

Andy Beshear
GOVERNOR

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF TAX POLICY AND REGULATION**

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October 10, 2025

Senator Stephen West
Representative Derek Lewis
Legislative Research Commission
083, Capitol Annex
702 Capitol Avenue
Frankfort, KY 40601

RE: 103 KAR 2:005. Life Mortality Table.

Dear Co-Chairs:

After consideration of the concerns raised by 103 KAR 2:005, the Department of Revenue proposes the attached suggested substitute to this regulation.

Sincerely,

Gary C. Morris, Executive Director
Office of Tax Policy & Regulation
501 High Street, Sta. 1
Frankfort, KY 40601
(502) 564-0424

FINANCE AND ADMINISTRATION CABINET
Department of Revenue
(Amendment)

103 KAR 2:005. Life Mortality Table.

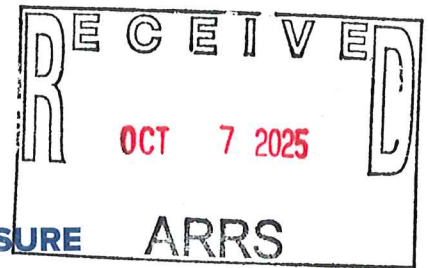
RELATES TO: KRS 140.100

STATUTORY AUTHORITY: KRS 131.130, 140.100(2)

CERTIFICATION STATEMENT:

NECESSITY, FUNCTION, AND CONFORMITY: KRS 131.130(1) authorizes the Department of Revenue to promulgate administrative regulations for the administration and enforcement of all tax laws of this state. KRS 140.100(2) requires the application of the appropriate United States life mortality tables when ascertaining the value of future, contingent, or limited estates, which includes life estates and annuities. This administrative regulation establishes the appropriate United States life mortality table as required by KRS 140.100(2).

Section 1. Table 1, Life Table for the Total Population: United States, published by the United States Department of Health and Human Services, National Center for Health Statistics, **and made available at revenue.ky.gov under the Inheritance Tax tab**~~[The mortality table as prescribed in of the Internal Revenue Code, 26 U.S.C. 7520(a)(1)],~~ shall be utilized when computing the value of a beneficiary's life estate, annuity, remainder interest, or any other interest in the estate ~~that~~**that[which]** is based on the life expectancy of the beneficiary or some other person. **Table 1, Life Table for the Total Population: United States, [The life mortality table]** prescribed **and published** by National Center for Health Statistics ~~as of January 1 of the year of the decedent's death shall be used.~~~~[The mortality table prescribed by the Internal Revenue Service as of January 1 of the year of the decedent's death shall be used.]~~



KENTUCKY BOARD OF MEDICAL LICENSURE

ARRS

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October 6, 2025

Senator Stephen West, Co-Chair
Representative Derek Lewis, Co-Chair
Legislative Research Commission
083, Capitol Annex
702 Capitol Avenue
Frankfort, KY 40601

RE: 201 KAR 9:270. Professional standards for prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with Naloxone.

Dear Co-Chairs:

After consideration of the issues raised by 201 KAR 9:270, the Kentucky Board of Medical Licensure proposes the attached suggested amendment to this regulation.

Sincerely,

Leanne K. Diakov
General Counsel
Kentucky Board of Medical Licensure
310 Whittington Parkway, Suite 1B
Louisville, Kentucky 40222



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BOARDS AND COMMISSIONS
Kentucky Board of Medical Licensure
(Amended After Comments)

201 KAR 9:270. Professional standards for prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone.

RELATES TO: KRS **216.510**, 218A.205, 311.530-311.620, 311.840-311.862, 311.990

STATUTORY AUTHORITY: KRS **218A.205(3)**, 311.565(1)(a), **311.842(1)**

CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with the requirements of 2025 RS HB 6, Section 8.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 311.565(1)(a) authorizes the board to promulgate administrative regulations to regulate the conduct of its licensees. KRS 218A.205(3)(a) and (b) require the board to establish mandatory prescribing and dispensing standards related to controlled substances. KRS 311.842(1)(b) requires that the board promulgate administrative regulations establishing professional standards for prescribing and administering controlled substances by physician assistants. This administrative regulation establishes the professional standards for any board licensee who prescribes, dispenses, or administers Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone in the Commonwealth of Kentucky. Nothing within this administrative regulation shall be interpreted to grant physician assistants authority to dispense Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone, unless otherwise authorized by KRS 311.842.

