

ANDREW G. BESHEAR  
GOVERNOR

DEPARTMENT OF VETERANS AFFAIRS

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WHITNEY P. ALLEN, JR.  
LIEUTENANT COLONEL (RET)  
COMMISSIONER

March 26, 2025

Ms. Emily Caudill, Regulations Compiler  
Legislative Research Commission  
083, Capitol Annex  
702 Capitol Avenue  
Frankfort, Kentucky 40601

**Re: 17 KAR 1:030. Nurse Loan Repayment Program.**

Dear Ms. Caudill:

After consideration of the issues raised by 17 KAR 1:030, the Kentucky Department of Veterans Affairs proposes the attached amendment to 17 KAR 1:030.

Sincerely,

A handwritten signature in black ink, appearing to read "Lily Chan Patteson".

Lily Chan Patteson  
Executive Director - General Counsel  
Office of Veteran Legal Services  
Kentucky Department of Veterans Affairs  
1111 Louisville Road, Suite B  
Frankfort, KY 40601

**Suggested Amendment  
Final Version  
3/18/2025**

**OFFICE OF THE GOVERNOR  
Department of Veterans Affairs  
Office of Kentucky Veterans Centers**

**17 KAR 1:030. Nurse Loan Repayment Program.**

**Page 1**

**NECESSITY, FUNCTION, AND CONFORMITY paragraph**

**Line 11**

After "Loan Repayment Program", insert "(VANLRP)".  
Delete "(VANLRPP)".

**Page 1**

**Section 1(1)**

**Line 17**

After "(1)", hyphenate "Full time".

**Page 2**

**Section 2(4)**

**Line 16**

After "preceding the application", insert " ".  
Delete "; and".



**Andy Beshear**  
GOVERNOR

**COMMONWEALTH OF KENTUCKY  
BOARD OF OPTOMETRIC EXAMINERS**

100 Consumer Lane  
Frankfort, Kentucky 40601  
(502) 234-2114

**Joe Ellis, OD**  
PRESIDENT

**Christi LeMay**  
EXECUTIVE DIRECTOR

April 1, 2025

Senator Stephen West  
Representative Derek Lewis  
083 Capitol Annex  
703 Capitol Avenue  
Frankfort, KY 40601

Dear Co-Chairs,

After consideration of the issues raised by LRC staff in 201 KAR 5:010 the Kentucky Board of Optometric Examiners proposes the following attached suggested substitute to this ordinary regulation.

Sincerely,

A handwritten signature in blue ink that reads "Christi LeMay".

Christi LeMay  
Executive Director

**SUGGESTED SUBSTITUTE**  
**Draft Version: 3/19/2025, 8:30 AM**

**BOARDS AND COMMISSIONS**  
**Board of Optometric Examiners**

**201 KAR 5:010. Application for licensure; endorsement.**

RELATES TO: KRS 218A.205(3)(g), 320.220, 320.250, 320.270, **320.280**

STATUTORY AUTHORITY: KRS 218A.205(3)(g), 320.240(7), 320.270(4)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 320.220(1) requires all persons who practice optometry in this state to be licensed by the Kentucky Board of Optometric Examiners. KRS 320.250 establishes criteria for an applicant to apply for a license. KRS 320.270 grants the board the discretion to admit to practice in Kentucky persons licensed to practice optometry in other states. KRS 218A.205(3)(g) requires fingerprint-supported criminal record checks and queries to the National Practitioner Data Bank on applicants. This administrative regulation prescribes the procedures to be followed in making application to the board for a license.

Section 1.

(1) A person **applying[wishing to apply]** for a license to practice optometry shall submit to the board, within fifteen (15) days of board review~~[, the following items]:~~

- (a) A completed Application for License to Practice Optometry;
- (b) **A** birth certificate;
- (c) A certified copy of college transcripts received directly from the registrar's office;
- (d) A certified copy of optometry school **transcripts** ~~[transcripts]~~ received directly from the registrar's office;
- (e) National Board **of Examiners in Optometry, "NBEO", results. The Optometry Examining Board of Canada, "OEBC", [or Canadian OBEO]** written examination **results may be submitted** in lieu of **Part 1 of the NBEO results;**
- (f) Therapeutic Management of Ocular Disease, "TMOD" results;
- (g) Two (2) letters of recommendation, one (1) of which shall be from a licensed optometrist;
- (h) Proof of successful completion of State Law Exam results;
- (i) A ~~[passport-sized,]~~ recent photograph of head and shoulders, front view;
- (j) **Payment** ~~[A money order or cashier's check payable to the Kentucky State Treasurer]~~ in the amount of \$500 **representing the non-refundable application fee;** and
- (k) **Payment** ~~[A money order or cashier's check]~~ in the amount of twenty-five (25) dollars ~~[made payable to the Kentucky State Treasurer]~~ for the purpose of submitting a query on the applicant to the National Practitioner Data Bank of the United States Department of Health and Human Services.

(2)(a) Prior to approval for examination, the board shall **review** ~~[receive]~~ and consider:

- 1. A national and state, fingerprint-supported criminal record check conducted by the:
  - a. Federal Bureau of Investigation; or
  - b. Kentucky State Police; and
- 2. A query for any relevant data from the National Practitioner Data Bank of the U.S. Department of Health and Human Services.

(b) Both of the items required to be furnished by this subsection shall be less than sixty (60) days old when reviewed by the board.



Section 2.

(1) A person ~~applying[wishing to apply]~~ for a license to practice optometry by endorsement shall submit to the board, within fifteen (15) days of board review ~~[, the following items]:~~

- (a) A completed Application for License by Endorsement to Practice Optometry;
- (b) Verification that the applicant has been licensed in optometry and in active practice the past five (5) years;
- (c) Information regarding any resolved, pending, or unresolved board action or malpractice suit in any state or territory;
- (d) A certified copy of college transcripts received directly from the registrar's office;
- (e) A certified copy of optometry school transcripts received directly from the registrar's office;
- (f) A certificate of good standing from the board where the applicant is currently licensed and from all state boards where the applicant has held a license in the past;
- (g) A copy of the credential that proves the applicant is therapeutically licensed;
- (h) Two (2) letters of recommendation, one (1) of which shall be from a licensed optometrist;
- (i) Proof of successful completion of Kentucky State Law Exam;
- (j) A ~~[passport-sized,]~~ recent photograph of head and shoulders, front view;
- (k) ~~Payment[A certified check or money order made payable to the Kentucky State Treasurer]~~ in the amount of \$700 ~~representing the non-refundable application fee;~~
- (l) A notarized statement explaining why the applicant wishes to be admitted to practice in Kentucky; and
- (m) ~~Payment[A money order or cashier's check]~~ in the amount of twenty-five (25) dollars ~~[made payable to the Kentucky State Treasurer]~~ for the purpose of submitting a query on the applicant to the National Practitioner Data Bank of the United States Department of Health and Human Services to retrieve any relevant data on the applicant.

(2)(a) Prior to approval for licensure, the board shall receive and consider:

- 1. A national and state, fingerprint-supported criminal record check conducted by the:
  - a. Federal Bureau of Investigation; or
  - b. Kentucky State Police; and
- 2. A query for any relevant data from the National Practitioner Data Bank of the U.S. Department of Health and Human Services.

(b) Both of the items required to be furnished by this subsection shall be less than sixty (60) days old when reviewed by the board.

Section 3.

(1) A person whose license has been revoked pursuant to KRS 320.280(3) may apply for reinstatement of his or her license.

(2) Except as provided in subsection (3) of this section, a person applying for reinstatement shall submit to the board:

- (a) Evidence of completion of the continuing education requirements established in 201 KAR 5:030; and
- (b) Payment of the reinstatement~~[annual renewal]~~ fee established in 201 KAR 5:005~~[5:090]~~, Section 7~~[2]~~.

(3) To apply for reinstatement, an optometrist whose license has been revoked pursuant to KRS 320.280(3) shall submit to the board:

- (a) Evidence of completion of the annual continuing education requirement for each year, or any portion of a year, that the license was not renewed up~~[up]~~ to a maximum of sixty (60) hours; and

(b) Payment of the **reinstatement[renewal]** fee established in 201 KAR **5:005[5:090]**, Section **7[2]**[of \$200] for each year, or any portion of a year, that the license was not renewed.

Section 4. Incorporation by Reference.

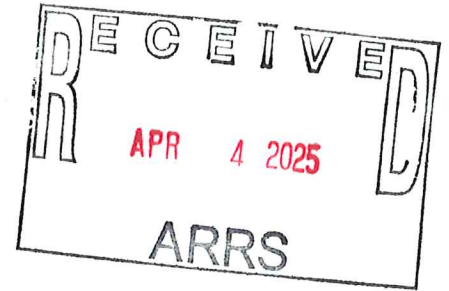
(1) The following material is incorporated by reference:

(a) "Application for License to Practice Optometry", June 2024[August 2012]; and

(b) "Application for License by Endorsement to Practice Optometry", June 2024[August 2012].

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Optometric Examiners, **100 Consumer Lane, Frankfort, Kentucky 40601[2365 Harrodsburg Road, Suite A240, Lexington, Kentucky 40504-3333]**[2624 Research Park Drive, Suite 305, Lexington, Kentucky 40511], phone **(502) 234-2114[(859) 246-2744]**, Monday through Friday, 9:00 a.m. to 4:30 p.m.[8:30 a.m. to 5 p.m.]. **This material may also be viewed on the board's Web site at: <https://optometry.ky.gov/applicants/Pages/default.aspx>.**

CONTACT PERSON: Christi LeMay, Executive Director, 2365 Harrodsburg Road, Lexington Kentucky 40504, (859) 246-2744, email [christi.lemay@ky.gov](mailto:christi.lemay@ky.gov).



April 2, 2025

Senator Stephen West, Co-Chair  
Representative Derek Lewis, Co-Chair  
c/o Emily Caudill, Regulations Compiler  
Administrative Regulation Review Subcommittee  
Legislative Research Commission  
029, Capitol Annex  
Frankfort, KY 40601

**Re: 202 KAR 7:410**

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 202 KAR 7:410, the Kentucky Board of Emergency Medical Services proposes the attached amendment to 202 KAR 7:410.

Sincerely,

John R. Holder, Chair  
Kentucky Board of Emergency Medical  
Services  
500 Mero Street, 5th Floor 5SE32  
Frankfort, KY 40601

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**Kentucky Board of Emergency Medical Services**  
500 Mero Street, 5<sup>th</sup> Floor 5SE32, Frankfort, KY 40601  
KBEMS.ky.gov  
1 (866)-97KBEMS



**SUGGESTED SUBSTITUTE**  
**Final Version: 4/4/2025, 12:05 PM**

**Kentucky Board of Emergency Medical Services**  
**(Amendment)**

**202 KAR 7:410. Advanced Practice Paramedics.**

RELATES TO: KRS 12.355, ~~[72.020, 311A.025, ]~~311A.050-311A.100, ~~[311A.120-311A.135, 311A.142, ]~~311A.170~~[, 311A.185, 311A.190, 446.400]~~

STATUTORY AUTHORITY: KRS 311A.020, 311A.025, 311A.120, 311A.125, 311A.135, 311A.170~~(3)~~

NECESSITY, FUNCTION, AND CONFORMITY: KRS 311A.170(3)~~[311A.025(2)]~~ requires the Kentucky Board of Emergency Medical Services to promulgate administrative regulations establishing the educational requirements, testing requirements, credentialing, and licensure requirements of advanced practice paramedics. This administrative regulation establishes those requirements.

Section 1. Licensure of Advanced Practice Paramedics. In accordance with this administrative regulation, the board office shall issue an advanced practice paramedic license to an individual certified as a community paramedic, ~~or~~ wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic.

Section 2. Certification of Community Paramedics.

~~[(1)] [An individual shall be eligible to enroll as a student in a community paramedic education and training program if the applicant:]~~

~~[(a)] [Holds a current unrestricted license as a paramedic in Kentucky or holds a current unrestricted certification with the NREMT as a Nationally Registered Paramedic (NRP);]~~

~~[(b)] [Is not currently subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification; and]~~

~~[(c)] [Meets all additional requirements established by the EMS-TEI.]~~

~~(1)~~~~[(2)]~~ Individuals desiring initial board certification as a community paramedic shall:

(a) Hold a current unrestricted license as a paramedic in Kentucky;

(b) Not currently be subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification;

~~[(b)] [Successfully complete all EMS-TEI requirements for the community paramedic education and training program, which shall include all requirements of the International Board of Special Certification (IBSC) to test for IBSC certification as a community paramedic (CP-C);]~~

(c) Submit a course completion certification from an education and training program **that[which]** minimally meets the International Board of Specialty Certification (IBSC) Community Paramedicine Content Outline topic areas;

(d)~~[(e)]~~ Submit proof of current~~[Obtain]~~ certification as a community paramedic (CP-C) by the International Board of Specialty Certification (IBSC);

~~[(d)] [If operating under a board-approved community paramedic pilot program, obtain IBSC certification as a community paramedic by no later than January 1, 2026; and]~~

(e) Submit a completed **Initial** Advanced Practice Paramedic~~[Community Paramedic]~~ **License**~~[Certification]~~ Application in KEMSIS; and~~[-]~~

(f) Pay the fee **required by**~~[pursuant to]~~ 202 KAR 7:030.

