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| [SB 6 AN ACT relating to the safe disposal of controlled substances](#_Toc509493934) | Support |
| [SB 29 AN ACT relating to tobacco-related illnesses and making an appropriation therefor](#_Toc509493935) | Support |
| [SB 49 AN ACT relating to privilege and confidentiality for peer review activities in health care](#_Toc509493936) | Support |
| [SB 52 AN ACT relating to the voluntary preceptor tax credit](#_Toc509493937) | Support |
| [SB 89 AN ACT relating to the prescriptive authority of advanced practice registered nurses](#_Toc509493938) | Support |
| [HB 4 AN ACT relating to the privileging of peer review activities in health care](#_Toc509493939) | Support |
| [HB 30 AN ACT relating to suicide prevention training](#_Toc509493940) | Support |
| [HB 55 AN ACT relating to drug education](#_Toc509493941) | Support |
| [HB 124 AN ACT relating to enhanced standards and criteria for substance use disorder treatment and recovery services and programs and declaring an emergency](#_Toc509493942) | Support |
| [HB 148 AN ACT relating to prescription medications in hospice programs](#_Toc509493943) | Support |
| [HB 288 AN ACT relating to physician assistants](#_Toc509493944) | Support |
| [HB 289 AN ACT relating to disproportionate share hospital payments and making an appropriation therefor](#_Toc509493945) | Support |
| [HB 200  AN ACT relating to appropriations and revenue measures providing financing](#_Toc509493946) | Oppose |
| [SB 2 AN ACT proposing an amendment to Section 54 of the Constitution of Kentucky](#_Toc509493947) | Monitor |
| [SB 5 AN ACT relating to pharmacy benefits in the Medicaid program](#_Toc509493948) | Monitor |
| [SB 7 AN ACT establishing the Kentucky Rare Disease Advisory Council and making an appropriation therefor](#_Toc509493949) | Monitor |
| [SB 20 AN ACT relating to health care providers](#_Toc509493950) | Monitor |
| [SB 112 AN ACT relating to telehealth](#_Toc509493951) | Monitor |
| [SB 235 AN ACT relating to surprise billing](#_Toc509493952) | Monitor |
| [SB 236 AN ACT relating to surprise billing](#_Toc509493953) | Monitor |
| [SB 260 AN ACT relating to strengthening the controlled substances collaborative agreement between physicians and advanced practice registered nurses](#_Toc509493954) | Monitor |
| [HB 10 AN ACT proposing to amend Section 29 of the Constitution of Kentucky relating to administrative regulations](#_Toc509493955) | Monitor |
| [HB 69 AN ACT relating to service delivery improvements in managed care networks](#_Toc509493956) | Monitor |
| [HB 191 AN ACT relating to consumer protection in eye care and making an appropriation therefor](#_Toc509493957) | Monitor |
| [HB 444 AN ACT relating to health facilities and services](#_Toc509493958) | Monitor |
| [HB 445 AN ACT relating to the prescriptive authority of advanced practice registered nurses](#_Toc509493959) | Monitor |
| [HB 463 AN ACT relating to pharmacy benefits](#_Toc509493960) | Monitor |
| [HB 497 AN ACT relating to physician assistants](#_Toc509493961) | Monitor |
| [HB 576 AN ACT relating to health insurance](#_Toc509493962) | Monitor |

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| **Bill** | **Committee Stance and Vote Information** |
| SB 6 AN ACT relating to the safe disposal of controlled substances.  Amend KRS 218A.170 to require a practitioner or a pharmacist to sell or distribute a nontoxic composition, which permanently captures the controlled substance, for the sequestration or deactivation and disposal of unused, unwanted, or expired controlled substances anytime a controlled substance is sold or distributed.  Sen. Alice Forgy Kerr (R)  <http://www.lrc.ky.gov/record/18RS/SB6.htm>  Status: 10.17.2017 Prefiled (BR 131)  01.02.2018 Introduced in Senate  01.03.2018 to Health & Welfare  03.14.2018 reported favorably, to Rules with Committee Substitute (2); posted for passage in the Regular Orders of the Day for Wednesday, March 14, 2018; 3rd reading; committee amendment (1) withdrawn; Committee Substitute (1) withdrawn; passed 34-2 with Committee Substitute (2); floor amendment (1) filed to Committee Substitute (2)  03.14.2018 received in House  03.19.2018 to Health and Family Services (H); posted in committee  03.21.2018 reported favorably, to Rules with Committee Substitute as a Consent Bill  Amendments:    [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB6/HCS1.pdf) - Amend to require a pharmacist or a pharmacist's designee to inform persons verbally, in writing or by posted signage of methods for the sequestration or deactivation and disposal of unused, unwanted, or expired controlled substances anytime a controlled substance is dispensed; to permit a pharmacist or a pharmacist's designee to make available for purchase or distribute at no charge a nontoxic composition for the sequestration or deactivation and disposal of unused, unwanted, or expired controlled substances when a controlled substance is dispensed; require a practitioner who dispenses a controlled substance to inform all persons who receive a prescription about the importance of proper and safe disposal of unused, unwanted, or expired prescription drug and make available for purchase or distribute at no charge a nontoxic composition for the sequestration or deactivation and disposal of unused, unwanted, or expired controlled substances; encourage manufactures or distributors to enter into consignment-reimbursement contracts for inventory. | Support |
| SB 29 AN ACT relating to tobacco-related illnesses and making an appropriation therefor.  Create a new section of KRS 205.510 to 205.560 to establish the Medicaid tobacco-related illness reimbursement fund; create a new section of KRS Chapter 212 to establish the county tobacco cessation fund; create a new section of KRS Chapter 212 to provide a minimum smoke-free ordinance for counties to receive money from the county tobacco cessation fund; amend KRS 138.140 to impose a healthcare reimbursement assessment on cigarettes and other tobacco products, including e-cigarettes; amend KRS 138.130 to update definitions for chapter, including adding e-cigarettes to definition of tobacco products; amend various sections of the Kentucky Revised Statutes to conform.  Sen. Stephen Meredith (R)  <http://www.lrc.ky.gov/record/18RS/SB29.htm>  Status: 12.06.2017 Prefiled (BR 224)  01.02.2018 Introduced in Senate  01.03.2018 to Appropriations & Revenue | Support |
| SB 49 AN ACT relating to privilege and confidentiality for peer review activities in health care.  Amend KRS 311.377 to add medical malpractice actions, actions arising out of review of credentials or retrospective review and evaluation, and actions by an applicant for or grantee of staff privileges to materials that are confidential and privileged and not subject to discovery, subpoena, or introduction into evidence, in any civil action in any court.  Sen. Ralph Alvarado (R)  <http://www.lrc.ky.gov/record/18RS/SB49.htm>  Status: 01.03.2018 Introduced in Senate  01.04.2018 to Judiciary | Support |