Section 1. Applicability.

(1) Any licensee who prescribes, dispenses or administers~~[, dispenses]~~ Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone shall comply with the standards of acceptable and prevailing medical practices established in this administrative regulation.

(2) A physician assistant shall only prescribe or administer Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone to the extent delegated by the supervising physician in the applications required ~~by~~**[under]** KRS 311.854 and 311.858. This administrative regulation, including any exemptions stated herein, shall not alter the prescribing limits established in KRS 311.858 or the requirement for delegation from a supervising physician established in KRS 311.854.

(a) Any change in the supervising physician application, including changes in practice address, scope of practice, or scope of delegated prescriptive authority, required under KRS 311.854 and 311.858 shall be reported in writing to the board within ten (10) days of the change.

(b) If the physician assistant's supervising physician changes or the supervising physician ~~becomes~~**[become]** restricted or suspended from the practice of medicine or osteopathy, the physician assistant shall cease prescribing or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone until the restriction or suspension is terminated or a new supervising physician is approved.

(c) Prescribing or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone without the applications required ~~by~~**[under]** KRS 311.854 and 311.858 shall constitute a violation of this administrative regulation and shall be grounds for an emergency order of restriction or suspension.

(3) The professional standards established in this administrative regulation shall not apply to prescribing,~~or~~ dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone:

(a) To a patient as part of the patient's hospice or end-of-life treatment;

(b) **To a patient who has an active and substantiated cancer diagnosis and is suffering from cancer-related pain, if prescribed or dispensed by a board-certified oncologist;**

(c) **To a patient who is receiving palliative care for cancer-related pain, if prescribed or dispensed by a board-certified palliative care specialist;**

(d) To a patient admitted to a hospital-based or hospital-affiliated emergency department while the patient is admitted therein;

(e)~~(e)~~ To a patient admitted to a licensed hospital, during and as part of a normal and expected part of the patient's course of care at that hospital;

(f)~~(d)~~ To a patient who is admitted to a level 3.5 or higher inpatient residential treatment facility with an on-sight medical director who is certified by the American Board of Addiction Medicine, the American Board of Preventive Medicine in addiction medicine, the American Board of Medical Specialties (ABMS) in addiction medicine, or an American Osteopathic Association (AOA) certifying board in addiction medicine, during and as part of a normal and expected part of the patient's course of care at that facility;

(g)~~(e)~~ To a patient who is a registered resident of a long-term care facility as defined in KRS 216.510; ~~or~~**and**

(h)~~(f)~~ For up to fourteen (14) days, to a patient who has undergone a major surgery, being any operative or invasive procedure or delivery, or has suffered a significant physical trauma, being any acute, blunt, blast or penetrating bodily injury that has a risk of death, physical disability or impairment.

Section 2. Minimum Qualifications.

(1) [~~for Prescribing, Dispensing, or Administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone. Except as provided in Section 3 of this administrative regulation,~~]A licensee shall not prescribe, dispense, or administer Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone unless that licensee possesses the minimum qualifications established in this section.

[(1)] [The licensee shall obtain and maintain in good standing a waiver and license as issued by the Drug Enforcement Administration (DEA) to prescribe Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone for the treatment of opioid use disorder in the Commonwealth of Kentucky.]

(2) The licensee shall successfully complete the approved educational programs required by this subsection.

(a) The prescribing licensee shall be a DEA-licensed prescriber of controlled substances, including Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone, and shall have completed any and all courses deemed necessary by the DEA~~[obtained Buprenorphine certification through completion of a Substance Abuse and Mental Health Services Administration ("SAMHSA") certified course].~~

(b) For each three (3) year continuing education cycle, each DEA-licensed prescriber of Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone shall complete at least twelve (12) hours of continuing medical education certified in Category I specific to addiction medicine as part of the required continuing medical education hours set forth in 201 KAR 9:310 and 201 KAR 9:360.

[(3)] [The licensee shall enroll in the Kentucky Health Information Exchange to the extent necessary to query and pull information from the Kentucky Health Information Exchange. The licensee shall not

~~report the prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone for medically-supervised withdrawal or as maintenance treatment for a patient diagnosed with opioid use disorder into the Kentucky Health Information Exchange unless otherwise required by law.]~~

Section 3.~~[Section 2.]~~ Professional Standards for Prescribing, Dispensing, or Administering Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone for Medically-Supervised Withdrawal or the Treatment of Opioid Use Disorder.