~~(2)~~~~[(3)]~~ To be eligible for renewal of a community paramedic certification, a community paramedic shall:

- (a) Meet the requirements for paramedic licensure renewal in accordance with 202 KAR 7:401;
- (b) Submit a completed **EMS Clinician**~~[Advanced Practice Paramedic]~~~~[Community Paramedic Certification]~~ Renewal~~[Application]~~ in KEMSIS;
- (c) Pay the renewal fee **required by**~~[pursuant to]~~ 202 KAR 7:030, **Section 3**; and
- (d) ~~Maintain~~~~[Submit to the board]~~ written evidence of:

- 1. Current certification by the International Board of Specialty Certification (IBSC) as a community paramedic (CP-C); or
- 2. At least fifty (50) hours of continuing education in the International Board of Specialty Certification (IBSC) Community Paramedic Content Outline topic areas.**

~~[2.] [At least fifteen (15) hours of continuing education on the following subject areas unique to community paramedicine:]~~

- ~~[a.] [Community-based needs;]~~
- ~~[b.] [Interdisciplinary collaboration;]~~
- ~~[c.] [Patient-centric care;]~~
- ~~[d.] [Wellness and safety;]~~
- ~~[e.] [Preventative care and education for patient or client and caregiver; or]~~
- ~~[f.] [Ethical and legal consideration preventative care and patient education.]~~

~~(3)~~**(4)** An application for renewal of community paramedic certification shall be denied if:

- (a) Prior to the certification expiration date, the applicant has not met the requirements of this section; or
- (b) The applicant has been subjected to disciplinary action that prevents certification renewal at the time of application.

~~(5)~~ ~~[An individual seeking reciprocity as a community paramedic shall:]~~

- ~~[(a)] [Meet the requirements for paramedic reciprocity in accordance with 202 KAR 7:401;]~~
- ~~[(b)] [Have a current certification from the International Board of Specialty Certification (IBSC) as a community paramedic (CP-C); and]~~
- ~~[(c)] [Submit to the board a completed Advanced Practice Paramedic Community Paramedic Certification Application in KEMSIS.]~~

### Section 3. Certification of Wilderness Paramedics.

~~(1)~~ ~~[An individual shall be eligible to enroll as a student in a wilderness paramedic education and training program if the applicant:]~~

- ~~[(a)] [Holds a current unrestricted license as a paramedic in Kentucky or holds a current unrestricted certification with the NREMT as a Nationally Registered Paramedic (NRP);]~~
- ~~[(b)] [Is not currently subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification; and]~~
- ~~[(c)] [Meets all additional requirements established by the EMS-TEI.]~~

**(1)**~~(2)~~ Individuals desiring initial board certification as a wilderness paramedic shall:

- (a) Hold a current unrestricted license as a paramedic in Kentucky;
- (b) Not currently be subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification;**
- ~~[(b)] [Successfully complete all EMS-TEI requirements for the wilderness paramedic education and training program, which shall include all requirements of the International Board of Specialty Certification (IBSC) to test for IBSC certification as a wilderness paramedic (WC-P), or, successfully complete a wilderness medicine upgrade course equivalent to Wilderness First Responder or higher from an organization approved by the board that provides certification in wilderness medicine;]~~



(c) Submit a course completion certificate from an education and training program **that/which** minimally meets the International Board of Specialty Certification (IBSC) Wilderness Paramedic Content Outline topic areas;

(d)[(e)] Submit proof of **current**[Obtain a] certification as a wilderness paramedic (WP-C) from the International Board of Specialty Certification (IBSC);[and]

(e)[(d)] Submit a completed **Initial** Advanced Practice Paramedic[~~Wilderness Paramedic~~] **License**[**Certification**] Application in KEMSIS; and[.]

(f) Pay the fee **required by/pursuant to** 202 KAR 7:030.

(2)[(3)] To be eligible for renewal of a wilderness paramedic certification, a wilderness paramedic shall:

(a) Meet the requirements for paramedic licensure renewal in accordance with 202 KAR 7:401;

(b) Submit a completed **EMS Clinician**[**Advanced Practice Paramedic**][~~Wilderness Paramedic Certification~~] Renewal[~~Application~~] in KEMSIS;

(c) Pay the renewal fee **required by/pursuant to** 202 KAR 7:030, **Section 3**; and

(d) Maintain[Submit to the board] written evidence of:

1. Current[~~current~~] certification by the International Board of Specialty Certification (IBSC) as a wilderness paramedic (WP-C); or

2. At least fifty (50) hours of continuing education in the International Board of Specialty Certification (IBSC) Wilderness Paramedic Content Outline topic areas.

(3)[(4)] An application for renewal of a wilderness paramedic certification shall be denied if:

(a) Prior to the certification expiration date, the applicant has not met the requirements of this section; or

(b) The applicant has been subjected to disciplinary action that prevents certification renewal at the time of application.

[(5)] [An individual seeking reciprocity as a wilderness paramedic shall:]

[(a)] [Meet the requirements for paramedic reciprocity in accordance with 202 KAR 7:401;]

[(b)] [Have a current certification from the International Board of Specialty Certification (IBSC) as a wilderness paramedic (WP-C);]

[(c)] [Satisfy the requirements of subsection (2) of this section; and]

[(d)] [Submit to the board a completed Advanced Practice Paramedic Wilderness Paramedic Certification Application in KEMSIS.]

#### Section 4. Certification of Critical Care Paramedics.

(1) Individuals desiring initial board certification as a critical care paramedic shall:

(a) Hold a current unrestricted license as a paramedic in Kentucky;

(b) Not currently be subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification;

(c) Submit a course completion certificate from an education and training program **that/which** minimally meets the International Board of Specialty Certification (IBSC) Critical Care Paramedic Content Outline topic areas;

(d) Submit proof of current certification as a critical care paramedic (CCP-C) from the International Board of Specialty Certification (IBSC);

(e) Submit a completed **Initial** Advanced Practice Paramedic **License**[**Certification**] Application in KEMSIS; and

(f) Pay the fee **required by/pursuant to** 202 KAR 7:030.

(2) To be eligible for renewal of a critical care paramedic certification, a critical care paramedic shall:

(a) Meet the requirements for paramedic licensure renewal in accordance with 202 KAR 7:401;

(b) Submit a completed **EMS Clinician**~~[Advanced Practice Paramedic]~~ Renewal/~~Application~~ in KEMSIS;

(c) Pay the renewal fee **required by**~~[pursuant to]~~ 202 KAR 7:030, **Section 3**; and

(d) Maintain written evidence of:

1. Current certification by the International Board of Specialty Certification (IBSC) as a critical care paramedic (CCP-C); or

2. At least fifty (50) hours of continuing education in the International Board of Specialty Certification (IBSC) Critical Care Paramedic Content Outline topic areas.

(3) An application for renewal of a critical care paramedic certification shall be denied if:

(a) Prior to the certification expiration date, the applicant has not met the requirements of this section;  
or

(b) The applicant has been subjected to disciplinary action that prevents certification at the time of application.

#### Section 5. Certification of Flight Paramedics.

(1) Individuals desiring initial board certification as a flight paramedic shall:

(a) Hold a current unrestricted license as a paramedic in Kentucky;

(b) Not currently be subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification;

(c) Submit a course completion certificate from an education and training program **that/which** minimally meets the International Board of Specialty Certification (IBSC) Flight Paramedic Content Outline topic areas;

(d) Submit proof of current certification as a flight paramedic (FP-C) from the International Board of Specialty Certification (IBSC);

(e) Submit a completed **Initial** Advanced Practice Paramedic **License**~~[Certification]~~ Application in KEMSIS; and

(f) Pay the fee **required by**~~[pursuant to]~~ 202 KAR 7:030.

(2) To be eligible for renewal of a flight paramedic certification, a flight paramedic shall:

(a) Meet the requirements for paramedic licensure renewal in accordance with 202 KAR 7:401;

(b) Submit a completed **EMS Clinician**~~[Advanced Practice Paramedic]~~ Renewal/~~Application~~ in KEMSIS;

(c) Pay the renewal fee **required by**~~[pursuant to]~~ 202 KAR 7:030, **Section 3**; and

(d) Maintain written evidence of:

1. Current certification by the International Board of Specialty Certification (IBSC) as a flight paramedic (FP-C); or

2. At least fifty (50) hours of continuing education in the International Board of Specialty Certification (IBSC) Flight Paramedic Content Outline topic areas.

(3) An applicant for renewal of a flight paramedic certification shall be denied if:

(a) Prior to the certification expiration date, the applicant has not met the requirements of this section;  
or

(b) The applicant has been subjected to disciplinary action that prevents certification renewal at the time of application.

#### Section 6. Certification of Tactical Paramedics.

(1) Individuals desiring initial board certification as a tactical paramedic shall:

(a) Hold a current unrestricted license as a paramedic in Kentucky;



- (b) Not currently be subject to disciplinary action pursuant to KRS Chapter 311A that would prevent certification;
- (c) Submit a course completion certificate from an education and training program ~~that~~**[which]** minimally meets the International Board of Specialty Certification (IBSC) Tactical Paramedic Content Outline topic areas;
- (d) Submit proof of current certification as a tactical paramedic (TP-C) from the International Board of Specialty Certification (IBSC);
- (e) Submit a completed **Initial** Advanced Practice Paramedic **License**~~[Certification]~~ Application in KEMSIS; and
- (f) Pay the fee pursuant to 202 KAR 7:030.

(2) To be eligible for renewal of a tactical paramedic certification, a tactical paramedic shall:

- (a) Meet the requirements for paramedic licensure renewal in accordance with 202 KAR 7:401;
- (b) Submit a completed **EMS Clinician**~~[Advanced Practice Paramedic]~~ Renewal~~[Application]~~ in KEMSIS;
- (c) Pay the renewal fee pursuant to 202 KAR 7:030; and
- (d) Maintain written evidence of:
  - 1. Current certification by the International Board of Specialty Certification (IBSC) as a tactical paramedic (TP-C); or
  - 2. At least fifty (50) hours of continuing education in the International Board of Specialty Certification (IBSC) Tactical Paramedic Content Outline topic areas.

(3) An application for renewal of a tactical paramedic certification shall be denied if:

- (a) Prior to the certification expiration date, the applicant has not met the requirements of this section;
- or
- (b) The applicant has been subjected to disciplinary action that prevents certification renewal at the time of application.

#### Section 7. Transition for Currently Certified Providers.

- (1) ~~[Notwithstanding sections 2(1)(c), 3(1)(c), 4(1)(c), 5(1)(c), or 6(1)(c) of this administrative regulation,]~~Proof of a successful course completion certification shall not be required for initial licensure and certification if:
  - (a) At the time of application, the applicant is certified as a community paramedic, wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic by the International Board of Specialty Certification (IBSC); and
  - (b) The application is submitted on or before September 30, 2026.
- (2) ~~[Notwithstanding section 2(1)(d) of this administrative regulation,]~~Proof of current certification as a community paramedic (CP-C) by the International Board of Specialty Certification (IBSC) shall not be required for initial licensure and certification as a community paramedic if:
  - (a) At the time of application, the applicant is operating under a board-approved community paramedic pilot program; and
  - (b) The application is submitted on or before September 30, 2026.
- (3) ~~[Notwithstanding section 4(1)(d) of this administrative regulation,]~~Proof of current certification as a critical care paramedic (CCP-C) from the International Board of Specialty Certification (IBSC) shall not be required for initial licensure and certification as a critical care paramedic if:
  - (a) At the time of application, the applicant has a board-issued critical care paramedic endorsement; and
  - (b) The application is submitted on or before September 30, 2026.

Section 8. Advanced Practice Paramedic License and Certification Renewal for Active-Duty Members of the Armed Forces. A licensed advanced practice paramedic ~~is~~ in good standing, who is a member of the Armed Forces of the United States and called to active duty by presidential order pursuant to 10 U.S.C. 121 and 12304, shall have his or her advanced practice paramedic license and certification renewed in accordance with KRS 12.355 upon submission of the Military Extension Application.

Section 9. Certification and Continuing Education Validation and Audits.

- (1) All continuing education for advanced practice paramedics shall be validated by entities authorized to conduct continuing education pursuant to 202 KAR 7:601.
- (2) The board office may audit an advanced practice paramedic's continuing education record and IBSC certification. **Upon request**, the advanced practice paramedic shall submit the **requested** documentation ~~[requested]~~ within ten (10) business days of receipt of the board office's request.
- (3) If documentation of IBSC certification or continuing education hours **required by** ~~consistent with~~ this administrative regulation are not received using the board-approved submission process within ten (10) business days **of/upon** receipt of the board's request, the advanced practice paramedic license and certification shall be deemed to have lapsed and the individual shall reapply for licensure and certification through reinstatement, if eligible.
- (4) The ten (10) business days for submission shall not apply to investigations **conducted** pursuant to KRS Chapter 311A.
- (5) Each advanced practice paramedic shall maintain documentation of all IBSC certifications and all continuing education for three (3) years from the date of completion.

Section 10. ~~Section 4.~~ Expiration of Advanced Practice Paramedic License and Certification.

- (1) A board-issued advanced practice paramedic license and a board-issued certification as a community paramedic, ~~or~~ wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic shall lapse or expire upon lapse or expiration of the individual's board-issued paramedic license pursuant to KRS 311A.095.
- (2) An individual whose board-issued advanced practice paramedic license and board-issued certification as a community paramedic, ~~or~~ wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic has lapsed or expired shall cease providing the specialty care authorized by the lapsed or expired license and certification.

Section 11. ~~Section 5.~~ Scope of Practice.

- (1) An advanced practice paramedic may perform ~~shall provide~~ care consistent with the skills, procedures, and techniques established in the current board-approved EMS Advanced Practice Paramedic Scope of Practice document.
- (2) Assessment of techniques, skills, and procedures of an advanced practice paramedic shall be subject to the board-approved agency medical protocols adopted by the advanced practice paramedic's agency.
- (3) Each agency that adopts skills, procedures, and techniques established in the current board-approved EMS Advanced Practice Paramedic Scope of Practice document shall implement and maintain a policy requiring annual clinical competency assessments for employees licensed as advanced practice paramedics.

Section 12. ~~Section 6.~~ Exemptions to this Administrative Regulation. The advanced practice paramedic licensure and certification requirements established by this administrative regulation shall not apply to ~~is~~ United States military members, National Guard personnel, or employees of the United States government if the individual provides services:



- (1) On land owned by the United States government;
- (2) In facilities owned by the United States government;
- (3) In the performance of official duties under federal law; or
- (4) As part of assistance for a mass casualty or disaster incident pursuant to federal law or an official state assistance request.