| SB 52 AN ACT relating to the voluntary preceptor tax credit.  Create a new section of KRS Chapter 141 to establish an individual income tax credit for Kentucky-licensed physicians who as voluntary preceptors administer at least three core clinical rotations for certain medical students; amend KRS 141.0205 to order the credit; amend KRS 131.190 to require reporting of statistics; amend sections of KRS Chapters 131 and 141 to make conforming changes.  Sen. Ralph Alvarado (R)  <http://www.lrc.ky.gov/record/18RS/SB52.htm>  Status: 01.03.2018 Introduced in Senate  01.04.2018 to Appropriations & Revenue | Support |
| SB 89 AN ACT relating to the prescriptive authority of advanced practice registered nurses.  Amend KRS 314.011 to eliminate the Controlled Substance Formulary Development Committee; amend KRS 314.042 to permit advanced practice registered nurses to enter into a collaborative agreement for prescriptive authority for controlled substances with a collaborating advanced practice nurse practitioner or a physician and to permit advanced practice registered nurses to prescribe controlled substances without a collaborative agreement after four years; amend KRS 314.193 to assign to the Advanced Practice Registered Nurse Council the responsibility to make recommendations to the Board of Nursing regarding limitations on prescriptions for controlled substances written by advanced practice registered nurses and to review continuing education requirements for controlled substances; amend KRS 314.196 to clarify qualifications for members of the Collaborative Prescribing Agreement Joint Advisory Committee and to clarify the committee's responsibilities.  Sens. P. Hornback and T. Buford  <http://www.lrc.ky.gov/record/18RS/SB89.htm>  Status: 01.17.2018 Introduced in Senate  01.18.2018 to Licensing, Occupations, & Administrative Regulations | Support |
| HB 4 AN ACT relating to the privileging of peer review activities in health care.  Amend KRS 311.377 to add medical malpractice actions, actions arising out of review of credentials or retrospective review and evaluation, and actions by an applicant for or grantee of staff privileges to materials that are confidential and privileged and not subject to discovery, subpoena, or introduction into evidence, in any civil action in any court.  Rep. Addia Wuchner (R)  <http://www.lrc.ky.gov/record/18RS/HB4.htm>  Status: 01.03.2018 Introduced in House  01.04.2018 to Health and Family Services  02.09.2018 3rd reading, passed 58-27 with Committee Substitute  02.12.2018 received in Senate  02.15.2018 to Health & Welfare  02.27.2018 3rd reading, passed 25-13  02.28.2018 received in House; enrolled, signed by Speaker of the House; enrolled, signed by President of the Senate; delivered to Governor  03.09.2018 signed by Governor  Amendments:  [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB4/HCS1.pdf) - Retain original provisions except clarify that the confidentiality and privilege protections are only available to persons and entities that are participating in an initiative for patient safety and quality improvement. | Support |
| HB 30 AN ACT relating to suicide prevention training.  Amend KRS 156.095 to require two hours of in-person suicide prevention professional development training every other school year for middle and high school principals, guidance counselors, and teachers; require a newly hired staff member to receive a packet of information on suicide prevention when the person is hired in a year training is not provided; amend KRS 158.070 to delete requirement for two hours of self-study review for suicide prevention training.  Rep. Regina Huff (R)  <http://www.lrc.ky.gov/record/18RS/HB30.htm>  Status: 07.25.2017 Prefiled (BR 91)  01.02.2018 Introduced in House  01.02.2018 to Education  02.01.18 3rd reading, passed 88-0 with floor amendment (1)  02.02.18 received in Senate  02.05.18 to Education  03.20.18 reported favorably, 1st reading, to Consent Calendar with Committee Substitute (1)  03.21.18 2nd reading, to Rules  Amendments:  [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB30/HFA1.pdf)( S. Overly ) - Require the provisions to apply to public charter schools.  [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB30/SCS1.pdf) - Amend KRS 156.095 to require one hour of suicide prevention training for all high school and middle school principals, guidance counselors, and teachers; provide that the training shall be either in-person, by live streaming, or via a video recording; provide that this training may be included in the four days of professional development under KRS 158.070. | Support |
| HB 55 AN ACT relating to drug education.  Amend KRS 156.160 to require the Kentucky Board of Education to promulgate administrative regulations to require physical and health education instruction in drug abuse prevention and the connection between abuse and addiction to other drugs; require the Office of Drug Control Policy to develop recommendations for the instruction in drug abuse prevention to be published on the Web site of the Department of Education.  Rep. James Tipton (R)  <http://www.lrc.ky.gov/record/18RS/HB55.htm>  Status: 10.26.2017 Prefiled (BR 312)  01.02.2018 Introduced in House  01.02.2018 to Education  01.31.2018  3rd reading, passed 91-0 with floor amendment (3)  02.01.2018  received in Senate  02.02.2018  to Education  Amendments:    [HFA3](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB55/HFA3.pdf)( J. Tipton ) - Require public charter schools to provide drug abuse prevention instruction; make technical correction. | Support |
| HB 124 AN ACT relating to enhanced standards and criteria for substance use disorder treatment and recovery services and programs and declaring an emergency.  Create a new section of KRS Chapter 222 to require the Cabinet for Health and Family Services to complete a comprehensive review of all current state licensure and quality standards for substance use disorder treatment and recovery services and programs; specify that licensure and quality standards be based on nationally recognized and evidence-based standards, standardized outcome measures, a reporting process, and conditions for reimbursement; permit fees for licensure; require the cabinet to promulgate administrative regulations to implement the licensure and quality standards by January 1, 2019, repeal KRS 222.037 and 222.212; EMERGENCY.  Rep. Addia Wuchner (R)  Rep. Kimberly Moser (R)  <http://www.lrc.ky.gov/record/18RS/HB124.htm>  Status: 01.03.2018 Introduced in House  01.05.2018 to Health and Family Services  01.30.18 3rd reading, passed 85-2 with floor amendment (1)  01.31.18 received in Senate  02.01.2018  to Health & Welfare  03.16.2018 3rd reading, passed 36-0 with Committee Substitute (1)     03.19.2018 received in House; to Rules  03.21.2018 taken from Rules; posted for passage for concurrence in Senate Committee Substitute; House concurred in Senate Committee Substitute (1); passed 93-0  Amendments: [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB124/HFA1.pdf)( A. Wuchner ) - Amend to add that provisions of the bill are subject to funding; EMERGENCY.      [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB124/SCS1.pdf) - Amend KRS 196.288 relating to the allocation or distribution of cost savings to allow the expenditure of funds for medication-assisted treatment of substance abuse; EMERGENCY . | Support |