(1)

(a) Except as provided in paragraph (b) of this subsection, transmucosal Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone shall only be prescribed, dispensed, or administered for medically-supervised withdrawal or as a maintenance treatment for a patient diagnosed with opioid use disorder.

(b) **Except as established in/to patients in/ Section 1(3)(a), (b) and (c),** Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone shall not be used for the treatment of pain or any other condition, unless delivered in a Federal Drug Administration (FDA) approved form and for an FDA approved purpose.

(2) Buprenorphine-Mono-Product shall not be prescribed, dispensed, or administered for medically-supervised withdrawal or as a maintenance treatment for a patient diagnosed with opioid use disorder, except:

(a) To a pregnant patient;

(b) To a patient with demonstrated hypersensitivity to naloxone; or

(c) As administered under supervision in a physician's office or other healthcare facility, including hospitals, urgent care settings, surgical care centers, residential treatment facilities, and correctional facilities~~[-or]~~

~~[(d)] [To a patient transitioning from methadone to buprenorphine, limited to a period of no longer than one week].~~

(3)

~~[(a)] If~~~~[Except as provided in paragraph (b) of this section,]~~ Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone ~~is~~~~[shall not be]~~ prescribed, dispensed, or administered to a patient who is also being prescribed other controlled substances or other substances subject to abuse or misuse beyond a period of three (3) months, then the licensee shall obtain and document a formal provider-to-provider or patient-to-provider~~[benzodiazepines, other sedative hypnotics, stimulants or other opioids, without]~~ consultation of a physician who is certified by the American Board of Addiction Medicine, the American Board of Preventive Medicine in addiction medicine, the American Board of Medical Specialties (ABMS) in addiction medicine~~[psychiatry]~~, or an American Osteopathic Association (AOA) certifying board in addiction medicine or a physician who has completed an addiction psychiatry fellowship~~[psychiatry]~~.

~~[(b)] [A licensee may prescribe, dispense, or administer Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone to a patient who is also being prescribed benzodiazepines, other sedative hypnotics, stimulants, or other opioids, without consultation in order to address an extraordinary and acute medical need not to exceed a combined period of thirty (30) days.]~~

(4) ~~[Except as provided in Section 3 of this administrative regulation,]~~Each licensee who prescribes, dispenses, or administers Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone for medically-supervised withdrawal or for the treatment of opioid use disorder shall fully comply with the professional standards established in this subsection.

(a) Prior to or at least within two (2) weeks of initiating treatment, the prescribing, dispensing, or administering licensee shall:

1. Obtain and record a complete and appropriate evaluation of the patient which shall at a minimum include:

- a. The patient's history of present illness;
- b. The patient's history of substance use;
- c. The patient's social and family history;
- d. The patient's past medical and psychiatric histories;
- e. A focused physical examination of the patient;
- f. ~~Offering~~**Offer** screening with counseling for HIV and hepatitis serology; and
- g. Arranging appropriate laboratory tests, which shall include a CBC, a drug screen, and a CMP;

2. Obtain the patient's consent and authorizations in order to obtain the patient's prior medical records.

a. Upon receipt of the medical records, the prescribing, dispensing, or administering licensee shall review and incorporate the information from the records into the evaluation and treatment of the patient.

b. If the prescribing, dispensing, or administering licensee is unable, despite best efforts, to obtain the patient's prior medical records, the licensee shall document those efforts in the patient's chart;

3. Obtain and review a KASPER report for that patient for the twelve (12) month period immediately preceding the initial patient encounter and appropriately utilize that information in the evaluation and treatment of the patient;

4. Explain treatment alternatives and the risks and the benefits of treatment with Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone to the patient;

5. Obtain written informed consent from the patient in a manner that meets professional standards; and

6. If the patient is a female of child-bearing age and ability, ~~[meet the requirements of paragraph (b) of this subsection.]~~

~~[(b)] [Except as provided in Section 3 of this administrative regulation, the requirements of this paragraph shall apply to the treatment of a female of child-bearing age and ability.]~~

~~[1.] [Prior to initiating treatment, the licensee shall require that the patient submit to a pregnancy test and, if pregnant,] the licensee shall offer to screen for pregnancy and provide counseling as to the risk of neonatal abstinence syndrome which shall be consistent with current SAMHSA guidance. If the patient is pregnant, the prescribing, dispensing, or administering licensee shall refer the patient to an obstetrician or maternal-fetal medicine specialist for prenatal care, unless the licensee assumes management of the prenatal care.~~

