href="#">HB 2097</a>  House Insurance Committee  <a href="#">See Fiscal Note</a>	Removing the requirement of a documented written demand for premiums as part of a prima facie case against agents or brokers who fail to pay premiums due	In Senate Financial Institutions and Insurance	<b>03/01/2023 - Senate</b> Referred to Financial Institutions and Insurance
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**Brief\***

HB 2097 would remove the requirement of a documented written demand from an insurance company for unpaid premiums by an agent or broker.

Under current law, the failure of an agent or broker to pay premiums owed to an insurer after written demand is made is considered prima facie evidence that the agent or broker has used or applied the premium for another purpose. Such failure then subjects the agent or broker to the penalties listed in KSA 40-247(b).

The bill would remove the requirement of the written demand in establishing prima facie evidence.

<a href="#">HB 2098</a>	Adding certain legal entities to the definition of "person" thereby making such entities subject to penalties for violations of insurance law	In Senate Financial Institutions and Insurance	<b>03/01/2023 - Senate</b> Referred to Financial Institutions and Insurance
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House Insurance Committee <a href="#">See Fiscal Note</a>			
<b>Brief*</b>			
<p>HB 2098 would add “and any other legal entity under the jurisdiction of the commissioner” to the definition of “person” in statute pertaining to insurance laws and enforcement. The change would allow for entities that are currently under the jurisdiction of the Commissioner of Insurance to be more accurately reflected in statute.</p> <p>The bill would also make technical changes.</p>			
<a href="#">HB 2099</a> House Insurance Committee <a href="#">See Fiscal Note</a>	Discontinuing certain exemptions from the pharmacy benefits manager licensure act	In House Insurance	<b>01/20/2023 - House</b> Referred to Insurance
<a href="#">HB 2100</a> House Insurance Committee <a href="#">See Fiscal Note</a>	Updating the version of risk-based capital instructions in effect	In Senate Financial Institutions and Insurance	<b>02/22/2023 - Senate</b> Scheduled Hearing in Financial Institutions and Insurance: Wednesday, 3/1, 9:30 AM, Rm 546-S
<b>Brief*</b>			
<p>HB 2100 would amend the effective date specified in the Insurance Code for the risk-based capital (RBC) instructions promulgated by the National Association of Insurance Commissioners (NAIC) for property and casualty companies and for life insurance companies. The instructions currently specified became effective on December 31, 2021. The bill would update the effective date of the RBC instructions to December 31, 2022.</p>			
<a href="#">HB 2101</a> House Financial Institutions and Pensions Committee <a href="#">See Fiscal Note</a>	Regulating contract for deed transactions, authorizing recording of contract for deeds or affidavits of equitable interest, listing deceptive practices constituting violations of the consumer protection act, requiring notice to the buyer of default and allowing buyers to cure such default	In House Financial Institutions and Pensions	<b>01/20/2023 - House</b> Referred to Financial Institutions and Pensions
<a href="#">HB 2148</a> House Transportation Committee <a href="#">See Fiscal Note</a>	Increasing certain registration and title fees on vehicles for services provided by county treasurers and the division of vehicles, decreasing certain fees related to administrative costs and disposition of such fees and eliminating the division of vehicles modernization surcharge	In House Transportation	<b>02/01/2023 - House</b> Scheduled Hearing in Transportation: Tuesday, 2/7, 1:30 PM, Rm 582-N
<a href="#">HB 2183</a>	Removing the cap on damages that may be awarded in	In House Judiciary	<b>01/26/2023 - House</b>

House Judiciary Committee <a href="#">See Fiscal Note</a>	wrongful death actions		Referred to Judiciary
<a href="#">HB 2209</a> House Veterans and Military Committee <a href="#">See Fiscal Note</a>	Providing that national guard members receive benefits under the workers compensation act	In House Taxation	<b>02/06/2023 - House</b> Withdrawn from Veterans and Military; referred to Taxation
<a href="#">HB 2239</a> House Welfare Reform Committee <a href="#">See Fiscal Note</a>	Allowing for exemptions from continuing education requirements for work experience	In House Welfare Reform	<b>02/01/2023 - House</b> Referred to Welfare Reform
<a href="#">HB 2266</a> House Health and Human Services Committee <a href="#">See Fiscal Note</a>	Defining non-covered benefits under dental benefit plans	In House Insurance	<b>02/02/2023 - House</b> Referred to Insurance
<a href="#">HB 2283</a> House Insurance Committee <a href="#">See Fiscal Note</a>	Enacting the ensuring transparency in prior authorization act to impose requirements and limitations on the use of prior authorization in healthcare	In House Insurance	<b>02/14/2023 - House</b> Scheduled Hearing in Insurance: Monday, 2/20, 3:30 PM, Rm 218-N
<a href="#">HB 2284</a> House Insurance Committee <a href="#">See Fiscal Note</a>	Adding fire districts to the definition of "municipality" for purposes of the payment of COBRA premiums under certain circumstances	In Senate Financial Institutions and Insurance	<b>02/22/2023 - Senate</b> Referred to Financial Institutions and Insurance