| HB 148 AN ACT relating to prescription medications in hospice programs.  Create a new section of KRS Chapter 381 to shift ownership of controlled substances from a deceased hospice patient to a hospice program so the hospice program may dispose of the controlled substances.  Status: 01.05.2018 - Introduced in House  Rep. Addia Wuchner (R)  Rep. Kimberly Poore Moser (R)  <http://www.lrc.ky.gov/record/18RS/HB148.htm>  Status: 01.05.2018 - Introduced in House  01.09.2018 to health and family services  02.06.18 - 3rd reading, passed 94-0 with Committee Substitute and committee amendment (1-title)  02.07.18 – received in Senate  02.08.18 - to Health & Welfare  03.21.18 3rd reading, passed 38-0  Amendments:   [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB148/HCS1.pdf) - Delete original provisions; create a new section of KRS Chapter 216 to require that any provider of hospice, palliative care, or end-of-life service have written policies and procedures for the deactivation or sequestration and disposal of Schedule II, III, IV, or V controlled substances prescribed to a patient upon the patient's death by the entity or person pronouncing death; require discussion and agreement to the policy; require notification of patient or patient's refusal to agree to disposal; require signed witness to the disposal; require safe disposal method be used; require the Cabinet for Health and Family Services to promulgate regulations to provide for the deactivation or sequestration and disposal of controlled substances.      [HCA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB148/HCA1.pdf)( A. Wuchner ) - Make title amendment. | Support |
| HB 288 AN ACT relating to physician assistants.  Amend KRS 311.856 to permit physician assistants to prescribe controlled substances; amend KRS 311.858 to permit physician assistants to prescribe controlled substances; create a new section of KRS 311.840 to 311.862 to establish the Physician Assistants Controlled Substance Monitoring Committee.  Reps. D. Elliott, M. Marzian, R. Palumbo, J. Wayne  <http://www.lrc.ky.gov/record/18RS/HB228.htm>  Status: 01.22.2018 - Introduced in House  01.24.2018 to health and family services | Support |
| HB 289 AN ACT relating to disproportionate share hospital payments and making an appropriation therefor.  Amend KRS 205.639 to establish definitions; amend KRS 205.640 to specify the process for submitting Medicaid disproportionate share hospital (DSH) surveys; specify the process by which initial and final DSH payments are calculated; provide for the distribution of DSH funds; require the Department for Medicaid Services and managed care organizations to provide hospitals with a paid claims list within 90 days of the end of each hospital's fiscal year; create a new section of KRS Chapter 205 to establish a penalty for managed care organizations that do not provide hospitals with a paid claims list by the required deadline; create a new section of KRS Chapter 205 to permit the Department for Medicaid Services to promulgate administrative regulations to comply with changes in federal law regarding DSH payments and to make DSH payments contingent upon receipt of federal funds, the availability of state funds, and approval of the Centers for Medicare and Medicaid; repeal KRS 205.641; APPROPRIATION.  <http://www.lrc.ky.gov/record/18RS/HB289.htm>  Status: 01.31.2018 - Introduced in House  02.02.2018 to health and family services  02.21.2018 3rd reading; floor amendment (1) defeated; passed 84-11  02.22.2018 received in Senate  02.23.2018 to Health & Welfare (S)  03.21.2018 3rd reading, passed 33-2  Amendments:   [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB289/HFA1.pdf)( J. Jenkins ) - Insert new language to clarify that hospitals shall continue to request that an individual apply for medical assistance and Kentucky Children's Health Insurance and shall not bill an individual whose family income up to one hundred percent (100%) of the federal poverty level. | Support |
| HB 200  AN ACT relating to appropriations and revenue measures providing financing and conditions for the operations, maintenance, support, and functioning of the government of the Commonwealth of Kentucky and its various officers, cabinets, departments, boards, commissions, institutions, subdivisions, agencies, and other state-supported activities.     The State/Executive Branch Budget: Detail Part I, Operating Budget; appropriate to General Government: 2017-2018: $7,018,500, 2018-2019: $1,704,291,300, 2019-2020: $1,655,441,200; appropriate to the Economic Development Cabinet: 2018-2019: $31,672,600, 2019-2020: $32,384,800; appropriate to the Department of Education: 2018-2019: $4,885,519,300, 2019-2020: $4,885,920,600; appropriate to the Education and Workforce Development Cabinet: 2018-2019: $630,653,700, 2019-2020: $635,306,400; appropriate to the Energy and Environment Cabinet: 2018-2019: $272,522,400, 2019-2020: $280,337,000; appropriate to the Finance and Administration Cabinet: 2018-2019: $932,955,700, 2019-2020: $962,132,700; appropriate to the Health and Family Services Cabinet: 2017-2018: $12,064,200, 2018-2019: $13,902,025,100, 2019-2020: $14,153,724,700; appropriate to the Justice and Public Safety Cabinet: 2017-2018: $22,281,300, 2018-2019: $1,279,407,200, 2019-2020: $1,315,928,100; appropriate to the Labor Cabinet: 2018-2019: $221,768,700, 2019-2020: $221,427,400; appropriate to the Personnel Cabinet: 2018-2019: $66,174,600, 2019-2020: $66,486,800; appropriate to Postsecondary Education: 2018-2019: $7,834,090,600, 2019-2020: $8,200,114,600; appropriate to the Public Protection Cabinet: 2018-2019: $123,723,400, 2019-2020: $122,273,100; appropriate to the Tourism, Arts and Heritage Cabinet: 2017-2018: $8,831,600, 2018-2019: $258,238,600, 2019-2020: $261,409,800; appropriate to the Budget Reserve Trust Fund: 2018-2019: $62,414,100, 2019-2020: $183,378,000; not included in the appropriation amounts are capital project amounts as follows: 2017-2018 $16,500,000, 2018-2019: $2,804,425,500, 2019-2020: $342,579,500; detail Part II, Capital Projects Budget; detail Part III, General Provisions; detail Part IV, State Salary/Compensation, Benefit, and Employment Policy; detail Part V, Funds Transfer; detail Part VI, General Fund Budget Reduction Plan; detail Part VII, General Fund Surplus Expenditure Plan; detail Part VIII, Road Fund Budget Reduction Plan; detail Part IX, Road Fund Surplus Expenditure Plan; detail Part X, Phase I Tobacco Settlement; and detail Part XI, Executive Branch Budget Summary.  