~~[2.]~~

~~[a.] [Unless the licensee is certified by the American Board of Addiction Medicine, the American Board of Preventive Medicine, the American Board of Medical Specialties (ABMS) in psychiatry, or an American Osteopathic Association (AOA) certifying board in][addiction medicine or psychiatry or an obstetrician or maternal-fetal medicine specialist, a licensee who prescribes, dispenses, or administers Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone to a patient who is pregnant or breastfeeding shall first obtain and document consultation with another independent physician that the potential benefit of Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone use outweighs the potential risk of use.]~~

~~[b.] [The consultation shall be obtained from a physician who is certified by the American Board of Addiction Medicine, the American Board of Preventive Medicine, the American Board of Medical~~

~~Specialties (ABMS) in psychiatry, or an American Osteopathic Association (AOA) certifying board in addiction medicine or psychiatry or from an obstetrician or maternal-fetal medicine specialist.]~~

~~(b)(e)~~ Except as provided by paragraph (d) of this subsection, while initiating treatment with Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone, the licensee shall comply with the requirements of this paragraph.

1. The licensee shall recommend to the patient an in-office observed initiation~~[induction]~~ protocol, particularly if the patient is on fentanyl or methadone.

a. Except as provided in clause b. of this subparagraph, the licensee shall supervise the in-office observed initiation~~[induction]~~ protocol and shall ensure that resources are available to manage precipitated withdrawal.

b. If an in-office observed initiation~~[induction]~~ does not occur, the licensee shall appropriately record the circumstances in the patient chart and shall educate the patient about the potential for precipitated withdrawal. The licensee shall be responsible for the coordination and implementation of a plan to manage precipitated withdrawal outside of an in-office observed initiation.

2. The licensee shall assess for and document the presence or absence of opioid withdrawal before the first dose is given by using a standardized instrument, such as the clinic opioid withdrawal scale (COWS) or other similarly recognized instrument.

3. The licensee shall initiate treatment with a dose not to exceed the dose equivalency of four (4) milligrams buprenorphine generic tablet, which:

a. May be followed by subsequent doses~~[-if withdrawal persists];~~ and

b. Shall not exceed the dose equivalency of sixteen (16) milligrams buprenorphine generic tablet on the first day of treatment.

~~(c)(d)~~ If the patient is transferred from another treatment provider and has previously experienced withdrawal without a relapse and has not had a lapse in treatment, the licensee shall:

1. Not rely solely on the patient's self-reported history but shall comply with the standards established~~[set forth]~~ in Section ~~3(4)~~2(4) of this administrative regulation~~[Document that fact];~~

2. Make reasonable attempts to obtain records from the prior treatment provider;

3. Educate the patient about the potential for precipitated withdrawal; and

4.~~[3.]~~ Make an informed and independent clinical decision to continue maintenance treatment of the patient on the same or less dosage as established by the previous treatment provider and then as provided in paragraph (e) of this subsection.

~~(d)(e)~~ After initial initiation~~[induction]~~ of Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone, the licensee shall meet the requirements established in this paragraph.

1. If the licensee prescribes, dispenses, or administers Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone medication, the licensee shall implement a treatment plan that requires objective behavioral modification by the patient. The behavioral modification shall include the patient's participation in a behavioral modification program that may include counseling or a twelve (12) step facilitation.

2. The licensee shall prescribe, dispense, or administer to the patient an amount of Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone that:

a. Is necessary to minimize craving and opiate withdrawal;

b. Does not produce opiate sedation;~~[-and]~~

c. ~~[Except as provided in subclauses (i) through (iv) of this clause,]~~ Is to be taken no more frequently than ~~twice~~once daily;

~~[(i)] [If the patient is pregnant, is to be taken no more than twice daily;]~~

~~[(ii)] [If the patient is receiving a daily dosage of less than 16mg, is to be taken no more than twice daily;]~~

~~[(iii)] [If the patient is simultaneously engaged in cancer treatment, hospice or palliative care, is to be taken bid or tid; or]~~

~~[(iv)] [If the patient is undergoing a major surgery, being any operative or invasive procedure or delivery, or has suffered a significant physical trauma, being any acute, blunt, blast or penetrating bodily injury that has a risk of death, physical disability or impairment, is to be taken bid or tid for up to fourteen (14) days;] and~~

d. Is able only to supply the patient until the next licensee visit, which shall be scheduled as required by subparagraph 3. of this paragraph.