Section 13.~~[Section 7.]~~ Public Notice of Negative Action. The board office shall cause to be published on the board's Web site the name of an advanced practice paramedic who:

- (1) Is fined;
- (2) Is placed on probationary status;
- (3) Is placed on restricted status;
- (4) Is suspended; or
- (5) Has had their license or certification revoked.

Section 14.~~[Section 8.]~~ Surrender of Advanced Practice Paramedic License and Certification.

- (1) An advanced practice paramedic surrendering his or her license as an advanced practice paramedic and certification as a community paramedic,~~[or]~~ wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic shall:
  - (a) Submit~~[submit]~~ a completed ~~[Advanced Practice Paramedic]~~ License/~~[and]~~ Certification Surrender~~[Application]~~ in KEMSIS; and~~[-]~~
  - (b) Pay the fee pursuant to 202 KAR 7:030.
- (2) Upon surrendering an advanced practice paramedic license and applicable certification, the surrendering individual shall immediately give notice to his or her agency's chief operations or service director.

Section 15. Reinstatement of Advanced Practice Paramedic License and Certification.

- (1) An advanced practice paramedic whose license and certification has lapsed or expired may reinstate his or her advanced practice paramedic license and certification by submitting to the board:
  - (a) A completed ~~[Advanced Practice Paramedic License and Certification]~~ Reinstatement Certification/License Application in KEMSIS;
  - (b) The reinstatement fee pursuant to 202 KAR 7:030, **Section 4**;
  - (c) Proof of current unrestricted license as a paramedic in Kentucky;
  - (d) Proof of previous licensure as an advanced practice paramedic in Kentucky; and
  - (e) Proof of current IBSC certification as a community paramedic, wilderness paramedic, critical care paramedic, flight paramedic, or tactical paramedic.
- (2) The applicant for reinstatement shall undergo a background check pursuant to KRS 311A.100, which shall be:
  - (a) Statewide in scope for an applicant with a current license or certification in Kentucky;
  - (b) Less than six (6) months old when the applicant submits to the board all requirements for certification; and
  - (c) Provided by a vendor approved by the board.
- (3) The applicant for reinstatement shall bear the burden of proof of previous licensure and certification in Kentucky if previous certification or licensure is in dispute.
- (4) An applicant who is ineligible for certification pursuant to KRS 311A.050 through 311A.090 shall be ineligible for reinstatement.

Section 16.~~[Section 9.]~~ Incorporation by Reference.



(1) The following material is incorporated by reference:

- (a) "Initial Advanced Practice Paramedic ~~License~~[Certification] Application", (12/2024)[, in KEMSIS, ~~http://kemsis.ky.gov~~];
- (b) "~~Reinstatement~~[Advanced Practice Paramedic License and Certification/~~License~~[Reinstatement] Application", (12/2024)[, in KEMSIS, ~~http://kemsis.ky.gov~~];
- (c) "~~[Advanced Practice Paramedic ]License/[ and ]Certification Surrender[ Application]~~", (12/2024)[, in KEMSIS, ~~http://kemsis.ky.gov~~];
- (d) "~~EMS Clinician~~[Advanced Practice Paramedic] Renewal[ Application]", (04/2025)[(12/2024), in KEMSIS, ~~http://kemsis.ky.gov~~];
- [a] "Advanced Practice Paramedic – Community Paramedic Certification Application", in KEMSIS, ~~http://kemsis.ky.gov~~;
- [b] "Advanced Practice Paramedic – Community Paramedic Certification Renewal Application", in KEMSIS, ~~http://kemsis.ky.gov~~;
- [c] "Advanced Practice Paramedic License and Certification Surrender Application", in KEMSIS, ~~http://kemsis.ky.gov~~;
- [d] "Advanced Practice Paramedic – Wilderness Paramedic Certification Application", in KEMSIS, ~~http://kemsis.ky.gov~~;
- [e] "Advanced Practice Paramedic – Wilderness Paramedic Certification Renewal Application", in KEMSIS, ~~http://kemsis.ky.gov~~; and]
- (e)[f] "EMS Advanced Practice Paramedic Scope of Practice", document, (10/2024)[, ~~kbems.ky.gov~~];
- (f) "International Board of Specialty Certification (IBSC) Community Paramedicine Content Outline", (2019);
- (g) "International Board of Specialty Certification (IBSC) Critical Care Paramedic Content Outline", (2016);
- (h) "International Board of Specialty Certification (IBSC) Flight Paramedic Content Outline", (2020);
- (i) "International Board of Specialty Certification (IBSC) Tactical Paramedic Content Outline", (2016);
- (j) "International Board of Specialty Certification (IBSC) Wilderness Paramedic Content Outline", (2022).

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Office of the Kentucky Board of Emergency Medical Services, 500 Mero Street, 5th Floor 5SE32, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. **This material is also available on the agency's Web site at ~~http://kbems.ky.gov~~ or in KEMSIS at ~~http://kemsis.ky.gov~~.**

CONTACT PERSON: John K. Wood, Legal Counsel, Kentucky Board of Emergency Medical Services, 163 E. Main Street, Suite 200, Lexington, Kentucky 40507, Phone: (859) 225-4714, Fax: (859) 225-1493, Email: [administrativeregulations@wgmfirm.com](mailto:administrativeregulations@wgmfirm.com).

▼ Introduction



## Kentucky Board of Emergency Medical Services

[2025]

# EMS Clinician Renewal

Note: You cannot *downgrade* your primary certification or licensure level through this *Renewal* application.

If you intend to downgrade, you must complete the appropriate "Downgrade" application *prior* to completing the renewal process.

[Click here to contact KBEMS for level downgrade assistance.](https://kbems.ky.gov/Pages/Contact-Us.aspx) (https://kbems.ky.gov/Pages/Contact-Us.aspx)

### All renewing KBEMS-certified or licensed EMS clinicians must meet the following requirements:

- Renewal requirements listed in Kentucky Administrative Regulations, applicable to your level(s), **202 KAR 7:201 EMR; 202 KAR 7:301 EMT; 202 KAR 7:330 AEMT; 202 KAR 7:401 Paramedic; 202 KAR 7:410 Advanced Practice Paramedic; 202 KAR 7:601 Training, education, and continuing education** (<https://kbems.ky.gov/Legal/Pages/EMS-Statute-and-Regulation.aspx>).
- **KBEMS 2024 Continuing Education Renewal Requirements.** ([https://kbems.ky.gov/Certification-And-Licensure/Documents/2024\\_CE\\_Renewal\\_Requirements\\_2024-01-08.pdf](https://kbems.ky.gov/Certification-And-Licensure/Documents/2024_CE_Renewal_Requirements_2024-01-08.pdf))
  - All CE hours **must** be completed by December 31, 2024. You do not need to complete the CE requirements before submitting this renewal application.
- Complete and successfully submit a Renewal application through your KEMSIS account by December 31, 2024.
- When applicable; A KBEMS-certified or licensed EMS clinician, in good standing, who is a member of a National Guard or military reserve unit called to active duty by presidential order pursuant to 10 U.S.C. §§ 121 and 673b, shall be renewed according to KRS 12.355 upon submission of the Military Extension Application. See **military specific EMS information webpage** (<https://kbems.ky.gov/Certification-And-Licensure/Pages/Military-Specific-EMS-Information.aspx>) for application instructions.

### 2024 EMS Clinician & Educator Biennial Renewal Fees

(An additional 2.95% Portal Administration Fee will apply to all credit card payments, in addition to the fees displayed below)

EMR Renewal	\$15
EMT Renewal	\$25
AEMT Renewal	\$40
Paramedic Renewal	\$50
Advanced Practice Paramedic Renewal (Satisfies base Paramedic Renewal Fee, add \$10 for each IBSC cert, e.g., CP-C; WP-C)	\$50 + \$10 per IBSC cert
Educator Renewal (Satisfies your EMR, EMT, AEMT, Paramedic, or Advanced Practice Renewal fee, but not APP IBSC cert fees)	\$60 + \$10 per IBSC cert
Critical Care Paramedic Renewal (No additional fee)	\$0

▼ Applicant Demographics

- If your name, as shown below, *is incorrect*, you must successfully submit a "Name Change Application" (Found in the same "Applications" folder as this renewal application was found) *prior* to proceeding with this renewal application.
- You may update your email address below, if necessary.

\*First Name

Middle Name

\*Last Name

Suffix

\*Email Address

Email Address is Required

(The Kentucky Board of Emergency Medical Services will use the email address entered above to send notices concerning your certification/licensure.)

Introduction

Applicant Demographics

Legal Questions

Renewal

Applicant Declaration

▼ Legal Questions

- If the answer to any of the legal questions presented below is "**YES**", you will receive an email from the KBEMS office with directions on how to submit clarifying information about the legal issue.
- You may complete the renewal application process once the requested information is received and processed, processing normally takes 3-5 business days.
- If you have any questions about this process, please submit your questions via the **KBEMS Contact Us page** (<https://kbems.ky.gov/Pages/Contact-Us.aspx>), with "**Legal Questions/Complaints**" chosen for "Subject".

**\*1. Have you ever been convicted of a felony, pled guilty to a felony, or entered an Alford plea to a felony?**

☐ Yes ☐ No

**\*2. Have you been convicted of a misdemeanor within the last twenty-four (24) months?**

☐ Yes ☐ No

**\*3. Have you, at any time, had your certification(s), license(s), or registration(s) as a medical professional restricted, revoked, denied, or suspended in the Commonwealth of Kentucky, or another state or jurisdiction within the last twenty-four (24) months?**

☐ Yes ☐ No

**\*4. Have you, at any time, had any instructor certification restricted, revoked, denied, or suspended within the last twenty-four (24) months?**

☐ Yes ☐ No

▼
Renewal

- The KEMSIS License Management System autocompleted the Level marked below.
- If you believe that there is an error with the data displayed in this application, [contact KBEMS](https://kbems.ky.gov/Pages/Contact-Us.aspx) (<https://kbems.ky.gov/Pages/Contact-Us.aspx>) prior to proceeding with renewal.

**\*Primary EMS Certification or Licensure Level being Renewed**

	Renewal
EMR	
EMT	
Advanced EMT	
Paramedic	
Advanced Practice Paramedic	

**\*Are you renewing your Critical Care Paramedic endorsement along with your Paramedic and/or Advanced Practice Paramedic license?**

☐ Yes
☐ No

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☐ Yes
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Introduction Applicant Demographics Legal Questions Renewal Applicant Declaration

▼ Applicant Declaration

I hereby certify that the information provided on this application is complete and true. I understand that knowingly supplying false information on this application is a violation of KRS Chapter 311A and subjects me to the full range of disciplinary action described therein. I further understand that my application can be returned to me incomplete if I fail to provide all information requested on this application. ADA Notification: If you have a physical, mental, or other disability which might entitle you to receive restricted certification or licensure in education or employment you must supply medical records or documentation thereof to receive reasonable accommodation.

I affirm that I have read and understand [KRS 311A.105](http://apps.legislature.ky.gov/law/statutes/statute.aspx?id=48861) (<http://apps.legislature.ky.gov/law/statutes/statute.aspx?id=48861>) which states: "Any person as defined in [KRS 446.010](http://apps.legislature.ky.gov/law/statutes/statute.aspx?id=53285) (<http://apps.legislature.ky.gov/law/statutes/statute.aspx?id=53285>) licensed or certified by the board shall maintain a current mailing and electronic mailing address with the office of the board and immediately notify the board in writing of a change of mailing or electronic mailing address. As a condition of holding a license or certification from the board, a licensee or certificate holder is deemed to have consented to service of notice or orders of the board at the mailing address on file with the office of the board, and any notice or order of the board mailed or delivered to the mailing address on file with the board constitutes valid service of the notice or order."

I understand that KBEMS will use electronic (email) communications as the primary method to communicate with me. I understand that it is my personal responsibility to ensure that the email address on file in KEMSIS is current, accessible, and checked regularly.

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\*Signature

Username:

Password:



## Kentucky Board of Emergency Medical Services

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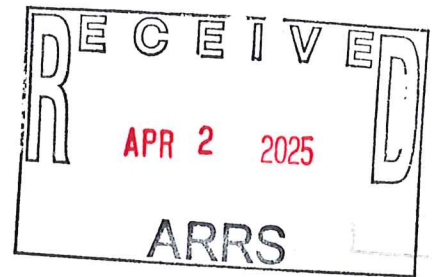
\*Signature

Username:

Password:



COMMONWEALTH OF KENTUCKY  
TRANSPORTATION CABINET  
transportation.ky.gov



Andy Beshear  
GOVERNOR

Jim Gray  
SECRETARY

Wednesday, April 2, 2025

Senator Steve West  
Representative Derek Lewis  
083, Capitol Annex  
702 Capitol Avenue  
Frankfort, Kentucky 40601

Dear Co-Chairs:

After consideration of the issues raised by 601 KAR 12:120, the Department of Vehicle Regulation proposes the attached suggested substitute to this ordinary regulation.

Sincerely,

A handwritten signature in cursive script that reads "Jesse Rowe".

Jesse Rowe, Assistant General Counsel  
Kentucky Transportation Cabinet  
Office of Legal Services  
200 Mero Street  
Frankfort, Kentucky 40601

**STAFF-SUGGESTED SUBSTITUTE – ORDINARY ONLY**

Final Version: 04/01/25 at 10:48 a.m.