Rep. Rudy  <http://www.lrc.ky.gov/record/18RS/HB200.htm>  Status: 01.16.18 – Introduced in House  01.18.2018 to Appropriations & Revenue  03.01.2018 taken from Rules (H); posted for passage in the Regular Orders of the Day for Thursday, March 1, 2018; floor amendment (1) filed to Committee Substitute; 3rd reading, passed 76-15 with Committee Substitute, committee amendment (1-title), floor amendment (1)  03.02.2018 received in Senate  03.06.2018 to Appropriations & Revenue  03.20.2018 reported favorably, to Rules with Committee Substitute (1); posted for passage in the Regular Orders of the Day for Tuesday, March 20, 2018; 3rd reading, passed 26-11 with Committee Substitute (1)  03.21.2018 received in House; to Rules (H); taken from Rules; posted for passage for concurrence in Senate Committee Substitute (1); House refused to concur in Senate Committee Substitute; received in Senate  Amendments:     [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB200/SCS1.pdf) - Retain original provisions with the following exceptions: Amend Part I, Operating Budget, and appropriations as follows: appropriate to General Government: 2018-2019: $1,645,080,200, 2019-2020: $1,607,666,600; appropriate to the Economic Development Cabinet: 2018-2019: $23,990,300, 2019-2020: $23,763,500; appropriate to the Department of Education: 2018-2019: $5,021,776,800, 2019-2020: $5,005,205,800; appropriate to the Education and Workforce Development Cabinet: 2018-2019: $623,091,400, 2019-2020: $622,897,700; appropriate to the Energy and Environment Cabinet: 2018-2019: $276,779,700, 2019-2020: $284,653,300; appropriate to the Finance and Administration Cabinet: 2017-2018: $2,438,400, 2018-2019: $938,980,600, 2019-2020: $970,157,600; appropriate to the Health and Family Services Cabinet: 2017-2018: $2,500,000, 2018-2019: $13,957,784,300, 2019-2020: $14,418,577,300; appropriate to the Justice and Public Safety Cabinet: 2017-2018: $8,901,800, 2018-2019: $1,268,731,900, 2019-2020: $1,296,421,200; appropriate to the Labor Cabinet: 2018-2019: $221,597,200, 2019-2020: $221,255,900; appropriate to the Personnel Cabinet: 2018-2019: $66,174,600, 2019-2020: $66,486,800; appropriate to Postsecondary Education: 2018-2019: $7,871,452,400, 2019-2020: $8,224,436,900; appropriate to the Public Protection Cabinet: 2018-2019: $123,723,400, 2019-2020: $122,273,100; appropriate to the Tourism, Arts and Heritage Cabinet: 2017-2018: $8,831,600, 2018-2019: $258,368,600, 2019-2020: $261,539,800; appropriate to the Budget Reserve Trust Fund: 2018-2019: $62,414,100, 2019-2020: $183,761,200; not included in the appropriation amounts are capital project amounts as follows: 2017-2018 $16,500,000, 2018-2019: $6,959,284,500, 2019-2020: $196,679,500; amend Part II, Capital Projects Budget; amend Part III, General Provisions; amend Part IV, State Salary/Compensation, Benefit, and Employment Policy; amend Part V, Funds Transfer; amend Part VI, General Fund Budget Reduction Plan; amend Part VII, General Fund Surplus Expenditure Plan; amend Part VIII, Road Fund Budget Reduction Plan; amend Part IX, Road Fund Surplus Expenditure Plan; amend Part X, Phase I Tobacco Settlement; amend Part XI, Executive Branch Budget Summary. | Oppose |
| SB 2 AN ACT proposing an amendment to Section 54 of the Constitution of Kentucky.  Propose amendment to Section 54 of the Constitution of Kentucky to allow the General Assembly the power to limit damages for injuries resulting in death or for injuries to persons or property, and to provide a uniform statute of limitations; provide for submission to the voters.  Sen. Ralph Alvarado (R)  <http://www.lrc.ky.gov/record/18RS/SB2.htm>  Status: 01.02.2018 Introduced in Senate  01.03.2018 to State & Local Government  03.09.2018 recommitted to State & Local Government  Amendments: [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB2/SCS1.pdf) - Retain original provisions except specify the limit applies to noneconomic damages. | Monitor |
| SB 5 AN ACT relating to pharmacy benefits in the Medicaid program.  Create a new section of KRS Chapter 205 to require the Department for Medicaid Services to directly administer all outpatient pharmacy benefits; prohibit renewal or negotiation of new contracts to provide Medicaid managed care that allow administration of outpatient benefits by any entity but the Department for Medicaid Services; reduce costs of future Medicaid managed care contracts by costs of all outpatient pharmacy benefits as they existed on January 1, 2017; allow the department to utilize managed care principles and techniques to assist with member medication adherence and cost control; require the department to establish a reasonable dispensing fee pursuant to Centers for Medicare and Medicaid Services guidelines; EFFECTIVE January 1, 2019.  Sen. Max Wise (R)  <http://www.lrc.ky.gov/record/18RS/SB5.htm>  Status: 09.25.2017 Prefiled (BR 216)  01.02.2018 Introduced in Senate  01.03.2018 to Health & Welfare  03.01.2018 3rd reading, passed 32-4 with Committee Substitute (1) floor amendment (1)  03.02.2018 received in House  03.20.2018 floor amendment (2) filed to Committee Substitute; 3rd reading, passed 97-0 with Committee Substitute, committee amendment (2-title), and floor amendment (2)  03.21.2018 received in Senate  Amendments:     [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB5/HCS1.pdf) - Delete provisions of the GA version; amend KRS 205.647 to require that a pharmacy benefit manager contracting with an MCO provide information to the Department for Medicaid that includes the total amount paid to it by the MCO, and the total amount paid to it by an MCO which was not subsequently paid to a Kentucky licensed pharmacy; require information about the average reimbursement paid by the PBM to licensed pharmacies with which it is affiliated, the average reimbursement paid to pharmacies with more than 10 locations, and the average reimbursement paid to PBMs with 10 or fewer locations; require reporting of any fees, charges, or other assessments required to be paid by a pharmacy with which it is affiliated, and any fees, charges, or other assessments required to be paid by pharmacies with 10 or fewer locations, and pharmacies with 10 or more locations; require reporting of all common ownership, shared managers, common members of boards of directors or of parent companies, subsidiary companies, or jointly held companies; require data to be for the most recent full calendar year and divided by month, exempt from Open Records Act as necessary; establish requirements for MCO contracts, including the authority of the DMS to set, create, or approve reimbursement rates, give authority to change rates at any time for any reason; require reimbursement rates to include dispensing fees which use applicable guidance by the CMS; require notification to DMS by a PBM of any proposed change of over 5% in product reimbursement rates and allow DMS to disallow changes; establish DMS' authority to regulate maximum allowable cost; require DMS to approve any contract between an MCO and a PBM; require DMS to approve any contract, change in terms of a contract, suspension, or termination of a contract between a PBM, an entity contracting on behalf of a pharmacy, or a pharmacy, or pharmacist; require DMS to approve any fee established by an MCO, PBM, or contracting entity on a pharmacy, pharmacist, or Medicaid recipient; allow DMS to promulgate administrative regulations and utilize information ascertained in setting, creating, or approving reimbursement rates; amend KRS 304.9-440 to allow the Department of Insurance to suspend, revoke, or refuse a license to a PBM for referenced violations; establish that a PBM is subject to the same penalties as an insurer; EMERGENCY.  [HCA2](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB5/HCA2.pdf)( B. Rowland ) - Make title amendment.  [HFA2](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB5/HFA2.pdf)( B. Rowland ) - Clarify the authority of DMS to approve fees implemented by an MCO, PBM, or contracting entity on a PSAO, pharmacy, or Medicaid recipient; remove the authority for DMS to conduct licensure suspension or revocation. | Monitor |