3.

a. The licensee shall ensure that the patient is seen by a licensed clinical healthcare professional with prescribing authority:

(i) No later than ten (10) days after initiation~~[induction]~~ and then at intervals of no more than ten (10) days for the first month after initiation~~[induction]~~; and

(ii) At intervals of no more than fourteen (14) days for the second month after initiation~~[induction]~~.

b.

(i) If the patient demonstrates objective signs of ~~[positive]~~ treatment progress, the licensee shall ensure that the patient is seen at least once monthly thereafter.

(ii) If two (2) years after initiation of treatment, the patient is being prescribed Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone for opioid use disorder and the patient has demonstrated objective signs of ~~[positive]~~ treatment progress, including documented evidence that the patient has been compliant with the treatment plan and all treatment directives for at least two (2) years, then the licensee may require that the patient be seen only by the licensee at least once every three (3) months.

(iii) The licensee shall see the patient in shorter intervals if the patient demonstrates any noncompliance with the treatment plan.

c. If extenuating circumstances arise that require a patient to unexpectedly reschedule a physician visit, the licensee shall make best efforts to see the patient as soon as possible and document the circumstances in the patient chart.

4. At least every three (3) months after initiation of treatment, the licensee shall evaluate the patient to determine whether the patient's dosage should be continued or modified and shall appropriately document that evaluation and clinical reasoning in the patient's chart.

5. At least once every three (3) months, the licensee shall obtain KASPER reports to help guide the treatment plan.

a. If the KASPER indicates any unexpected~~[abnormal]~~ findings, the licensee shall incorporate those findings into appropriate clinical reasoning to support the continuation or modification of treatment and shall accurately document the same in the patient record.

b. Appropriate clinical reasoning may include adjustment of dose strength, adjustment of frequency of visits, increased drug screening, a consultation with a specialist, or an alternative treatment.

c. Every twelve (12) months following initiation of treatment, if a patient's prescribed daily therapeutic dosage exceeds the dose equivalency of sixteen (16) milligrams buprenorphine generic tablet per day and the licensee is not certified by the American Board of Addiction Medicine, the American Board of Preventive Medicine in addiction medicine, the American Board of Medical Specialties (ABMS) in psychiatry, or an American Osteopathic Association (AOA) certifying board in addiction medicine or psychiatry, then the licensee shall~~[-obtain]~~ refer the patient for a formal

consultation ~~with~~^{from} a physician who is certified by the American Board of Addiction Medicine, the American Board of Medical Specialties (ABMS) in psychiatry, or an American Osteopathic Association (AOA) certifying board in addiction medicine or a physician who has completed an addiction psychiatry fellowship for an opinion as to whether continued treatment and dosage is appropriate and shall accurately document the results of that consultation in the patient chart. The formal consultation may occur via telehealth if it would meet the same standards of acceptable and prevailing evaluative practices of a physical in-person evaluation.

d. The licensee shall adjust dosages according to the individual patient's condition and within acceptable and prevailing medical standards, with the goal of improving the patient's quality of life and ability to function in the community.

e. Every twelve (12) months following initiation of treatment, the licensee shall evaluate for and document the medical necessity for continued treatment at the established dose.

f. The licensee shall ensure that the patient is drug tested. A patient in early stages of treatment shall be tested at least once weekly and as the patient becomes more stable in treatment, the frequency of drug testing may be decreased, but shall be performed at least on a monthly basis. Individual consideration may be given for less frequent testing if a patient is in sustained remission. If the patient returns to substance use after a period of abstinence, the licensee shall resume the early treatment testing schedule, in conjunction with an adapted or intensified treatment plan.

(i) Except as **established** in this subclause, each drug screen shall at a minimum screen for buprenorphine, methadone, opioids, THC, benzodiazepines, amphetamines, and cocaine. On intake and at least once a year thereafter, the licensee shall obtain a random and unannounced comprehensive drug screen that shall also screen for gabapentin and illicit substances commonly used in the geographical region.

(ii) If a drug screen indicates any unexpected^[abnormal] findings, the licensee shall incorporate those findings into appropriate clinical reasoning to support the continuation or modification of treatment and shall accurately document the same in the patient record.