**601 KAR 12:120. Visual acuity and visual field testing ~~[applicants]~~ for initial application or renewal of instruction permit, initial application or renewal of operator's license, or reinstatement.**

RELATES TO: KRS 186.412, 186.4121, 186.415, 186.416, 186.417, 186.419, 186.435, 186.442, 186.450, 186.480, **186.578, 186.579, 186.580, 186.635, Chapter 311, 320**~~[601-KAR-12:020.]~~

STATUTORY AUTHORITY: KRS 186.4101, 186.444, 186.570, 186.577

NECESSITY, FUNCTION, AND CONFORMITY: KRS 186.577 requires the Kentucky State Police to **submit**~~[test]~~ persons applying for an initial operator's license or an initial instruction permit to submit to a test of visual acuity and visual field at the time of application. **KRS 186.1577**~~[18]~~ also requires the Kentucky Transportation Cabinet, Department of Vehicle Regulation, Division of Driver Licensing, to **submit**~~[test]~~ persons applying for a renewal operator's license, a renewal instruction permit, or reinstatement to ~~[submit to]~~ a test of visual acuity and visual field at the time of application. **KRS 186.577**~~[18]~~ also requires **that** persons whose visual acuity is 20/60 or better in one (1) eye and who meet or exceed the visual field standard established by this administrative regulation with corrective lenses shall have their driving privileges restricted to mandate the use of the corrective lenses. KRS 186.577 also requires the Transportation Cabinet to promulgate administrative regulations pursuant to KRS Chapter 13A to implement the provisions of the section, including establishing visual field standards, the creation of a driver vision testing form, and establishing a credentialing process for osteopaths, physicians, and advanced practice registered nurses to conduct vision testing under the section.

Section 1. Definitions. (1) "Corrective lens" means an ophthalmic lens, whether an eyeglass, contact lens, or single lens system, that corrects the refraction error or other optically correctable deficiency of the eye.

(2) "Credentialed medical specialist" means an osteopath, physician, or advanced practice registered nurse who is credentialed by the cabinet to perform vision testing under this administrative regulation.

(3) "Field of vision" means the entire horizontal and vertical planes a person has for each eye without shifting the gaze.

(4) "Licensing action" means any action by the Transportation Cabinet involving the denial, cancellation, restriction, or issuance of a motor vehicle operator's license pursuant to KRS Chapter 186.

(5) "Medical Review Board" means the Medical Review Board established pursuant to KRS 186.444 and 186.570(1)(c).

(6) **"Visual field" is defined by KRS 186.576(13).**

~~(7)~~ "Vision specialist" means a person licensed to practice optometry as established in KRS Chapter 320 or its out-of-state equivalent, or an ophthalmologist who is a medical or osteopathic physician specializing in eye and vision care and licensed pursuant to KRS Chapter 311 or its out-of-state equivalent.

~~(7)~~~~(8)~~ "Vision testing" means the:

**(a)** Initial vision screening for visual acuity and visual field conducted by the Kentucky State Police, a credentialed medical specialist, or a vision specialist to test persons applying for an initial operator's license or an initial instruction permit, or the vision screening conducted by the Division of Driver Licensing, a credentialed medical specialist, or a vision specialist to test persons applying for a renewal operator's license, a renewal instruction permit, or reinstatement; **and**

**(b)**~~[It also means the]~~ Further examination vision testing for visual acuity and visual field conducted by a vision specialist after a failed initial vision screening.

**(8) "Visual field" is defined by KRS 186.576(13).**



(9) "Visual field standards" means the driver's horizontal field of vision ~~is[shall-be]~~ at least thirty (30) degrees to both the left and the right without interruption and their vertical field of vision ~~is[shall-be]~~ at least twenty-five (25) degrees above and below fixation without interruption.

Section 2. Procedures for Testing Applicants for Initial or Renewal Instruction Permit, Initial or Renewal License, or Reinstatement. (1) The following persons shall submit to a test of visual acuity and visual field at the time of application or renewal:

- (a) All persons applying for an initial or renewal operator's license;
  - (b) All persons applying for an initial or renewal instruction permit; and
  - (c) Any person required to complete an examination under KRS 186.635.
- (2) Vision testing under this section shall be administered to any person:
- (a) Applying for an initial operator's license, an initial instruction permit, or reinstatement of a license when vision shall be tested as required in KRS 186.480:
    - 1. Prior to the time of application under subsection (5) of this section; or
    - 2. By Kentucky State Police at the time of application;
  - (b) Applying for operator's license renewal or instruction permit renewal:
    - 1. Prior to the time of application under subsection (5) of this section; or
    - 2. By the Transportation Cabinet at the time of application; or Identified in Kentucky administrative regulations promulgated by the
  - (c) Transportation Cabinet as being required to undergo the exam required by KRS 186.480.
- (3) Visual acuity and visual field.
- (a) Persons whose visual acuity is 20/40 or better in one (1) eye and who meet or exceed the visual field standard established by the Transportation Cabinet without corrective lenses shall not have a restriction placed on their driving privileges.
  - (b) Persons whose visual acuity is 20/40 or better in one (1) eye and who meet or exceed the visual field standard established by the Transportation Cabinet with corrective lenses shall have their driving privileges restricted to mandate the use of the corrective lenses.
  - (c) Persons with a horizontal visual field in the person's better eye of at least thirty (30) degrees to the left and right side of fixation without interruption and a vertical visual field in the person's better eye of at least twenty-five (25) degrees above and below fixation without interruption shall be eligible to test for an instruction permit or operator's license or shall be eligible for an instruction permit or operator's license renewal or reinstatement.
  - (d) If a person fails to meet a 20/40 visual acuity standard or the visual field standard established by this administrative regulation in an initial screening by the Kentucky State Police, the Division of Driver Licensing, or a credentialed medical specialist, the person shall be referred to a vision specialist for further examination. If a vision specialist performs the initial screening and the person does not meet the visual standards, the vision specialist may conduct any further examination necessary to complete the ~~[TC 94-202,]~~Driver Vision Testing Certification, **TC 94-202**.
  - (e) Any further examination visual field test conducted by a vision specialist after a failed initial vision screening under this administrative regulation shall test the entire field of vision for interruption.
- (4) A person referred to a vision specialist under subsection (3)(~~d~~) of this section whose visual acuity is 20/60 or better in one (**1**) eye and who meets or exceeds the visual field standard established by this administrative regulation, shall be eligible to test for an instruction permit or operator's license or shall be eligible for operator's license renewal or reinstatement. If corrective lenses were prescribed by a vision specialist, the person's driving privileges shall be restricted to mandate the use of the corrective lenses.



(5) Vision tests administered under subsection (2)(a) of this section shall be deemed to meet the testing provisions established~~[outlined]~~ in subsection (3) or (4) of this section, if the person submits a ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202, and the form has been completed by:

(a) A vision specialist; or

(b) An osteopath, physician, or advanced practice registered nurse who is credentialed by the department to perform vision testing pursuant to KRS 186.577 and this administrative regulation.

(6) All driver vision testing forms completed under subsection (5) of this section shall:

(a) Attest that the applicant meets or exceeds the visual acuity standard and visual field standard established by KRS 186.577 and the department in this administrative regulation;

(b) Only be valid if the vision specialist or the credentialed osteopath, credentialed physician, or credentialed advanced practice registered nurse signed and completed the ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202, vision testing form less than twelve (12) months prior to the date of application or renewal;

(c) State ~~if~~~~[whether]~~ the driving privileges of the applicant shall be restricted to mandate the use of corrective lenses; and

(d) Clearly indicate that the vision testing under this section is a screening for minimum vision standards established in this section and is not a complete eye examination.~~[(e) After any examination requested pursuant to KRS 186.577 and this administrative regulation, the examining vision specialist or credentialed medical specialist shall complete and report the findings of an examination on the TC 94-202, Driver Vision Testing Certification, and shall submit it directly to the department if the person's visual acuity or visual field do not meet the standards in this administrative regulation; and~~

~~(f) If the department learns that a person applying for an initial or renewal instruction permit, initial or renewal license, or reinstatement, could have a medical condition that might affect safe driving, the department may, pursuant to 601 KAR 13:090, [601 KAR ]13:100, and this administrative regulation require the person to provide the Medical Review Board with information about the person's medical condition and may thereafter take an appropriate licensing action.]~~

(7) Any person seeking application or permit under subsection (1) of this section shall attest that he or she has submitted to and passed the visual acuity and visual field tests required under KRS 186.577 and this administrative regulation.

(8) Any person renewing an operator's license under KRS 186.416 shall be exempt from the vision testing requirements outlined in this administrative regulation.

(9) Persons who meet the requirements of KRS 186.578 and are issued operator's licenses under KRS 186.579 shall:

(a) Have their driving privileges restricted to the use of a bioptic telescopic device; and

(b) Be otherwise exempt from this section.

(10) Pursuant to KRS 186.480, the provisions of KRS 186.577 and of this administrative regulation shall not apply to an applicant who:

(a) At the time of application, holds a valid operator's license from another state, provided that state affords a reciprocal exemption to a Kentucky resident;

(b) At the time of application for a motorcycle instruction permit or motorcycle operator's license, presents evidence of successful completion of an approved rider training course under KRS 176.5062; or

(c) Is a citizen of the Commonwealth who has been serving in the United States military and has allowed his or her operator's license to expire.

(11) A credentialed medical specialist or a vision specialist shall complete the ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202, after any examination requested pursuant to KRS 186.577 and this administrative regulation and shall submit a copy of the certification of any examination failures to the Division of Driver Licensing. Unless the Division of Driver Licensing or the Kentucky State Police is conducting the initial screening at the time of application, the Kentucky State Police or the department shall require a person to submit a completed original copy of Driver Vision Testing Certification, TC 94-202, [this form] for that person to be eligible for an initial operator's license, an initial instruction permit, license renewal, permit renewal, or reinstatement.

**(12) After any examination requested pursuant to KRS 186.577 and this administrative regulation, the examining vision specialist or credentialed medical specialist shall complete and report the findings of an examination on the Driver Vision Testing Certification, TC 94-202, and shall submit it directly to the department if the person's visual acuity or visual field do not meet the standards in this administrative regulation**

**(13) If the department learns that a person applying for an initial or renewal instruction permit, initial or renewal license, or reinstatement, could have a medical condition that might affect safe driving, the department may, pursuant to 601 KAR 13:090, 13:100, and this administrative regulation, require the person to provide the Medical Review Board with information about the person's medical condition and may thereafter take an appropriate licensing action.**

Section 3. Appeal of a Denial of Initial Instruction Permit, Operator's License, Renewal, or Reinstatement for Vision Standards. (1) After any further examination by a vision specialist requested pursuant to KRS 186.577 and this administrative regulation, an applicant who is deemed ineligible for an initial instruction permit, operator's license, renewal, or reinstatement because their visual acuity or visual field do not meet the applicable standards may appeal their denial to the Division of Driver Licensing, Medical Review Board.

(2) ~~[An applicant may file.]~~ An appeal shall be made by submitting a copy of the ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202, certified by a vision specialist to the Medical Review Board within twenty (20) days of the date the further examination was completed.

Section 4. Credentialing of a Medical Specialist. (1) A licensed osteopath, physician, or advanced practice registered nurse shall become credentialed by the Department of Vehicle Regulation before they may perform the initial vision testing required under KRS 186.577 and this administrative regulation. To become credentialed, the medical professional shall submit to the department a completed ~~[TC 94-203,]~~ Medical Specialist Credentialing Certification, TC 94-203.

(2) The applicant medical specialist shall thereafter receive an approved copy of the ~~[TC 94-203,]~~ Medical Specialist Credentialing Certification, TC 94-203, from the Division of Driver Licensing credentialing them to perform the initial vision screening required under KRS 186.577 and this administrative regulation prior to completing any driver vision examination, and prior to completing a ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202.

(3) The credentialed medical professional shall include their Medical Specialist Credential certification number on any completed ~~[TC 94-202,]~~ Driver Vision Testing Certification, TC 94-202.

Section 5. Incorporated by Reference.

(1) The following material is incorporated by reference:

(a) "TC 94-202, Driver Vision Testing Certification," ~~December~~November 2024.

(b) "TC 94-203, Medical Specialist Credentialing Certification," ~~December~~November 2024.



(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Division of Driver Licensing, 2nd Floor, Transportation Cabinet Office Building, 200 Mero Street, Frankfort, Kentucky 40622, Monday through Friday, 8 a.m. to 4:30 p.m.

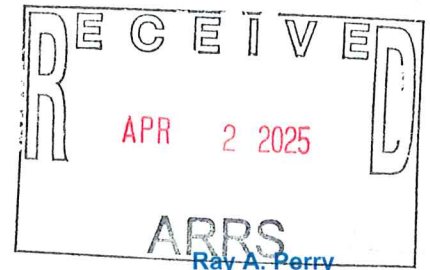
(3) This material is also available on the Transportation Cabinet's website at [https://transportation.ky.gov/Organizational-Resources/Pages/Forms-Library-\(TC-94\).aspx](https://transportation.ky.gov/Organizational-Resources/Pages/Forms-Library-(TC-94).aspx).



**Andy Beshear**  
GOVERNOR  
**Jacqueline Coleman**  
LIEUTENANT GOVERNOR

**PUBLIC PROTECTION CABINET**  
**Kentucky Department of Alcoholic Beverage Control**

500 Mero Street, 2NE33  
Frankfort, KY 40601  
Phone: (502) 564-4850  
Fax: (502) 564-1442



**Ray A. Perry**  
SECRETARY  
**Allyson Taylor**  
COMMISSIONER


April 1, 2025

Sen. Stephen West  
Rep. Derek Lewis  
Legislative Research Commission  
083, Capitol Annex  
702 Capitol Avenue  
Frankfort, Kentucky 40601

Dear Co-Chairs:

After consideration of the issues raised by 804 KAR 4:212; 4:251; 4:410; the Department of Alcoholic Beverage Control proposes the attached amendments to these ordinary regulations.

Sincerely,

  
Joshua Newton  
General Counsel



**Subcommittee Substitute**  
**PUBLIC PROTECTION CABINET**  
**Department of Alcoholic Beverage Control**  
**(As Amended at ARRS)**

**804 KAR 4:212. In-state distilled spirits supplier license.**

RELATES TO: KRS 243.030(35)

STATUTORY AUTHORITY: KRS 241.060, ~~[KRS]~~ 243.030(35)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 241.060 authorizes the board to promulgate reasonable administrative regulations governing procedures relative to the applications for and revocations of licenses, and the supervision and control of the use, manufacture, sale, transportation, storage, advertising, and trafficking of alcoholic beverages. KRS 243.030(35) authorizes the board to promulgate administrative regulations to provide for special licenses that the board finds necessary for the proper regulation and control of the traffic in distilled spirits and wine. This administrative regulation provides for the creation of an in-state distilled spirits supplier license to regulate the traffic in distilled spirits by resident owners and suppliers of distilled spirits brands.