| SB 7 AN ACT establishing the Kentucky Rare Disease Advisory Council and making an appropriation therefor.  Create new sections of KRS Chapter 211 to establish the Kentucky Rare Disease Advisory Council; list members to be appointed by the Governor; state the duties of the council; require a report of council activities; create a rare disease trust fund to be administered by the Cabinet for Health and Family Services to finance the operation of the council and support rare disease research and treatment; require a report on expenditures from the fund; require the council to cease to exist on December 1, 2028, unless otherwise reestablished by the General Assembly.  Sen. Julie Raque Adams (R)  <http://www.lrc.ky.gov/record/18RS/SB7.htm>  Status: 12.01.2017 Prefiled (BR 136)  01.02.2018 Introduced in Senate  01.03.2018 to Health & Welfare  01.11.2018 3rd reading, passed 32-0 with Committee Substitutes  01.16.2018 received in House  01.18.2018 to Health & Family Services  03.20.2018 3rd reading, passed 97-0  03.21.2018 received in Senate; enrolled, signed by President of the Senate; enrolled, signed by Speaker of the House; delivered to Governor | Monitor |
| SB 20 AN ACT relating to health care providers.  Amend KRS 216C.010 to define "affidavit of merit"; create new section of Chapter 216C to require filing of medical malpractice action with an affidavit of merit; amend KRS 422.317 to regulate fees charged by a hospital or health care provider to provide a copy of medical records; create a new section of KRS Chapter 216C to limit a claimant's attorney fees in a malpractice claim against a health care provider; amend KRS 216C.030 and 311.377 to conform; create a new section of the Kentucky Rules of Evidence to prohibit the introduction of expressions of sympathy, compassion, commiseration, or a general sense of benevolence in medical malpractice actions.  Sen. Ralph Alvarado (R)  <http://www.lrc.ky.gov/record/18RS/SB20.htm>  Status: 01.03.2018 Introduced in Senate  01.04.2018 to Health & Welfare  02.28.2018  posted for passage in the Regular Orders of the Day for Thursday, March 1, 2018  03.01.2018  3rd reading, passed 20-16 with floor amendments (1) (2) and (3)  03.02.2018  received in House  03.06.2018  to Judiciary  03.09.2018 posted in committee  Amendments:    [SFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB20/SFA1.pdf)( R. Alvarado ) - Remove section relating to confidentiality of peer review panels.  [SFA2](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB20/SFA2.pdf)( R. Alvarado ) - Include exemptions from medical record copying fees for pro bono and social security disability cases.  [SFA3](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB20/SFA3.pdf)( W. Westerfield ) - Change limit on attorneys' fees to 33%. | Monitor |
| SB 112 AN ACT relating to telehealth.  Create a new section of KRS Chapter 205 to require the cabinet to regulate telehealth; set requirements for the delivery of telehealth services to Medicaid recipients; require equivalent reimbursement for telehealth services; require provision of coverage and reimbursement for telehealth; prohibit the cabinet from requiring providers to be physically present with a recipient; prohibit prior authorization, medical review, or administrative clearance if not required for the in-person service; prohibit demonstration of necessity; prohibit requiring providers to be part of a telehealth network; specify that Medicaid shall not be required to provide coverage for services that are not medically necessary or pay for transmission costs; amend KRS 205.510 to define terms; amend KRS 205.559 to add telehealth; amend 304.17A-005 to redefine "telehealth"; amend KRS 304.17A-138 to require health benefit plan coverage of telehealth to the same extent as though provided in person; prohibit health benefit plans from requiring providers to be physically present with a patient; prohibit prior authorization, medical review, or administrative clearance if not required for the in-person service; prohibit demonstration of necessity; prohibit requiring providers to be part of the telehealth network or subject to Telehealth Board oversight; specify that health benefit plans shall not be required to provide coverage for services that are not medically necessary or pay for transmission costs; amend KRS 342.315 to conform; amend KRS 18A.225 to require any fully insured health benefit plans or self-insured plans issued or renewed after July 1, 2019, to public employees to comply with KRS 304.17A-138; repeal KRS 194A.125; EFFECTIVE July 1, 2019.  Sen. R. Alvarado  <http://www.lrc.ky.gov/record/18RS/SB112.htm>  Status: 01.26.2018 Introduced in Senate  01.29.2018 to Health & Welfare  02.26.2018 taken from the Orders of the Day for Tuesday, February 27; placed in the Orders of the Day for 02.26.18; 3rd reading; floor amendment (1) withdrawn; passed 36-0 with Committee Substitute (1) & floor amendments (2) and (3)  02.27.2018 received in House  03.01.2018 to Health and Family Services (H)  03.21.2018 reported favorably, 2nd reading, to Rules as a Consent Bill; floor amendments (1) and (2) filed  Amendments: [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB112/SCS1.pdf) - Retain provisions of the bill; direct the cabinet to require specialty care to be provided by a Medicaid provider and require coordination with a patient's primary care provider; change "health benefit plan" to "Medicaid managed care organization"; require a telehealth provider to be licensed in Kentucky to receive reimbursement; add provision to allow providers to negotiate a contract for a lower rate for telehealth services compared to the same service provided in person; add provision to allow the Medicaid program to establish a different rate compared to the same service provided in person; add to definition of telehealth to clarify that telehealth includes store and forward services; EFFECTIVE JULY 1, 2019.  [SFA2](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB112/SFA2.pdf)( R. Alvarado ) - Amend definition of telehealth to clarify that the face-to-face encounter requirement is satisfied with the use of asynchronous telecommunications technologies in which the health care provider has access to the patient's or client's medical history prior to the telehealth encounter; EFFECTIVE July 1, 2019.  [SFA3](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB112/SFA3.pdf)( W. Schroder ) - Create a new section of KRS 311.710 to 311.820 to require that a physician be present in the same room with the woman when performing an abortion and prohibiting the use of telehealth in the performance of an abortion; amend KRS 311.990 to state that any person violating this provision is guilty of a Class D felony.  [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB112/HFA1.pdf)( J. Jenkins ) -Amend to add health care providers that are certified as well as licensed; EFFECTIVE 07.01.19.      [HFA2](http://www.lrc.ky.gov/recorddocuments/bill/18RS/SB112/HFA2.pdf)( J. Gooch Jr. ) - Remove reimbursement equivalency requirement for telehealth; EFFECTIVE July 1, 2019. | Monitor |