(iii) Appropriate clinical reasoning may include adjustment of dose strength, adjustment of frequency of visits, increased drug screening with urine confirmation, a consultation with a specialist, or an alternative treatment.

6. If at any time during treatment, the licensee observes patterns of unexpected results in the patient's urine drug screens or KASPER data, then the licensee shall:

a. Refer the patient out to a higher level of care; or

b. Increase the intensity of treatment and continue to monitor for unexpected urine drug screen results and KASPER data.

7.[6.] The licensee shall document a plan for handling any lost or stolen medication, which shall not provide for the automatic replacement of medication prior to the specified interval date.

~~[Section 3.] [Use of transmucosal buprenorphine mono-product or buprenorphine combined with naloxone for treatment of opioid use disorder in an emergency situation or inpatient setting.]~~

~~[(1)] [In an emergency, including in a hospital emergency department or similar outpatient urgent care setting, or in an inpatient setting, licensees may offer and initiate buprenorphine treatment to patients who present with opioid use disorder, without meeting the requirements established in Sections 1 and 2 of this administrative regulation and to the extent permitted by federal law, if:]~~

~~[(a)] [The licensee has determined that the use of buprenorphine mono-product or buprenorphine combined with naloxone will not result in a harmful interaction with other medications or substances in the patient's system, including benzodiazepines, sedative hypnotics, carisoprodol, or tramadol;]~~

~~[(b)] [The licensee obtains and documents written informed consent from the patient specific to risks and benefits of buprenorphine treatment; and]~~

~~[(c)] [The licensee provides the patient with written instructions and contact information for appropriate follow up care, including bridge provider services, residential treatment providers, and outpatient treatment providers.]~~

~~[(2)] [The licensee shall initiate buprenorphine treatment under an observed induction protocol with an initial dose not to exceed the dose equivalency of four (4) milligrams buprenorphine generic tablet, which may be followed by subsequent doses, up to a maximum of twenty-four (24) milligrams buprenorphine generic tablet, if withdrawal persists and is not improving.]~~

Section 4. Professional Standards for Documentation of Patient Assessment, Education, Treatment Agreement and Informed Consent, Action Plans, Outcomes, and Monitoring.

(1) Each licensee prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone shall obtain and document all relevant information in a patient's medical record in a legible manner and in sufficient detail to enable the board to determine whether the licensee is conforming to professional standards for prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone and other relevant professional standards **established[set forth]** in this administrative regulation.

(2) If a licensee is unable to conform to professional standards for prescribing, dispensing, or administering Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone as set forth in this administrative regulation due to circumstances beyond the licensee's control, or the licensee makes a professional determination that it is not appropriate to comply with a specific standard, based upon the individual facts applicable to a specific patient's diagnosis and treatment, the licensee shall document those circumstances in the patient's record and only prescribe, dispense, or administer Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone to the patient if the patient record appropriately justifies the prescribing, dispensing, or administering of Buprenorphine-Mono-Product or Buprenorphine-Combined-With-Naloxone under the circumstances and in accordance with SAMHSA guidelines as set forth in: Substance Abuse and Mental Health Services Administration, Medications for Opioid Use Disorder, Treatment Improvement Protocol (TIP) Series 63, Publication No. PEP21-01-002~~[PEP20-02-01-006]~~, Rockville, MD: Substance Abuse and Mental Health Services Administration, 2021~~[2020]~~.

Section 5. Violations. Failure to comply with or a violation of the professional standards established in **[Sections 2, 3]**~~[-and 4 of-]~~ this administrative regulation shall constitute a "departure from, or failure to conform to the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky," in violation of KRS 311.850(1)(p) and (s), KRS 311.595(12) and (9), as illustrated by KRS 311.597(4), and may constitute a violation of KRS 311.595(9), as illustrated by KRS 311.597(3), subjecting the licensee to sanctions authorized by KRS 311.595 and 311.850.

Section 6. Incorporation by Reference.

(1) Substance Abuse and Mental Health Services Administration, "Medications for Opioid Use Disorder, Treatment Improvement Protocol (TIP) Series 63, Publication No. PEP21-01-002~~[PEP20-02-01-006]~~", **2021, is incorporated by reference**~~[2020]~~.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Medical Licensure, 310 Whittington Parkway, Suite 1B, Louisville, Kentucky 40222, Monday through Friday, 8:00 a.m. to 4:30 p.m.