Section 1. Definition. "In-state distilled spirits supplier" means a resident brand owner and supplier of distilled spirits products who does not operate a distillery, but through other legal means creates distilled spirits products to sell under its own brand name.

Section 2. License. (1) An in-state distilled spirits supplier license shall authorize the licensee to:

- (a) Sell distilled spirits under brands that the licensee owns, for which the licensee is the primary source of supply, or in which the licensee has an exclusive interest, at wholesale to wholesalers in the Commonwealth; and
- (b) Advertise distilled spirits brands that the licensee is authorized to sell in accordance with KRS 244.130.

(2) An in-state distilled spirits supplier license shall not authorize the licensee to purchase, transport, store, or possess distilled spirits for the purposes of sale.

Section 3. Qualifications. (1) To qualify for an in-state distilled spirits supplier license, the applicant shall:

- (a) Reside in Kentucky;
- (b) Be the owner, the primary source of supply, or have an exclusive interest in a particular brand of distilled spirits;
- (c) Obtain a federal wholesaler's basic permit;
- (d) Register with the Kentucky Department of Revenue; and
- (e) Comply with all federal and state laws and regulations.

(2) An applicant that wishes to sell 50,000 or more gallons of distilled spirits shall:

- (a) Complete the New License Application pursuant to 804 KAR 4:400 for an in-state distilled spirits supplier license **through [via]** the department's Online portal at

~~<https://abcportal.ky.gov/BELLEExternal>; and [Online In-State Distilled Spirits Supplier License Application for an in-state distilled spirits supplier license via the department's Online Portal at: <https://abc-portal.ky.gov/s/> following the Kentucky Alcoholic Beverage Control Licensing Portal Applicant/Licensee User Guide (Request or Apply) that depicts the application process through the department's online portal; and]~~

(b) Pay an annual fee equal to the amount of the fee for the out-of-state distilled spirits and wine supplier's license under KRS 243.030(30).

(3) An applicant that wishes to sell less than 50,000 gallons of distilled spirits shall:

(a) ~~Complete the New License Application pursuant to 804 KAR 4:400 for a limited in-state distilled spirits supplier **license [license] through [via]** the department's Online portal at: <https://abcportal.ky.gov/BELLEExternal>; and~~Complete the Online In-State Distilled Spirits Supplier License Application for a limited in-state distilled spirits supplier license via the department's Online Portal at: <https://abc-portal.ky.gov/s/> following the Kentucky Alcoholic Beverage Control Licensing Portal Applicant/Licensee User Guide (Request or Apply) that depicts the application process through the department's online portal; and]

(b) Pay an annual fee equal to the amount of the fee for the limited out-of-state distilled spirits and wine supplier's license under KRS 243.030(31).

Section 4. Prohibited Substantial Interests. An in-state distilled spirits supplier license applicant and in-state distilled spirits supplier licensee shall comply with 804 KAR 4:015 and ~~[for that purpose]~~ shall be considered a ~~[“]manufacturer[“]~~ as defined in 804 KAR 4:015.

Section 5. Brand Registration. In accordance with 804 KAR 4:410 and KRS 244.440, an in-state distilled spirits supplier licensee shall register with the department all brands the licensee intends to sell in Kentucky.

Section 6. Taxes. An in-state distilled spirits supplier licensee shall pay all applicable taxes for the sales of its products.

Section 7. Direct Shipper Licenses. This administrative regulation shall not be interpreted to relate to direct shipper licenses.

~~[Section 8. Incorporation by Reference. (1) The following material is incorporated by reference:~~

~~(a) "Online In-State Distilled Spirits Supplier License Application", December 2021; and~~

~~(b) "Kentucky Alcoholic Beverage Control Licensing Portal Applicant/Licensee User Guide (Request or Apply)", September 2021, depicting the application process through the department's online portal.]~~

~~[(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at Department of Alcoholic Beverage Control, 500 Mero Street, 2 NE 33, Frankfort, Kentucky 40601, Monday through Friday, 8:00 a.m. to 4:30 p.m. This material is also available on the department's Web site at [https://abc.ky.gov/newstatic\\_Info.aspx?static\\_ID=652](https://abc.ky.gov/newstatic_Info.aspx?static_ID=652).]~~

CONTACT PERSON: Joshua Newton, General Counsel, Department of Alcoholic Beverage Control, 500 Mero Street, 2 NE #226, Frankfort, Kentucky 40601, Phone: (502) 782-0770, Fax: (502) 564-

4850, email Joshua.Newton@ky.gov.

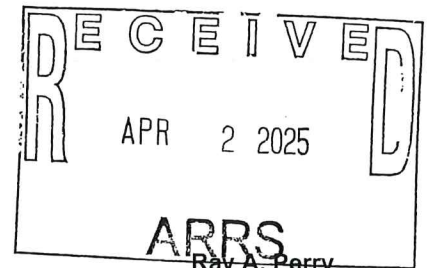




Andy Beshear  
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Jacqueline Coleman  
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SECRETARY  
Allison Taylor  
COMMISSIONER

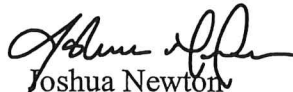
April 1, 2025

Sen. Stephen West  
Rep. Derek Lewis  
Legislative Research Commission  
083, Capitol Annex  
702 Capitol Avenue  
Frankfort, Kentucky 40601

Dear Co-Chairs:

After consideration of the issues raised by 804 KAR 4:212; 4:251; ; 4:410; , the Department of Alcoholic Beverage Control proposes the attached amendments to these ordinary regulations.

Sincerely,

  
Joshua Newton  
General Counsel

**Subcommittee Substitute**  
**PUBLIC PROTECTION CABINET**  
**Department of Alcoholic Beverage Control**  
**(As Amended at ARRS)**

**804 KAR 4:251. Special temporary licenses.**

RELATES TO: KRS 243.260

STATUTORY AUTHORITY: KRS 241.060

NECESSITY, FUNCTION, AND CONFORMITY: KRS 241.060(1) authorizes the board to promulgate reasonable administrative regulations governing procedures relative to applications for licensure. KRS 243.260 **authorizes** ~~**provides for**~~ the issuance of a special temporary license in wet territory to any regularly organized fair, exposition, racing association, or other party, when, in the opinion of the board a necessity for the license exists. This administrative regulation establishes application procedures and requirements for special temporary licenses.

Section 1. Definition. "Organized civic or community-sponsored event" means a public gathering of broad appeal where citizens are invited and encouraged to attend without significant cost of admission that is sponsored or acknowledged by the city or county government in which the event is conducted, including any convention, conference, celebration, pageant, parade, festival, fair, public display, commemoration, or other type of public assemblage conducted for the benefit and enjoyment of the general public.

Section 2. An applicant for a special temporary license pursuant to KRS 243.260 shall complete the ~~[online application process and submit their Online Special]~~ Temporary License Application electronically in accordance with 804 KAR 4:400 through [via]~~[at]~~ the department's Online~~[Kentucky Alcoholic Beverage Control]~~ portal~~[-https://abcportal.ky.gov/BELLEExternal]~~. The applicant shall complete and submit their application no later than five (5) working days prior to the date for which the license is requested.

Section 3. An applicant for a special temporary license pursuant to KRS 243.260 shall provide supplemental information as the administrator~~[board]~~ shall deem~~[find]~~ necessary for proper review of the application.

Section 4. For purposes of the issuance of special temporary licenses pursuant to KRS 243.260, ~~[if]~~in necessity, ~~[if]~~in the opinion of the board, shall limit applicants to:

- (1) A regularly organized fair, exposition, racing association, nonprofit organization, or political campaign function; or
- (2) A for-profit individual, corporation, or organization if the license will be used in conjunction with an organized civic or community-sponsored event.

Section 5. For-profit individual, corporate, or organizational applicants for a temporary license in conjunction with an organized civic or community-sponsored event shall submit written or

documentary evidence of the civic nature of the event, including promotional materials or news articles evidencing the local government's knowledge of, and support for, the event for which the applicant seeks a temporary license.

~~[Section 6. Incorporation by Reference. (1) "Online Special Temporary License Application", February 2021, is incorporated by reference.~~

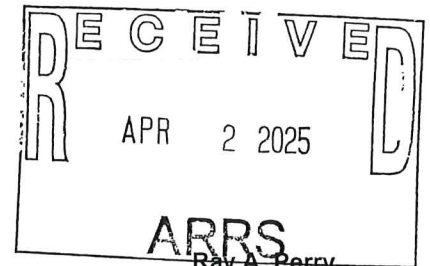
~~(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at Department of Alcoholic Beverage Control, 500 Mero Street, 2 NE 33, Frankfort, Kentucky 40601, Monday through Friday, 8:00 a.m. to 4:30 p.m.]~~

CONTACT PERSON: Joshua Newton, General Counsel, Department of Alcoholic Beverage Control  
Address: 500 Mero Street, 2 NE #226, Frankfort, Kentucky 40601, phone (502) 782-0770, fax (502) 564-4850, email Joshua.Newton@ky.gov.



Andy Beshear  
GOVERNOR  
Jacqueline Coleman  
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Ray A. Perry  
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Allyson Taylor  
COMMISSIONER


April 1, 2025

Sen. Stephen West  
Rep. Derek Lewis  
Legislative Research Commission  
083, Capitol Annex  
702 Capitol Avenue  
Frankfort, Kentucky 40601

Dear Co-Chairs:

After consideration of the issues raised by 804 KAR 4:212; 4:251; 4:410; , the  
Department of Alcoholic Beverage Control proposes the attached amendments to these ordinary  
regulations.

Sincerely,

  
Joshua Newton  
General Counsel



**Subcommittee Substitute**  
**PUBLIC PROTECTION CABINET**  
**Department of Alcoholic Beverage Control**  
**(As Amended at ARRS)**

**804 KAR 4:410. Product registration and forms.**

RELATES TO: KRS 13A.110, 241.060(1), 243.380, 243.390

STATUTORY AUTHORITY: KRS 241.060(1), 243.380, 243.390, 244.440, 244.585

NECESSITY, FUNCTION, AND CONFORMITY: KRS 241.060(1) authorizes the board to promulgate administrative regulations regarding matters over which the board has jurisdiction.

KRS 244.440 and ~~[KRS]~~ 244.585 require producers and importers to register product brands and flavors before offered for sale in the state. KRS 13A.110 ***requires [provides]*** that the board shall include, in ***administrative*** regulation, all forms which the department requires to be completed and filed. This administrative regulation prescribes product registrations and forms utilized by the department.

Section 1. Product Registration. Licensees required to register product brands and flavors shall use the Online Product Registration Portal to complete the online registration process at: <https://www.productregistrationonline.com/GetStarted/Ky#selectPermit>.

Section 2. Forms. A person shall complete and submit the following additional forms as needed or requested by the department:

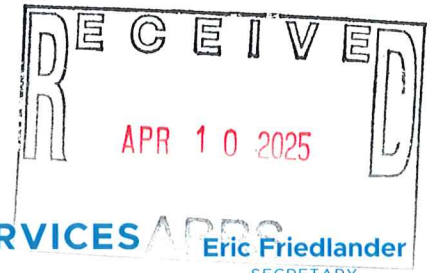
- (1) Dormancy Request Form;
- (2) Non-Transfer Affidavit Form; and
- (3) ~~[Credit/Debit Payment Form;~~
- ~~(4)]~~ Refund Request Form[;
- (5) Law Book Order Form;
- (6) Speaker Request Form;
- (7) Minors on Premises Request Form; and
- (8) Private Event Request Form].

Section 3. Incorporation by Reference. (1) The following material is incorporated by reference:

- (a) "Online Product Registration Portal", June 2017;
- (b) "Dormancy Request Form", November 2024~~[June 2017]~~;
- (c) "Non-Transfer Affidavit Form", June 2017; and
- ~~[(d) "Credit/Debit Payment Form", June 2017;]~~
- ~~[(d)]~~~~[(e)]~~ "Refund Request Form", November 2024~~[June 2017]~~~~[(e)]~~;
- ~~(f) "Law Book Order Form", June 2017;~~
- ~~(g) "Speaker Request Form", June 2017;~~
- ~~(h) "Minors on Premises Request Form", June 2017; and~~
- ~~(i) "Private Event Request Form", June 2017].~~

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Department of Alcoholic Beverage Control, 500 Mero St 2NE33, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the department's Web site: <http://www.abc.ky.gov>.

CONTACT PERSON: Joshua Newton, Title: General Counsel, Department of Alcoholic Beverage Control Address: 500 Mero Street, 2 NE #226, Frankfort, KY 40601, Phone: (502) 782-0770, Fax: (502) 564-4850, Email: [Joshua.Newton@ky.gov](mailto:Joshua.Newton@ky.gov).



Andy Beshear  
GOVERNOR

## CABINET FOR HEALTH AND FAMILY SERVICES

275 East Main Street, 5W-A  
Frankfort, Kentucky 40621  
Phone: (502) 564-7042  
Fax: (502) 564-7091

Eric Friedlander  
SECRETARY

April 10, 2025

Senator Stephen West, Co-Chair  
Representative Derek Lewis, Co-Chair  
c/o Emily Caudill  
Administrative Regulation Review Subcommittee  
Legislative Research Commission  
029, Capitol Annex  
Frankfort KY 40601

907 KAR 12:020. Reimbursement for New Supports for Community Living Waiver Services.

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 907 KAR 12:020, the Department for Medicaid Services proposes the attached suggested substitutes to 907 KAR 12:020.

If you have any questions, please feel free to contact Jonathan Scott, Regulatory and Legislative Advisor with the Department for Medicaid Services at (502) 564-4321 ext. 2015.