| **SB 235 AN ACT relating to surprise billing****.**  Amend KRS 304.17A-500 to define "facility" and "in-network facility;" create a new section of KRS 304.17A-500 to 304.17A-590 to require health benefit plans to cover certain nonemergency health care services provided by a nonparticipating health care provider to a covered person at an in-network facility at the in-network rate; prohibit nonparticipating health care providers from attempting to collect payment from a covered person for covered services; provide reimbursement criteria for covered services provided by a nonparticipating provider at an in-network facility; amend KRS 304.17A-254 and KRS 304.17A-527 to conform and to require insurers to require any provider contracts with in-network health facilities requires the provider to accept the in-network rate as payment in full; to prohibit balance billing the covered person beyond his or her in-network cost sharing; amend KRS 304.17A-565 to make technical corrections and to provide that the insurance code shall not preempt or supersede other rights or remedies available to covered persons under law; amend KRS 304.17A-580 to add provisions of KRS 304.17A-641 and to require nonparticipating health care providers accept the in-network reimbursement rate for emergency services provided at an in-network facility as payment in full; amend KRS 18A.225 to remove reference to repealed statute; amend KRS 304.17B-001 to conform; repeal KRS 304.17A-640, 304.17A-641, and 304.17A-649; EFFECTIVE January 1, 2019.  Sen. Tom Buford (R)  <http://www.lrc.ky.gov/record/18RS/SB235.htm>  Status: 03.01.2018 Introduced in Senate  03.05.2018 to Banking and Insurance | Monitor |
| **SB 236 AN ACT relating to surprise billing****.**  Amend KRS 304.17A-500 to define "facility" and "in-network facility"; create new sections of KRS 304.17A-500 to 304.17A-590 to require health benefit plans to cover certain nonemergency health care services provided by a nonparticipating health care provider to a covered person at an in-network facility at the in-network rate; prohibit nonparticipating health care providers from attempting to collect payment from a covered person for covered services; provide reimbursement criteria for covered services provided by a nonparticipating provider at an in-network facility; amend KRS 304.17A-254 and KRS 304.17A-527 to conform and to require insurers to require any provider contracts with in-network health facilities requires the provider to accept the in-network rate as payment in full; to prohibit balance billing the covered person beyond their in-network cost sharing; amend KRS 304.17A-565 to make technical corrections and to provide that the provisions of the insurance code shall not preempt or supersede other rights or remedies available to covered persons under law; amend KRS 304.17A-580 to add provisions of KRS 304.17A-641 and to require nonparticipating health care providers accept the in-network reimbursement rate for emergency services provided at an in-network facility as payment in full; amend KRS 18A.225 and 304.17B-001 to conform; repeal KRS 304.17A-640, 304.17A-641, and 304.17A-649; EFFECTIVE January 1, 2019.  Sen. Rick Girdler (R)  <http://www.lrc.ky.gov/record/18RS/SB236.htm>  Status: 03.01.2018 Introduced in Senate  03.05.2018 to Banking and Insurance | Monitor |
| SB 260 AN ACT relating to strengthening the controlled substances collaborative agreement between physicians and advanced practice registered nurses.  Amend KRS 314.042 to add requirements for the Collaborative Agreement for the Advanced Practice Registered Nurse's Prescriptive Authority for Controlled Substances (CAPA-CS).  Sen. Ralph Alvarado (R)  <http://www.lrc.ky.gov/record/18RS/SB260.htm>  Status: 03.01.2018 Introduced in Senate  03.05.2018 to Licensing, Occupations, & Administrative Regulations | Monitor |
| HB 10 AN ACT proposing to amend Section 29 of the Constitution of Kentucky relating to administrative regulations.  Propose to amend Section 29 of the Constitution of Kentucky to permit the General Assembly or an agency or committee it creates to review, approve, or disapprove any administrative regulation of the executive branch during or between regular sessions of the General Assembly; submit to the voters for approval or disapproval; supply ballot language.  Rep. Kenny Imes (R)  <http://www.lrc.ky.gov/record/18RS/HB10.htm>  Status: 06.27.2017 Prefiled (BR 40)  01.02.2018 Introduced in House  01.02.2018 introduced in House; to Elections, Const. Amendments & Intergovernmental Affairs  02.08.2018  returned to Rules; posted for passage in the Regular Orders of the Day for Thursday, February 8, 2018; 3rd reading, passed 68-22, Vote History <http://www.lrc.ky.gov/record/18RS/HB10/vote_history.pdf>  02.09.2018  received in Senate  02.12.2018  to State & Local Government | Monitor |
| HB 69 AN ACT relating to service delivery improvements in managed care networks.  Create new sections of KRS Chapter 205 to define terms; establish and require that the Department for Medicaid Services designate a single credentialing verification organization to verify credentials for DMS and all contracted Medicaid Managed Care Organizations; submit the credentialing organization to Government Contract Review Committee for comment; require providers to submit a single application to the credentialing organization; require notification within 5 days to the provider if application is complete; require verified packets be sent to the DMS and MCOs within 30 days; require DMS to enroll providers within 15 days and for the MCOs to determine if they will contract with the provider within 15 days; specify that for reimbursement of claims purposes the date of the submission of the credentialing application shall be the date of original enrollment and credentialing; address the written internal appeals process of MCOs; require 24/7 utilization reviews and daily staffing for claims resolution; establish grievance and appeal timeline and written appeal requirements; require reprocessing of incorrectly paid or erroneously denied claims; allow for in-person meetings for unpaid claims beyond 45 days and that individually or in the aggregate exceed $2,500; require consistency and timeliness between physical, behavioral, or other medically necessary services; establish timelines for preauthorization requests; require that substance use disorder be treated as an urgent preauthorization request; require a single nationally recognized clinical review criteria for both physical health and behavioral health services; establish monthly reporting requirements for MCOs relating to claims; require reporting between the DMS and the Department of Insurance; establish penalties for MCOs that fail to comply; prohibit automatic assignment of Medicaid enrollees to an MCO unless there is a participating acute care hospital within the distance requirements; allow for enrollees to change MCOs outside of the open enrollment if their hospital or PCP terminates participation with an MCO; amend KRS 304.17A-515 to require each managed care plan to demonstrate that it offers physically available acute care hospital services; amend KRS 304.17A-576 to require a response about credentialing within 45 instead of 90 days; amend KRS 304.17A-700 to reference Section 1 of the bill.  