(3) This material may also be obtained on the board's website~~[Web site]~~ at kbml.ky.gov.

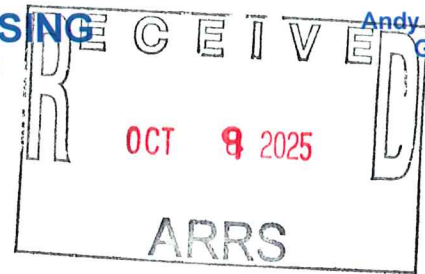
CONTACT PERSON: Leanne K. Diakov, General Counsel, Kentucky Board of Medical Licensure, 310 Whittington Parkway, Suite 1B, Louisville, Kentucky 40222, phone (502)764-2613, fax (502) 429-7118, email leanne.diakov@ky.gov.

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KENTUCKY BOARD OF NURSING

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Andy Beshear
Governor



October 6, 2025

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

Re: 201 KAR 20:161. Investigations and depositions of compliants.

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 201 KAR 20:161, the Kentucky Board of Nursing proposes the attached suggested substitute Amendment to 201 KAR 20:161.

Sincerely,


Jeffrey R. Prather, General Counsel
Kentucky Board of Nursing
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Email: Jeffrey.prather@ky.gov

SUGGESTED SUBSTITUTE

BOARDS AND COMMISSIONS
Board of Nursing

201 KAR 20:161. Investigations~~[Investigation]~~ and dispositions~~[depositions]~~~~[disposition]~~ of complaints.

RELATES TO: KRS Chapter 13B, 218A.205, 314.011, 314.031, 314.035, 314.071(4), 314.091, 314.107, 314.137, 314.402, 314.404, 314.475, 314.991(3), 42 U.S.C. 1320a-7e et seq., 1396r-2 et seq., 45 C.F.R.

Part 60

STATUTORY AUTHORITY: KRS 218A.205, 314.035, 314.131(1), 314.137, 314.402, 314.404

CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with the requirements of 2025 RS HB 6, Section 8, because the amendments to this regulation will not have a major economic impact.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131(1) authorizes the Board of Nursing to promulgate administrative regulations necessary to enable it to carry into effect the provisions of KRS Chapter 314. This administrative regulation establishes the procedures for the investigation and disposition of complaints received by the board.

Section 1. Receipt of Complaints.

(1) The board shall receive and process each complaint made against a credential holder, licensee, holder of a multistate licensure privilege pursuant to KRS 314.475, ~~[or]~~ applicant, or unlicensed individual if the complaint alleges acts that may be in violation of the provisions of KRS Chapter 314, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1.

(2)

(a) A complaint shall be in writing and shall be dated and fully identify the individual by name. The complaint may be submitted electronically, by fax, hand-delivery, or mail.

(b) The president of the board or the executive director, or their designee shall file a complaint based upon information received by oral, telephone, or written communications if the facts of the complaint are found to be accurate and indicate acts that may be in violation of the provisions of KRS Chapter 314, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1.

(3) A certified copy of a court record for a misdemeanor or felony conviction, or a certified copy of disciplinary action in another jurisdiction shall be considered a valid complaint.

(4) A complaint shall be investigated.

(a) If the complaint establishes a potential violation or the conduct falls within the statutory or regulatory instances which shall be investigated, the board shall send a copy of the complaint to the credential holder, licensee, holder of a multistate privilege, or applicant to the address of record by United States Postal Service regular mail. If the board is aware of the person's email address, it may send a copy by email as well.

1. For credential holders and licensees, the address of record is the last known address in accordance with KRS 314.107, 201 KAR 20:478, Section 3(1), or 201 KAR 20:630, Section 4(1).

2. For applicants for nurse licensure, the address of record is the last known address in accordance with 201 KAR 20:370, Section 1(10).

3. For applicants for a dialysis technician credential or licensure as a licensed certified professional midwife, the address of record is the last known address reported to the board by the applicant.

4.~~[3.]~~ For holders of a multistate privilege, the address of record is the last known mailing address of record reported by the primary state of residence board of nursing to the NURSUS database.

5.~~[4.]~~ All further mailings to the respondent subsequent to the complaint shall be mailed by U.S. Postal Service regular mail to the address of record, except:

a. If/When a respondent has submitted a written request for email delivery in lieu of regular mail;
or

b. A notice of hearing pursuant to KRS 13B.050 ~~and~~ or a final order pursuant to KRS 13B.120, both of which shall be mailed by U.S. Postal Service certified mail to the address of record, notwithstanding whether a respondent has submitted a written request for email delivery under clause a. of this subparagraph/subsection.