Sincerely,

Stacy Carey  
Executive Staff Advisor  
Office of Legislative and Regulatory Affairs



**SUGGESTED SUBSTITUTE – TO ORDINARY ONLY**

**CABINET FOR HEALTH AND FAMILY SERVICES**

**Department for Medicaid Services**

**Division of Fiscal Management**

**907 KAR 12:020. Reimbursement for New Supports for Community Living Waiver Services.**

RELATES TO: KRS 205.520, 42 C.F.R. 441, Subpart G, 447.272, 42 U.S.C. 1396a, b, d, n

STATUTORY AUTHORITY: KRS 142.363, 194A.030(3), 194A.050(1), 205.520(3), 205.5606, 205.6317

NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Health and Family Services, Department for Medicaid Services, is required to administer the Medicaid Program. KRS 205.520(3) authorizes the cabinet, by administrative regulation, to comply with any requirement that may be imposed, or opportunity presented, by federal law to qualify for federal Medicaid funds. This administrative regulation establishes the reimbursement policies for SCL waiver services provided to individuals pursuant to the new Supports for Community Living (SCL) waiver program established by 907 KAR 12:010.

**Section 1. Definitions.**

- (1) "DBHDID" means the Department for Behavioral Health, Developmental and Intellectual Disabilities.
- (2) "Department" means the Department for Medicaid Services or its designee.
- (3) "Developmental disability" means a disability that:
  - (a) Is manifested prior to the age of twenty-two (22);
  - (b) Constitutes a substantial disability to the affected individual; and
  - (c) Is attributable either to an intellectual disability or a condition related to an intellectual disability that:
    1. Results in an impairment of general intellectual functioning and adaptive behavior similar to that of a person with an intellectual disability; and
    2. Is a direct result of, or is influenced by, the person's cognitive deficits.
- (4) "Exceptional support" means a service:
  - (a) Requested by a participant and the participant's team; and
  - (b) That due to an extraordinary circumstance related to a participant's physical health, psychiatric issue, or behavioral health issue is necessary to:
    1. Be provided in excess of the upper payment limit for the service for a specified amount of time; and
    2. Meet the assessed needs of the participant.
- (5) "Immediate family member" is defined by KRS 205.8451(3).
- (6) "Intellectual disability" or "ID" means:
  - (a) A demonstration:
    1. Of significantly sub-average intellectual functioning and an intelligence quotient (IQ) of seventy (70) plus or minus five (5); and
    2. Of concurrent deficits or impairments in present adaptive functioning in at least two (2) of the following areas:
      - a. Communication;
      - b. Self-care;
      - c. Home living;
      - d. Social or interpersonal skills;
      - e. Use of community resources;
      - f. Self-direction;

- g. Functional academic skills;
- h. Work;
- i. Leisure; or
- j. Health and safety; and

(b) An intellectual disability that had an onset before eighteen (18) years of age.

(7) "Legally responsible individual" means an individual who has a duty under state law to care for another person and includes:

- (a) A parent (biological, adoptive, or foster) who provides care to the parent's minor child;
- (b) A guardian who provides care to the guardian's minor child; or
- (c) A spouse of a participant.

(8) "Participant" means a Medicaid recipient who:

- (a) Meets patient status criteria for an intermediate care facility for individuals with intellectual disabilities as established in 907 KAR 1:022;
- (b) Is authorized by the department to receive SCL waiver services; and
- (c) Utilizes SCL waiver services and supports in accordance with a person-centered service plan.

(9) "Participant-directed service" means an option established by KRS 205.5606 within the 1915(c) home and community based service waiver programs that allows recipients to receive non-medical services in which the individual:

- (a) Assists with the design of the program;
- (b) Chooses the providers of services; and
- (c) Directs the delivery of services to meet his or her needs.

(10) "State plan" is defined by 42 C.F.R. 430.10.

(11) "Supports for community living services" or "SCL services" means community-based waiver services for a participant who has an intellectual or developmental disability.

## Section 2. Coverage.

(1) The department shall reimburse a participating SCL provider for a covered service provided to a participant.

(2) In order to be reimbursable by the department, a service shall be:

- (a) Provided in accordance with the terms and conditions established~~[specified]~~ in 907 KAR 12:010; and
- (b) Prior authorized by the department.

(3) Funding for the SCL waiver program shall be associated with and generated through SCL waiver program participants rather than SCL waiver service providers.

## Section 3. SCL Reimbursement and Limits.

(1) Except as established in Section 4 of this administrative regulation, the department shall reimburse for an SCL service provided in accordance with 907 KAR 12:010 to a participant an amount:

- (a) Equal to the charge billed by the provider; and
- (b) Not to exceed the fixed upper payment limit for the service.

(2) The unit amounts and base payment rate~~[fixed upper payment limits]~~ listed in the following table shall apply:

<u>Service</u>	<u>Unit</u>	<u>Base Rate Effective</u> <u>January 1, 2025</u>
<u>Case Management</u>	<u>Per Month</u>	<u>\$425.92</u>
<u>Community Access, Individual</u>	<u>15-minute</u>	<u>\$10.65</u>

<u>Community Access, Individual - PDS</u>	<u>15-minute</u>	<u>\$10.65</u>
<u>Community Access, Group</u>	<u>15-minute</u>	<u>\$5.32</u>
<u>Community Access, Group - PDS</u>	<u>15-minute</u>	<u>\$5.32</u>
<u>Community Guide</u>	<u>15-minute</u>	<u>\$10.65</u>
<u>Community Guide - PDS</u>	<u>15-minute</u>	<u>\$10.65</u>
<u>Community Transition</u>	<u>Per Transition</u>	<u>Up to \$2,420</u>
<u>Consultative Clinical and Therapeutic Services (Behavioral)</u>	<u>15-minute</u>	<u>\$29.95</u>
<u>Consultative Clinical and Therapeutic Services (Dietary)</u>	<u>15-minute</u>	<u>\$29.95</u>
<u>Consultative Clinical and Therapeutic Services (Psychological)</u>	<u>15-minute</u>	<u>\$29.95</u>
<u>Consultative Clinical and Therapeutic Services (Functional analysis)</u>	<u>15-minute</u>	<u>\$29.95</u>
<u>Day Training</u>	<u>15-minute</u>	<u>\$3.62</u>
<u>Day Training - PDS</u>	<u>15-minute</u>	<u>\$3.62</u>
<u>Day Training at an ADHC</u>	<u>15-minute</u>	<u>\$3.99</u>
<u>Environmental Accessibility Adaptation Services</u>	<u>Lifetime</u>	<u>Up to \$9,680</u>
<u>Environmental Accessibility Adaptation Services - PDS</u>	<u>Lifetime</u>	<u>Up to \$9,680</u>
<u>Financial Management Services</u>	<u>Per month</u>	<u>\$121.00</u>
<u>Goods and Services</u>	<u>Per Year</u>	<u>Up to \$2,178</u>
<u>Goods and Service - PDS</u>	<u>Per Year</u>	<u>Up to \$2,178</u>
<u>Natural Supports Training</u>	<u>Per Year</u>	<u>Up to \$1,210</u>
<u>Natural Supports Training - PDS</u>	<u>Per Year</u>	<u>Up to \$1,210</u>
<u>Person-Centered Coaching</u>	<u>15-minute</u>	<u>\$7.66</u>
<u>Personal Assistance</u>	<u>15-minute</u>	<u>\$7.37</u>
<u>Personal Assistance - PDS</u>	<u>15-minute</u>	<u>\$7.37</u>
<u>Positive Behavior Support Plan</u>	<u>Per Plan</u>	<u>\$885.12</u>
<u>Residential Support Level I - 3 residents or fewer</u>	<u>Per Day</u>	<u>\$284.57</u>
<u>Residential Support Level I - 4 to 8 residents</u>	<u>Per Day</u>	<u>\$215.09</u>
<u>Residential Support Level II</u>	<u>Per Day</u>	<u>\$129.91</u>
<u>Residential Support Level II - 12+ hours of supervision</u>	<u>Per Day</u>	<u>\$198.70</u>



<u>Respite</u>	<u>15-minute</u>	<u>\$5.92</u>
<u>Respite - PDS</u>	<u>15-minute</u>	<u>\$5.92</u>
<u>Shared Living</u>	<u>Per Day</u>	<u>\$726.00</u>
<u>Supported Employment</u>	<u>15-minute</u>	<u>\$13.65</u>
<u>Supported Employment - PDS</u>	<u>15-minute</u>	<u>\$13.65</u>
<u>Technology Assisted Residential</u>	<u>Per Day</u>	<u>\$105.15</u>
<u>Transportation</u>	<u>Per Month</u>	<u>\$320.65</u>
<u>Vehicle Adaptations</u>	<u>Every Five Years</u>	<u>Up to \$7,260</u>

(3) Any combination of day training, community access, personal assistance, or any hours of paid community employment or on-site supported employment service shall not exceed sixteen (16) hours per day.

(4) Community access services shall not exceed 160 units per week.

(5) Community guide services shall not exceed 576 units per one (1) year authorized person-centered service plan period.

(6) Community transition shall be based on prior authorized cost not to exceed \$2,420~~[\$2,000]~~ per approved transition.

(7) Consultative clinical and therapeutic services shall not exceed 160 units per one (1) year authorized person-centered service plan period.

(8) Day training alone or in combination with any hours of paid community employment or on-site supported employment service shall not exceed 160 units per week.

(9) An environmental accessibility adaptation service shall be:

(a) Based on a prior authorized, estimated cost; and

(b) Limited to an \$9,680~~[\$8,000]~~ lifetime maximum.

(10) Goods and services shall not exceed \$2,178~~[\$1,800]~~ per one (1) year authorized person-centered service plan period.

(11) Natural support training shall be based on a prior authorized, estimated cost not to exceed \$1,210~~[\$1,000]~~ per one (1) year authorized person-centered service plan period.

(12) Person centered coaching shall not exceed 1,320 units per year.

(13) Respite shall be limited to 3,320 units (830 hours) per one (1) year authorized person-centered service plan period.

(14) Shared living shall be based on a prior authorized amount not to exceed \$726~~[\$600]~~ per month.

(15) A vehicle adaptation shall be limited to \$7,260~~[\$6,000]~~ per five (5) years per participant.

(16) Transportation shall be reimbursed:

(a) 1. If provided as a participant directed service:

a. Based on the mileage; and

b. At two thirds of the rate established in 200 KAR 2:006, Section 8(2)(d), if provided by an individual. The rate shall be adjusted quarterly in accordance with 200 KAR 2:006, Section 8(2)(d); or

2. If provided by a public transportation service provider, at the cost per trip as documented by the receipt for the specific trip; and

(b) A maximum of \$320.65~~[\$265]~~ per calendar month.

(17) An estimate for a supply item requested under specialized medical equipment or goods and services shall be based on the actual price to be charged to the provider, participant, or individual by a retailer or manufacturer.

(18) Specialized medical equipment or goods and services shall not include equipment and supplies covered under the Kentucky Medicaid program's state plan including:

- (a) Durable medical equipment;
- (b) Early and Periodic Screening, Diagnosis, and Treatment Services;
- (c) Orthotics and prosthetics; or
- (d) Hearing services.

(19) A participant shall not receive multiple SCL services during the same segment of time except in the case of the following collateral services that shall be allowed to overlap other SCL services:

- (a) Community guide services;
- (b) Consultative clinical and therapeutic services; or
- (c) Person centered coaching.

#### Section 4. Exceptional Supports.

(1) A service listed in subsection (2) or (3) of this section, regardless of delivery method, shall qualify as an exceptional support:

- (a) Based on the needs of the participant for whom the exceptional support is requested;
- (b) For a limited period of time not to exceed a full person-centered service plan year;
- (c) If the service meets the requirements for an exceptional support in accordance with the Kentucky Exceptional Supports Protocol; and
- (d) If approved by DBHDID to be an exceptional support.

(2)(a) The following shall qualify as an exceptional support and be reimbursed at a rate higher than the base payment rate~~[upper payment limit]~~ established in Section 3 of this administrative regulation if meeting the criteria established in subsection (1) of this section:

- 1. Community access services;
- 2. Day training that is not provided in an adult day health care center;
- 3. Personal assistance;
- 4. Respite;
- 5. Residential Level I – three (3) or fewer residents;
- 6. Residential Level I – four (4) to eight (8) residents; or
- 7. Residential Level II – twelve (12) or more hours.

(b) A rate increase for a service authorized as an exceptional support shall:

- 1. Be based on the actual cost of providing the service; and
- 2. Not exceed twice the upper payment limit established for the service in Section 3 of this administrative regulation.

(3) The following shall qualify as an exceptional support and be provided in excess of the unit limits established in Section 3 of this administrative regulation if meeting the criteria established in subsection

(1) of this section:

- (a) Consultative clinical and therapeutic services;
- (b) Person centered coaching;
- (c) Personal assistance; or
- (d) Respite.

(4) A service that qualifies as an exceptional support shall:

(a) Either **be authorized to be:**

- 1. ~~[Be authorized to be]~~ Reimbursed at a rate higher than the base payment rate~~[upper payment limit]~~ established for the service in Section 3 of this administrative regulation; or



2. ~~[Be authorized to be]~~ Provided in excess of the unit limit established for the service in Section 3 of this administrative regulation; and

(b) Not be authorized to be reimbursed at both a higher rate than the base payment rate~~[upper payment limit]~~ and in excess of the service limit established for the service in Section 3 of this administrative regulation.

#### Section 5. Participant Directed Services.

(1) A reimbursement rate for a participant directed service shall:

(a) Not exceed the base payment rate~~[upper payment limit]~~ established for the service in Section 3 of this administrative regulation unless the service qualifies as an exceptional support in accordance with Section 4(2)(a) of this administrative regulation; and

(b) Include:

1. All applicable local, state, and federal withholdings; and
2. Any applicable employment related administrative costs, which shall be the responsibility of the participant who is directing the service.

(2) An employee who provides a participant directed service shall not be approved to provide more than forty (40) hours of service per week unless authorized to do so by the department.

(3) A legally responsible individual or immediate family member shall not be authorized to be reimbursed for more than forty (40) hours of participant directed services per week.