Rep. Ken Fleming (R)  <http://www.lrc.ky.gov/record/18RS/HB69.htm>  Status: 11.29.2017 Prefiled (BR 127)  01.02.2018 Introduced in House  02.22.2018 3rd reading, passed 94-0 with Committee Substitute, floor amendment (1)  02.23.2018 received in Senate  02.26.2018 to Health & Welfare (S)  03.19.2018 3rd reading, passed 37-0 with Committee Substitute (1) floor amendment (1)  03.20.2018 received in House; to Rules (H)  03.21.2018 taken from Rules; posted for passage for concurrence in Senate Committee Substitute and floor amendment (1); House concurred in Senate Committee Substitute and floor amendment (1); passed 91-1  Amendments:  [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB69/HCS1.pdf) - Amend original provisions to require DMS to enroll providers within 30 days and for the MCOs to determine if they will contract with the provider within 30 days; specify that for reimbursement of claims purposes the date of the submission of the credentialing application shall be the date of receipt of clean application for credentialing; address the written internal appeals process of MCOs; require telephone line for utilization reviews and staffing for claims resolution; establish grievance and appeal timeline and written appeal requirements; require reprocessing of incorrectly paid or erroneously denied claims; allow for in-person meetings for unpaid clean claims not properly paid and other unpaid claims beyond 45 days and that individually or in the aggregate exceed $2,500; conform definition of timeliness for authorization request to federal regulations; change "urgent preauthorization request" to "expedited authorization request"; modify penalties for MCOs that fail to comply; prohibit automatic assignment of Medicaid enrollees to an MCO; create a new section of KRS Chapter 205 to require Medicaid MCOs to have a utilization review plan and use review criteria selected by the Department of Insurance; amend KRS 205.522 to require Medicaid MCOs to comply with KRS 304.17A-515; amend KRS 304.17A-515 to require each managed care plan to demonstrate that it offers physically available acute care hospital services; amend KRS 304.17A-576 to require a response about credentialing within 45 instead of 90 days; amend KRS 304.17A-700 to reference Section 1 of the bill; Create a new section of Subtitle 38 of KRS Chapter 304 to require the commissioner of insurance to promulgate administrative regulations to select utilization review criteria for use by Medicaid MCOs; amend KRS 304.3-200 to allow revocation of certificate of authority of an insurer offering Medicaid services for failure to comply; amend KRS 304.38-130 to allow revocation of certificate of authority of an HMO offering Medicaid services for failure to comply; amend KRS 304.99-123 to allow the Department of Insurance to assess fines against Medicaid Managed Care organizations for failure to comply.      [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB69/HFA1.pdf)( B. Rowland ) - Amend original provisions in Section 5 to replace "utilization review determination" with "determinations of medical necessity and clinical appropriateness"; amend Section 10 to require the commissioner of the Department of Insurance to establish a process for designating medical necessity criteria for use by Medicaid managed care organizations; to establish requirements for the process; to require that the criteria designated be nationally recognized, objective and evidence based and not proprietary property of a Medicaid managed care organization; and to require the commissioner to collaborate with the Department for Medicaid Services in the designation process.  [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB69/SCS1.pdf) - Retain provisions of the GA version, except allow for an MCO to have 10 days to update its internal processing systems to include new provider contracts and an additional 15 days if notice is provided; delete a provision which allowed members to change MCOs if a hospital or primary care provider left the MCOs network outside of the open enrollment period; require a willful or frequent, repeated violations of certain provisions before the commissioner of insurance is authorized to subject a Medicaid managed care organization to penalties.  [SFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB69/SFA1.pdf)( R. Alvarado ) - Remove substance abuse services from the behavioral health services medical necessity criteria; require that the commissioner of DMS receive input from healthcare professionals and members of the Advisory Council for Medical Assistance from each category of care when selecting medical necessity criteria. | Monitor |
| HB 191 AN ACT relating to consumer protection in eye care and making an appropriation therefor.  Amend KRS 367.680 to define terms; amend KRS 367.681 to add requirements for prescriptions for visual aid glasses; amend KRS 367.683 and 367.684 to make applicable to all contact lens and visual aid glasses sellers and dispensers; amend KRS 367.685 to require fitting based on ocular health; amend KRS 367.686 and 367.687 to make applicable to visual aid glasses; create a new section of KRS 367.680 to 367.690 to set requirements for performance and operation of assessment mechanisms for contact lenses and visual aid glasses; amend KRS 367.688 and 367.690 to make applicable to visual aid glasses; increase the fine for violations to $11,000; create a new section of KRS 367.680 to 367.690 to provide that those sections may be cited as the Consumer Protection in Eye Care Act; APPROPRIATION.  <http://www.lrc.ky.gov/record/18RS/HB191.htm>  Status: 01.11.2018 Introduced in House  01.17.2018 to Health and Family Services  02.13.2018 3rd reading; floor amendment (4) defeated; passed 90-7 with Committee Substitute, committee amendment (1-title), and floor amendment (1), Vote History <http://www.lrc.ky.gov/record/18RS/HB191/vote_history.pdf>  02.14.2018 received in Senate  02.15.2018 to Health & Welfare  03.14.2018 3rd reading; floor amendments (2) (3) (4) and (5) withdrawn; passed 36-0 with Committee Substitute (1) & floor amendment (1)  03.15.2018 received in House; to Rules  03.19.2018  House concurred in Senate Committee Substitute & floor amendment (1); passed 88-0  03.20.2018 enrolled, signed by Speaker of the House; enrolled, signed by President of the Senate; delivered to Governor  Amendments:    [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB191/HCS1.pdf) - Retain provisions of the bill except to delete approval of assessment mechanism by the FDA and to add a required disclosure to be provided to a patient prior to receiving an assessment.      [HCA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB191/HCA1.pdf)( A. Wuchner ) - Make title amendment  [HFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB191/HFA1.pdf)( J. Gooch Jr. ) - Delete the requirement for a patient's address on a prescription; require a prescription and diagnostic information to include the name of license number of the optometrist, osteopath, or physician rather than the assessment mechanism; require that a patient's medical history, previous prescription or corrective eyewear, and length of time since most recent in-person exam be collected in order to conduct an eye assessment or generate a prescription with an assessment mechanism; require initial prescriptions to be in person; prohibit this section from limiting discretion to utilize telehealth service where appropriate, sharing of information, or applying beyond ocular health and eye care.  [SCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB191/SCS1.pdf) - Amend definition of "visual aid glasses"; remove visual aid glasses from KRS 367.687; clarify that an eye assessment with an assessment mechanism is prohibited in Kentucky rather than in a Kentucky residence unless requirements are met; make technical corrections.      [SFA1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB191/SFA1.pdf)( R. Alvarado ) - Amend requirement that an assessment mechanism used to conduct an eye assessment or to generate a prescription for contact lenses or visual aid glasses to a patient provide synchronous or asynchronous interaction rather than simultaneous interaction alone. | Monitor |
| **HB 444 AN ACT relating to health facilities and services****.**  Amend KRS 216.2927 to update data collection; amend KRS 216.380 to remove "primary care centers" and "rural health clinics" from the list of facilities that may be designated as a "critical access hospital;" amend KRS 216.510 and 216.535 to revise the definition of "long-term care facilities;" amend KRS 216.545 to remove outdated language; amend KRS 216.563 to remove outdated language and to remove the requirement that criteria for "Type A" and "Type B" long-term care facility violations be reviewed at least quarterly; amend KRS 216.577 to replace reference to the "Kentucky Health Facility and Health Service Certificate of Need and Licensure Board" with the "Cabinet for Health and Family Services;" amend KRS 216B.015 to revise various definitions; amend KRS 216B.020 to exempt certain outpatient health facilities and health services from the certificate of need requirement; amend KRS 216B.035 to permit records to be kept in electronic form; amend KRS 216B.040 to remove the Cabinet's ability to appoint "technical advisory committees" to assist in the administration of this chapter; amend KRS 216B.055 and 216B.105 to allow for electronic delivery of notices and licensure decisions; amend various sections to conform; repeal KRS 216.600, 216.860, 216.865, 216.900, 216.905, 216.910, 216.915, 216.930, 216B.071, 216B.120, 216B.176, and 216B.177.  Rep. Robert Benvenuti III (R)  <http://www.lrc.ky.gov/record/18RS/HB444.htm>  Status: 02.22.2018 Introduced in House  02.26.2018 to Health and Family Services  03.06.2018 3rd reading, passed 61-32  03.07.2018 received in Senate  03.08.2018 to Health & Welfare  03.21.2018 reported favorably, to Rules | Monitor |
| **HB 445 AN ACT relating to the prescriptive authority of advanced practice registered nurses****.**  Amend KRS 314.011 to eliminate the Controlled Substance Formulary Development Committee; amend KRS 314.042 to permit advanced practice registered nurses to enter into a collaborative agreement for prescriptive authority for controlled substances with a collaborating advanced practice nurse practitioner or a physician and to permit advanced practice registered nurses to prescribe controlled substances without a collaborative agreement after four years; amend KRS 314.193 to assign to the Advanced Practice Registered Nurse Council the responsibility to make recommendations to the Board of Nursing regarding limitations on prescriptions for controlled substances written by advanced practice registered nurses and to review continuing education requirements for controlled substances; amend KRS 314.196 to clarify qualifications for members of the Collaborative Prescribing Agreement Joint Advisory Committee and to clarify the committee's responsibilities.  Rep. Russell Webber (R)  <http://www.lrc.ky.gov/record/18RS/HB445.htm>  Status: 02.22.2018 Introduced in House  02.26.2018 to Licensing, Occupations, & Admin Regs  03.16.2018 taken from Licensing, Occupations, & Admin Regs (H); 1st reading; returned to Licensing, Occupations, & Admin Regs | Monitor |
| **HB 463 AN ACT relating to pharmacy benefits****.**  Create a new section of Subtitle 17A of KRS Chapter 304 to define cost sharing; prohibit an insurer, pharmacy benefit manager, or other administrator from requiring payment for prescription drugs in excess of certain amounts; prohibit an insurer, pharmacy benefit manager, or other administrator from imposing a penalty on a pharmacist or pharmacy for complying as required; prohibit an insurer, pharmacy benefit manager, or other administrator from prohibiting a pharmacist or pharmacy from discussing information relating to cost sharing or selling a more affordable alternative to the insured; EFFECTIVE January 1, 2019.  Rep. Michael Meredith (R)  <http://www.lrc.ky.gov/record/18RS/HB463.htm>  Status: 02.23.2018 Introduced in House  02.26.2018 to Banking & Insurance (H); posted in committee  03.07.2018 3rd reading, passed 92-0 with Committee Substitute  03.08.2018 received in Senate  03.09.2018 to Banking & Insurance | Monitor |
| **HB 497 AN ACT relating to physician assistants****.**  Amend KRS 202A.011 to include physician assistants in the definition of "qualified mental health professional."  Rep. Daniel Elliott (R)  <http://www.lrc.ky.gov/record/18RS/HB497.htm>  Status: 02.26.2018 Introduced in House  02.28.2018 to Health and Family Services  03.16.2018 2nd reading, to Rules; posted for passage in the Consent Orders of the Day for 03.16.18  03.19.2018 received in Senate  03.20.2018 to Health & Welfare  [HCS1](http://www.lrc.ky.gov/recorddocuments/bill/18RS/HB497/HCS1.pdf) - Delete original provisions; amend KRS 202A.011 to include physician assistants in the definition of "qualified mental health professional" and to establish the educational and experience requirements for a physician assistant to become a qualified mental health professional; amend KRS 600.020 to include physician assistants in the definition of "qualified mental health professional" and to establish the educational and experience requirements for a physician assistant to become a qualified mental health professional. | Monitor |
| **HB 576 AN ACT relating to health insurance****.**  Amend KRS 304.17A-580 to prohibit an insurer from denying coverage for emergency services in a concurrent or retrospective review based on the final diagnosis of the insured; establish time frame for prior authorization of poststabilization treatment; allow for a hospital providing emergency services to be paid at a negotiated rate; repeal KRS 304.17A-640, 304.17A-641, 304.17A-649.  Rep. Sannie Overly (D)  Rep. Kelly Flood (D)  <http://www.lrc.ky.gov/record/18RS/HB576.htm>  Status: 02.27.2018 Introduced in House  03.01.2018 to Banking & Insurance | Monitor |

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