**Brief\***

HB 2284 would amend law requiring certain municipalities to pay for the premiums for the continuation of insurance coverage under COBRA for the surviving spouse and eligible dependent children of a firefighter who dies in the line of duty. The bill would add “fire district” to the definition of “municipality” to allow such districts to be subject to this continuation of coverage requirement.

Under current law, the term “municipality” means a city, county, or township. The law requires municipalities opting to provide for the payment of health insurance premiums for its firefighters to pay the premiums for continuation of coverage for 18 months.

The bill would also make technical corrections, including the removal of a term no longer included in the statute.

<a href="#">HB 2285</a>  House Insurance Committee  <a href="#">See Fiscal Note</a>	Updating certain statutory references in Chapter 40 of the Kansas Statutes Annotated	In Senate Financial Institutions and Insurance	<b>02/22/2023 - Senate</b> Referred to Financial Institutions and Insurance
<b>Brief*</b>  HB 2285 would clarify the definition of “insurance company” and make other technical corrections and reconciling changes in the Insurance Code.			
<a href="#">HB 2287</a>  House Health and Human Services Committee  <a href="#">See Fiscal Note</a>	Imposing certain health insurance coverage requirements for screening and diagnostic examinations for breast cancer	In House Insurance	<b>02/06/2023 - House</b> Referred to Insurance
<a href="#">HB 2304</a>  House Federal and State Affairs Committee  <a href="#">See Fiscal Note</a>	Standardizing firearms safety programs in school districts	In House Federal and State Affairs	<b>02/15/2023 - House</b> Scheduled Hearing in Federal and State Affairs: Tuesday, 2/21, 9:00 AM, Rm 346-S
<a href="#">HB 2402</a>  House Federal and State Affairs Committee  <a href="#">See Fiscal Note</a>	Prohibiting new self-service storage facilities from being located within 1,000 feet of a child care facility or school	In House Federal and State Affairs	<b>02/13/2023 - House</b> Referred to Federal and State Affairs
<a href="#">HB 2404</a>  House Federal and State Affairs Committee	Enacting the Kansas protection of pensions and businesses against ideological interference act, relating to ideological boycotts involving environmental, social or governance standards, requiring KPERS to divest from and prohibiting state contracts or the deposit of state moneys with entities engaged in such boycotts as determined by the state treasurer and prohibiting discriminatory practices in the financial services industry based on such boycotts	In House Federal and State Affairs	<b>02/13/2023 - House</b> Referred to Federal and State Affairs
<a href="#">HB 2423</a>  House Taxation Committee	Enacting the act against abusive access litigation to create a civil action for determining whether litigation that alleges any access violation under the Americans with disabilities act or similar law constitutes abusive litigation and authorizing penalties for such abusive litigation	In House Judiciary	<b>02/24/2023 - House</b> Scheduled Hearing in Judiciary: Thursday, 3/2, 3:30 PM, Rm 582-N
<a href="#">HB 2436</a>	Enacting the Kansas public investments and contracts protection	In House	<b>02/23/2023 - House</b>

House Appropriations Committee	act concerning environmental, social and governance (ESG) criteria, prohibiting the state and political subdivisions from giving preferential treatment to or discriminating against companies based on such ESG criteria in procuring or letting contracts, requiring KPERS fiduciaries to act solely in the financial interest of the participants and beneficiaries of the system, restricting state agencies from adopting ESG criteria or requiring any person or business to operate in accordance with such criteria and providing for enforcement of such act by the attorney general	Financial Institutions and Pensions	Referred to Financial Institutions and Pensions