Section 6. Auditing and Reporting. An SCL provider shall maintain fiscal records and incident reports in accordance with the requirements established in 907 KAR 12:010.

Section 7. Appeal Rights. A provider may appeal a department decision regarding the application of this administrative regulation. **An appeal shall be** in accordance with 907 KAR 1:671.

Section 8. Federal Approval and Federal Financial Participation. The department's reimbursement of services pursuant to this administrative regulation shall be contingent upon:

- (1) Receipt of federal financial participation for the reimbursement; and
- (2) Centers for Medicare and Medicaid Services' approval for the reimbursement.

#### Section 9. Incorporation by Reference.

(1) The "Kentucky Exceptional Supports Protocol", April 2016, is incorporated by reference.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law:<sup>[i]</sup>

(a) At the Department for Medicaid Services, 275 East Main Street, Frankfort, Kentucky 40621, Monday through Friday, 8 a.m. to 4:30 p.m.; or

(b) Online at the department's Web site at: <https://www.chfs.ky.gov/agencies/dms/dca/Pages/scl-waiver.aspx>.

CONTACT PERSON: Krista Quarles, Policy Analyst, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, Kentucky 40621; phone 502-564-7476; fax 502-564-7091; email CHFSregs@ky.gov.

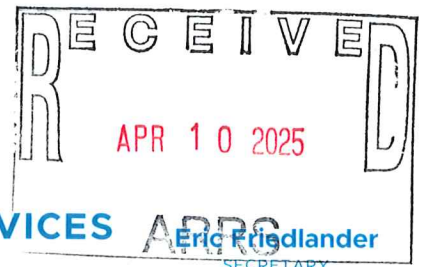




Andy Beshear  
GOVERNOR

## CABINET FOR HEALTH AND FAMILY SERVICES

275 East Main Street, 5W-A  
Frankfort, Kentucky 40621  
Phone: (502) 564-7042  
Fax: (502) 564-7091



April 10, 2025

Senator Stephen West, Co-Chair  
Representative Derek Lewis, Co-Chair  
c/o Emily Caudill  
Administrative Regulation Review Subcommittee  
Legislative Research Commission  
029, Capitol Annex  
Frankfort KY 40601

907 KAR 20:005. Medicaid technical eligibility requirements not related to a modified adjusted gross income standard or former foster care individuals.

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 907 KAR 20:005, the Department for Medicaid Services proposes the attached suggested substitutes to 907 KAR 20:005.

If you have any questions, please feel free to contact Jonathan Scott, Regulatory and Legislative Advisor with the Department for Medicaid Services at (502) 564-4321 ext. 2015.

Sincerely,

Stacy Carey  
Executive Staff Advisor  
Office of Legislative and Regulatory Affairs

**SUGGESTED SUBSTITUTE – TO ORDINARY ONLY**

**CABINET FOR HEALTH AND FAMILY SERVICES**

**Department for Medicaid Services**

**Division of Policy and Operations**

**907 KAR 20:005. Medicaid technical eligibility requirements not related to a modified adjusted gross income standard or former foster care individuals.**

RELATES TO: KRS 205.520, 205.6481 - 205.6497, 341.360, 42 C.F.R. ~~435.403~~**[435, 403]**, 45 C.F.R. 233.100, 8 U.S.C. 1101, 1153(a)(7), 1157, 1158, 1182(d)(5), 1231(b)(3), 1253(h), 1522, 1612, 1613, 1622, 1641, 38 U.S.C. 101, 107, 1101, 1301, 1304, 5303A, 42 U.S.C. 402, 416, 423, 1382c, 1383c, 1395i, 1396a, **9902(2)**

STATUTORY AUTHORITY: KRS 194A.010(1), 194A.030(2), 194A.050(1), 205.520(3), 42 U.S.C. ~~1396a(1)(a)(84)(D)~~, 1396a(a)(10), (r)(2), ~~[1396b(f)]~~1396d(q)(2)(B), 1397aa, 1397bb

NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Health and Family Services, Department for Medicaid Services has responsibility to administer the Medicaid Program. KRS 205.520(3) authorizes the cabinet, by administrative regulation, to comply with any requirement that may be imposed or opportunity presented by federal law to qualify for federal Medicaid funds. This administrative regulation establishes the technical eligibility requirements of the Medicaid Program, except for individuals whose Medicaid eligibility standard is a modified adjusted gross income or for former foster care individuals between the ages of nineteen (19) and twenty-six (26) who aged out of foster care while receiving Medicaid coverage. Individuals to whom the technical eligibility requirements in this administrative regulation apply include children in foster care; aged, blind, or disabled individuals; and individuals who receive supplemental security income benefits.

**Section 1. The Categorically Needy.**

(1) An individual receiving Title IV-E benefits, SSI benefits, or an optional or a mandatory state supplement shall be eligible for Medicaid as a categorically-needy individual.

(2) The following classifications of persons shall be considered categorically needy and eligible for Medicaid participation as categorically needy:

(a) A child in a foster family home or private child-caring facility dependent on a governmental or private agency;

(b) A child in a psychiatric hospital, psychiatric residential treatment facility, or intermediate care facility for individuals with an intellectual disability beginning with day thirty-one (31) of the child's stay in the psychiatric hospital, psychiatric residential treatment facility, or intermediate care facility for individuals with an intellectual disability;

(c) A child in a subsidized adoption dependent on a governmental agency;

(d) A qualified severely impaired individual as **established[specified]** in 42 U.S.C. 1396a(a)(10)(A)(i)(II) and 1396d(q), to the extent the coverage is mandatory in **Kentucky[this state]**;

(e) An individual who loses SSI benefit eligibility but would be eligible for SSI benefits except for entitlement to or an increase in his or her child's insurance benefits based on disability as **established[specified]** in 42 U.S.C. 1383c;

(f) An individual **established[specified]** in 42 U.S.C. 1383c who:

1. Loses SSI benefits or state supplement payments as a result of receipt of benefits pursuant to 42 U.S.C. 402(e) or (f);

2. Would be eligible for SSI benefits or state supplement payments except for these benefits; and



3. Is not entitled to Medicare Part A benefits;

(g) A disabled widow, widower, or disabled surviving divorced spouse, who would be eligible for SSI benefits except for entitlement to an OASDI benefit resulting from a change in the definition of disability;

(h) A child who:

1. Was receiving SSI benefits on August 22, 1996; and

2. Except for the change in definition of childhood disability, would continue to receive SSI benefits; or

(i) A person with hemophilia who would be eligible for SSI benefits except that the individual received a settlement in a class action lawsuit entitled "Factor VIII or IX Concentrate Blood Products Litigation." [;]

(3) The classifications of persons listed in this subsection shall be considered categorically-needy and eligible for Medicaid participation as limited by the provisions of this subsection.

(a) A family who[which] correctly received Medicaid for three (3) of the last six (6) calendar months [;] and would have been terminated from receipt of AFDC using AFDC methodologies in effect on July 16, 1996 as a result of new or increased collection of child or spousal support, shall be eligible for extended Medicaid coverage for four (4) consecutive calendar months beginning with the first month the family would have been ineligible for AFDC.

(b) A family who[which] would have been terminated from AFDC assistance using the AFDC methodologies in effect on July 16, 1996 because of increased earnings, hours of employment, or loss of earnings disregards shall be eligible for up to four (4) months of extended Medicaid.

(c)

1. Except as established[provided] in subparagraph 3 of this paragraph, an individual in an institution meeting appropriate patient status criteria who, if not institutionalized, would not be eligible for SSI benefits or optional state supplement benefits due to income shall be eligible under a special income level [~~which is~~] set at 300 percent of the SSI benefit amount payable for an individual with no income.

2. Except as established[provided] in subparagraph 3 of this paragraph, eligibility for a similar hospice participant or similar participant in a 1915(c) home and community based waiver program for individuals with an intellectual disability or the aged, blind, or disabled shall be determined using the method established in subparagraph 1 of this subsection.

3. Eligibility of an individual in an intermediate care facility for individuals with an intellectual disability (ICF IID) or supports for community living for an individual with an intellectual disability or a developmental disability waiver meeting appropriate patient status criteria whose gross income exceeds 300 percent of the SSI benefit amount shall be determined by comparing the cost of the individual's care to the individual's income.

## Section 2. Citizenship and Residency Requirements.

(1) The citizenship requirements established in 42 C.F.R. 435.406 shall apply.

(2) Except as established in subsection (3) or (4) of this section, to satisfy the Medicaid:

(a) Citizenship requirement, an applicant or recipient shall be:

1. A citizen of the United States as verified through satisfactory documentary evidence of citizenship or nationality presented during initial application or if a current recipient, upon next redetermination of continued eligibility;

2. A qualified alien who entered the United States before August 22, 1996, and is:

a. Lawfully admitted for permanent residence pursuant to 8 U.S.C. 1101;

- b. Granted asylum pursuant to 8 U.S.C. 1158;
  - c. A refugee admitted to the United States pursuant to 8 U.S.C. 1157;
  - d. Paroled into the United States pursuant to 8 U.S.C. 1182(d)(5) for a period of at least one (1) year;
  - e. An alien whose deportation is being withheld pursuant to 8 U.S.C. 1253(h), as in effect prior to April 1, 1997, or 8 U.S.C. 1231(b)(3);
  - f. Granted conditional entry pursuant to 8 U.S.C. 1153(a)(7), as in effect prior to April 1, 1980;
  - g. An alien who is granted status as a Cuban or Haitian entrant pursuant to 8 U.S.C. 1522;
  - h. A battered alien pursuant to 8 U.S.C. 1641(c);
  - i. A veteran pursuant to 38 U.S.C. 101, 107, 1101, or 1301 with a discharge characterized as an honorable discharge and not on account of alienage;
  - j. On active duty, other than active duty for training in the Armed Forces of the United States, and who fulfills the minimum active duty service requirements established in 38 U.S.C. 5303A(d);
  - k. The spouse or unmarried dependent child of an individual established~~[described]~~ in clause i. or j. of this subparagraph or the unremarried surviving spouse of an individual established~~[described]~~ in clause i. or j. of this subparagraph if the marriage fulfills the requirements established in 38 U.S.C. 1304; or
  - l. An Amerasian immigrant pursuant to 8 U.S.C. 1612(a)(2)(A)(v); or
3. A qualified alien who entered the United States on or after August 22, 1996 and is:
- a. Granted asylum pursuant to 8 U.S.C. 1158;
  - b. A refugee admitted to the United States pursuant to 8 U.S.C. 1157;
  - c. An alien whose deportation is being withheld pursuant to 8 U.S.C. 1253(h), as in effect prior to April 1, 1997, or 8 U.S.C. 1231(b)(3);
  - d. An alien who is granted status as a Cuban or Haitian entrant pursuant to 8 U.S.C. 1522;
  - e. A veteran pursuant to 38 U.S.C. 101, 107, 1101, or 1301 with a discharge characterized as an honorable discharge and not on account of alienage;
  - f. On active duty, other than active duty for training in the Armed Forces of the United States, and who fulfills the minimum active duty service requirements established in 38 U.S.C. 5303A(d);
  - g. The spouse or unmarried dependent child of an individual established~~[described]~~ in clause e. or f. of this subparagraph or the unremarried surviving spouse of an individual established~~[described]~~ in clause e. or f. of this subparagraph if the marriage fulfills the requirements established in 38 U.S.C. 1304;
  - h. An Amerasian immigrant pursuant to 8 U.S.C. 1612(a)(2)(A)(v); or
  - i. An individual lawfully admitted for permanent residence pursuant to 8 U.S.C. 1101 who has earned forty (40) quarters of Social Security coverage; and
- (b) Residency requirements, the applicant or recipient shall be a resident of Kentucky who meets the conditions for determining state residency pursuant to 42 C.F.R. 435.403.
- (3) A qualified or nonqualified alien shall be eligible for medical assistance as established~~[provided]~~ in this paragraph.
- (a) The individual shall meet the income, resource, and categorical requirements of the Medicaid Program.
  - (b) The individual shall have, or have had within at least one (1) of the three (3) months prior to the month of application, an emergency medical condition:
    - 1. Not related to an organ transplant procedure; and
    - 2. Which shall be a medical condition, including severe pain, in which the absence of immediate medical attention could reasonably be expected to result in placing the individual's health in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.



(c)

1. Approval of eligibility shall be for a ~~time-limited~~~~[time-limited]~~ period, ~~which shall include~~~~[which includes]~~, except as established in subparagraph 2 of this paragraph, the month in which the medical emergency began and the next following month.

2. The eligibility period shall be extended for an appropriate period of time upon presentation to the department of written documentation from the medical provider that the medical emergency will exist for a more extended period of time than is allowed for in the ~~time-limited~~~~[time-limited]~~ eligibility period.

(d) The Medicaid benefits to which the individual is entitled shall be limited to the medical care and services, including limited follow-up~~[,]~~ necessary for the treatment of the emergency medical condition of the individual.

(4)

(a) The satisfactory documentary evidence of citizenship or nationality requirement in subsection (2)(a)1 of this section shall not apply to an individual who:

1. Is receiving SSI benefits;
2. Previously received SSI benefits but is no longer receiving them;
3. Is entitled to or enrolled in any part of Medicare;
4. Previously received Medicare benefits but is no longer receiving them;
5. Is receiving:
  - a. Disability insurance benefits under 42 U.S.C. 423; or
  - b. Monthly benefits under 42 U.S.C. 402 based on the individual's disability pursuant to 42 U.S.C. 423(d);
6. Is in foster care and who is assisted under Title IV-B of the Social Security Act, which is codified as 42 U.S.C. 621 through 628b; or
7. Receives foster care maintenance or adoption assistance payments under Title IV-E of the Social Security Act, which is codified as 42 U.S.C. 670 through 679c.

(b) The department's documentation requirements shall be in accordance with the requirements established in 42 U.S.C. 1396b(x).

(5) The department shall assist an applicant or recipient who is unable to secure satisfactory documentary evidence of citizenship or nationality in a timely manner because of incapacity of mind or body and lack of a representative to act on the applicant's or recipient's behalf.

(6) An individual shall be determined eligible for Medicaid for up to three (3) months prior to the month of application if all conditions of eligibility are met.

Section 3. The Medically Needy Who Qualify Via Spenddown. A medically needy individual who has sufficient income to meet the individual's basic maintenance needs may apply for Medicaid with need determined in accordance with the income and resource standards established in 907 KAR 20:020 through 907 KAR 20:045, if the individual meets:

- (1) The income and resource standards of the medically needy program established in 907 KAR 20:020 and 907 KAR 20:025; and
- (2) The technical requirements of the appropriate categorically needy group identified in Section 1 of this administrative regulation.

Section 4. Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, Specified Low-Income Medicare Beneficiaries, and Medicare Qualified Individuals Group 1 (QI-1).

- (1) Coverage shall be extended to a qualified Medicare beneficiary as ~~established~~~~[specified]~~ in 42 U.S.C. 1396a(a)(10)(E):

- (a) **Based on**~~[Subject to]~~ the income limits established in 907 KAR 20:020;
  - (b) **Based on**~~[Subject to]~~ the resource limits established in 907 KAR 20:025; and
  - (c) For the scope of benefits **established**~~[specified]~~ for a QMB in 907 KAR 1:006.
- (2) A QMB shall:
- (a) Be eligible for or receive Medicare Part A and Part B benefits;
  - (b) Be determined to be eligible for QMB benefits effective for the month after the month in which the eligibility determination has been made; and
  - (c) Not be eligible for QMB benefits:
    - 1. Retroactively; or
    - 2. For the month in which the eligibility determination was made.
- (3) A qualified disabled and working individual shall be eligible under Medicaid for payment of the individual's Medicare Part A premiums as established in 907 KAR 1:006.
- (4) A ~~[specified low-income]~~ Medicare beneficiary, **who has been established as a low-income beneficiary**, shall be eligible under Medicaid for payment of the Medicare Part B premiums.
- (5) A Medicare qualified individual group 1 (QI-1) shall be eligible for payment of all of the Medicare Part B premium.

Section 5. Technical Eligibility Requirements. The technical eligibility factors for an individual included as categorically needy under Section 1 of this administrative regulation shall be as established in this section.

(1) The ~~[following shall meet the]~~ requirements of **907 KAR 20:001, Section 1(19), shall apply to a child in**~~[a child in accordance with 907 KAR 20:001, Section 1(19)]~~:

- (a) ~~[A child in]~~ Foster care;
  - (b) ~~[A child in]~~ A private institution;
  - (c) ~~[A child in]~~ A psychiatric hospital;
  - (d) ~~[A child in]~~ A psychiatric residential treatment facility; or
  - (e) ~~[A child in]~~ An intermediate care facility for individuals with an intellectual disability.
- (2) An aged individual shall be at least sixty-five (65) years of age.
- (3) A blind individual shall meet the definition **for "blindness" as established**~~[of blindness as contained]~~ in 42 U.S.C. 416 and 42 U.S.C. 1382c relating to Retirement, Survivors, and Disability Insurance or SSI benefits.
- (4) A disabled individual shall meet the definition **for "[of]" permanent and total disability,** as established in 42 U.S.C. 423(d) and 42 U.S.C. 1382c(a)(3) relating to RSDI and SSI benefits.
- (5)
- (a) Using AFDC methodologies in effect on July 16, 1996, a family who loses Medicaid eligibility solely because of increased earnings or hours of employment of the caretaker relative or loss of earnings disregards may receive up to four (4) months of extended medical assistance for family members included in the medical assistance unit prior to losing Medicaid eligibility.
  - (b) The family shall meet the eligibility and reporting requirements for the benefit period established in this subsection.
  - (c) The benefit period shall begin with the month the family would have become ineligible for AFDC using AFDC methodologies in effect on July 16, 1996.
    - 1. To be eligible for this transitional benefit period, the family shall:
      - a. Have correctly received Medicaid assistance in three (3) of the six (6) months immediately preceding the month the family would have become ineligible for AFDC using AFDC methodologies in effect on July 16, 1996;
      - b. Have a dependent child living in the home; and



- c. Report earnings and child care costs no later than the 21st day of the fourth month.
- 2. If the family no longer has a dependent child living in the home, medical assistance shall be terminated the last day of the month the family no longer includes a dependent child.
- (6) An applicant who is deceased shall have eligibility determined in the same manner as if the applicant were alive to cover medical expenditures during the terminal illness.
- (7)
  - (a) An individual shall be determined eligible for Medicaid for up to three (3) months prior to the month of application if all conditions of eligibility are met and the applicant is not enrolled in a managed care organization.
  - (b) The effective date of Medicaid shall be the first day of the month of eligibility.
- (8)
  - (a) Benefits shall be denied to a family for a month in which a parent with whom the child is living is, on the last day of the month, participating in a strike, and the individual's needs shall not be considered in determining eligibility for Medicaid for the family if, on the last day of the month, the individual is participating in a strike.
  - (b) A strike shall include a concerted stoppage of work by employees (including a stoppage by reason of expiration of a collective bargaining agreement) or any concerted slowdown or other concerted interruption of operations by employees.

#### Section 6. Institutional Status.

- (1) An individual shall not be eligible for Medicaid if the individual is a:
  - (a) Resident or inmate of a nonmedical public institution except as established[provided] in Section 7 of this administrative regulation;
  - (b) Patient in a state tuberculosis hospital, unless he or she has reached age sixty-five (65);
  - (c) Patient in a mental hospital or psychiatric facility, unless the individual is:
    - 1. Under twenty-one (21) years of age;
    - 2. Under age twenty-two (22) if the individual was receiving inpatient services on his or her 21st birthday; or
    - 3. Sixty-five (65) years of age or over; or
  - (d) Patient in an institution for mental diseases, unless the individual has reached age sixty-five (65).
- (2) In accordance with subsection (1)(c) of this section, if an individual is receiving services in a mental hospital or psychiatric facility at the time the individual reaches twenty-one (21) years of age and the services remain medically necessary for the individual, the individual shall remain eligible for the services until the individual reaches age twenty-two (22) years of age.

#### Section 7. Emergency Shelters or Incarceration Status.

- (1) An individual or family group who is in an emergency shelter for a temporary period of time shall be eligible for medical assistance, even if[though] the shelter is considered a public institution, as established in paragraphs (a) and (b) of this subsection.[under the following conditions:]
  - (a) The individual or family group shall:
    - 1. Be a resident of an emergency shelter no more than six (6) months in any nine (9) month period; and
    - 2. Not be in the facility serving a sentence imposed by the court, or awaiting trial.~~[; and]~~
  - (b) Eligibility for Medicaid shall have existed immediately prior to admittance to the shelter or eligibility[it] shall exist immediately after leaving the shelter.
- (2) An inmate shall be eligible for Medicaid during the period of time the inmate is admitted to a hospital if the inmate:

- (a) Has been admitted to a hospital;
- (b) Has been an inpatient at the hospital for at least twenty-four (24) consecutive hours; and
- (c) Meets the Medicaid eligibility criteria established in this administrative regulation.

Section 8. Justice Involved Children or Youth.

- (1) A justice involved child or youth who is within thirty (30) days of their scheduled release date shall be eligible for Medicaid as established pursuant to 42 U.S.C. 1396a(1)(a)(84)(D) and 1397bb.
- (2) Covered services for justice involved youth shall be provided by reentry organizations **that meet Medicaid criteria negotiated with the federal government and that are** authorized and approved by the department. **Reentry organizations include, for example**~~[-and may include]~~:
  - (a) The Department for Juvenile Justice;
  - (b) The Department of Corrections; or
  - (c) Local jails; or
  - (d) An approved **and Medicaid-enrolled** third-party contractor that assists one (1) of the entities in paragraphs (a) through (c) of this subsection in delivering services pursuant to this section.

Section 9. Application for Other Benefits.

- (1) Except as **established[provided]** in subsection (2) of this section **or for good cause shown**, as a condition of eligibility for Medicaid, an applicant or recipient shall apply for each annuity, pension, retirement, and disability benefit to which the applicant or recipient is entitled~~[-unless the applicant or recipient can show good cause for not doing so]~~.
- (a) Good cause shall be considered to exist if other benefits have previously been denied with no change of circumstances or the individual does not meet all eligibility conditions.
- (b) Annuities, pensions, retirement, and disability benefits shall include:
  - 1. Veterans' compensations and pensions;
  - 2. Retirement and survivors disability insurance benefits;
  - 3. Railroad retirement benefits;
  - 4. Unemployment compensation; and
  - 5. Individual retirement accounts.
- (2) An applicant or recipient shall not be required to apply for federal benefits if:
  - (a) The federal law governing that benefit **establishes[specifies]** that the benefit is optional; and
  - (b) The applicant or recipient believes that applying for the benefit would be to the applicant's or recipient's disadvantage.
- (3) An individual who would be eligible for SSI benefits but who has not made application shall not be eligible for Medicaid.

Section 10.~~[Section 9.]~~ Assignment of Rights to Medical Support. By accepting assistance for or on behalf of a child, a recipient shall be deemed to have made an assignment to the cabinet of any medical support owed for the child, not to exceed the amount of Medicaid payments made on behalf of the recipient.

Section 11.~~[Section 10.]~~ Third-party Liability as a Condition of Eligibility.

- (1)
  - (a) Except as **established[provided]** in subsection (3) of this section **or for good cause shown**, an individual applying for or receiving Medicaid shall be required as a condition of eligibility to cooperate with the cabinet in identifying, and providing information to assist the cabinet in pursuing, any third party who may be liable to pay for care or services available under the Medicaid Program~~[-unless the individual has good cause for refusing to cooperate]~~.



(b) Good cause for failing to cooperate shall exist if cooperation:

1. Could result in physical or emotional harm of a serious nature to a child or custodial parent;
2. Is not in a child's best interest because the child was conceived as a result of rape or incest; or
3. May interfere with adoption considerations or proceedings.

(2) A failure of the individual to cooperate without good cause shall result in ineligibility of the individual.

(3) A pregnant woman with income up to 195 percent of the federal poverty level established annually by the United States Department of Health and Human Services pursuant to 42 U.S.C. 9902(2) shall not be required to cooperate in establishing paternity or securing support for her unborn child.

Section 12.~~[Section 11.]~~ Provision of Social Security Numbers.

(1) Except as ***established***~~*provided*~~ in subsections (2) and (3) of this section, an applicant or recipient of Medicaid shall provide a Social Security number as a condition of eligibility.

(2) An individual shall not be denied eligibility or discontinued from eligibility due to a delay in receipt of a Social Security number from the United States Social Security Administration if appropriate application for the number has been made.

(3) An individual who refuses to obtain a Social Security number due to a well-established religious objection shall not be required to provide a Social Security number as a condition of eligibility.

Section 13.~~[Section 12.]~~ Applicability. The provisions and requirements of this administrative regulation shall:

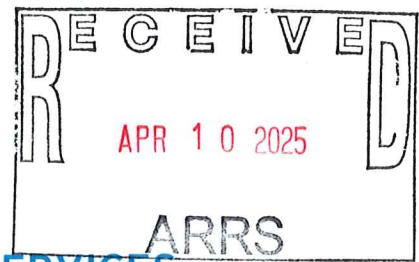
(1) Apply to:

- (a) Children in foster care;
- (b) Aged, blind, or disabled individuals; and
- (c) Individuals who receive supplemental security income benefits; and

(2) Not apply to an individual whose Medicaid eligibility is determined:

- (a) Using the modified adjusted gross income standard pursuant to 907 KAR 20:100; or
- (b) Pursuant to 907 KAR 20:075.

CONTACT PERSON: Krista Quarles, Policy Analyst, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, Kentucky 40621; phone 502-564-7476; fax 502-564-7091; email CHFSregs@ky.gov.



Andy Beshear  
GOVERNOR

## CABINET FOR HEALTH AND FAMILY SERVICES

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SECRETARY

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April 7, 2025

Senator Stephen West, Co-Chair  
Representative Derek Lewis, Co-Chair  
c/o Emily Caudill  
Administrative Regulation Review Subcommittee  
Legislative Research Commission  
083, Capitol Annex  
Frankfort KY 40601

Re: 922 KAR 1:360E

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 922 KAR 1:360E, the Cabinet for Health and Family Services proposes the attached amendments to 922 KAR 1:360E.

Sincerely,

Lucie Estill  
Staff Assistant  
Office of Legislative and Regulatory Affairs

Attachments

Final, 4-3-2025

**SUGGESTED AMENDMENT – To the Emergency Version**

**CABINET FOR HEALTH AND FAMILY SERVICES  
Department for Community Based Services  
Division of Protection and Permanency**

**922 KAR 1:360E. Private child care placement, levels of care, and payment.**

**Page 1**

**RELATES TO**

**Line 7**

After "675", insert ", 675a".

**Page 3**

**Section 1(11)**

**Lines 11-12**

After "922 KAR 1:350, Section", insert "6".

Delete "4".

**Page 10**

**Section 5(1)(a)**

**Lines 4-5**

After "upon the", delete the opening quotation marks.

After "cost analysis", delete the closing quotation marks, and the following:  
defined by KRS 199.641(1)(c)

**Page 22**

**Section 18(1)(f)**

**Line 15**

After "Schedule", ", insert "4/25".

Delete "1/25".

**MATERIAL INCORPORATED BY REFERENCE**

**At the time that it files this staff suggested amendment, the agency needs to file one (1) clean copy of the "DPP-114, Child Caring and Child Placing Level of Care Schedule" form that makes changes to the latest version of the form with the 9/23 edition date and:**

- Includes an updated edition date of 4/25
- Includes 922 KAR 1:360E at the top of the form
- Retains the same rate changes made to Therapeutic Foster Care Levels II and III that were initially filed with the administrative regulation that included changing the following rates:
  - Therapeutic Foster Care Level II increased from \$99.50 to \$108.55
  - Therapeutic Foster Care Level III increased from \$139.96 to \$156.34