(b) A written, legible, verified response shall be filed with the board within thirty (30) days of receipt by the individual against whom the complaint has been made.

(c) The staff may request an informal conference with the individual against whom the complaint has been made.

(5)

(a) A complaint shall be evaluated to find if a violation of the provisions of KRS Chapter 314, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1 has been alleged.

(b) The credentials review panel or the executive director, or their designee shall make the determination as to the disposition of the complaint pursuant to Section 2 of this administrative regulation.

(6)

(a) All preliminary information shall be treated as confidential during the investigation and shall not be disclosed to board members or to the public, except as provided by KRS 314.475. The board shall make available to the public the fact that an investigation is pending.

(b) If a board member has participated in the investigation or has substantial knowledge of facts prior to a hearing on the complaint that may influence an impartial decision by the member, that member shall not participate in the adjudication of the complaint at a hearing, pursuant to KRS Chapter 13B. A board member may participate in the consideration and ratification of an order or consent decree that has been submitted to the full board pursuant to this administrative regulation.

(7)

(a) If/When the board receives a report of improper, inappropriate, or illegal prescribing or dispensing of a controlled substance by an advanced practice registered nurse (APRN), it shall notify, within three (3) business days:

1. The Department of Kentucky State Police;
2. The Office of the Attorney General; and
3. The Cabinet for Health and Family Services, Office of the Inspector General.

(b) An investigation concerning a complaint filed against an APRN pertaining to the improper, inappropriate, or illegal prescribing or dispensing of controlled substances shall be commenced within seven (7) days of the filing of the complaint.

(c) The investigation shall be completed and a determination as to the disposition of the complaint shall be made within 120 days of the receipt of the complaint, unless:

1. The circumstances of the complaint make it impractical to produce the charging decision pursuant to this subsection; or
2. An extension of time is requested by a law enforcement agency due to an ongoing criminal investigation.

Section 2. Disposition of Complaints.

(1) Disposition of complaints shall be as follows:

(a) If there is a determination by the executive director or designee that there is insufficient evidence of a violation or that a violation has not occurred, there shall not be further action unless warranted by future evidence;

(b)

1. The complaint may be referred to the credentials review panel of the board by the executive director or designee for disposition pursuant to this section or for issuance of a letter of concern; or
2. It may be found that there is probable cause that a violation of KRS 314.091, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1, has occurred.

(c) In cases involving practice as a nurse on the privilege pursuant to KRS 314.475, the case may be referred to the home state.

- (2) Upon determination that there is probable cause that a violation of KRS 314.091, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1, has occurred, the complaint shall be handled as follows:
- (a) An administrative hearing may be scheduled pursuant to subsection (3) of this section;
 - (b) An agreed order may be offered pursuant to subsection (4) of this section; or
 - (c) A consent decree may be offered, pursuant to subsection (5) of this section.
- (3) Administrative hearings.
- (a) Hearings shall be held pursuant to KRS 314.091, Chapter 13B, and 201 KAR 20:162.
 - (b) Notice of the hearing and charges shall be signed by the executive director or designee.
- (4) Agreed order.
- (a) The board may enter into an agreement with an individual for denial, revocation, voluntary surrender, suspension, probation, reinstatement, limitation of credential or license, or reprimand, and to impose a civil penalty, if the individual agrees to waive the right to a hearing. The terms of the agreement may include other conditions or requirements to be met by the individual, including those listed in Section 4 of this administrative regulation.
 - (b) The agreed order may contain terms that ensure protection of public health and safety or that serve to educate or rehabilitate the individual.
 - (c) The agreed order, if approved by the board or the board designee, shall terminate the investigation of a specific complaint.
 - (d) If the agreed order is not approved by the board, or the board designee, charges may be brought pursuant to KRS 314.091, 201 KAR 20:478, Section 2, or 201 KAR 20:630, Section 1, and the matter shall be resolved as directed therein.
- (5) Consent decree.
- (a) If an individual agrees to waive the right to a hearing, the board may issue a consent decree in accordance with the provisions of KRS 314.991 to impose a civil penalty and other terms and conditions as listed in Section 4 of this administrative regulation against an individual who has:
 - 1. Practiced as a nurse in the Commonwealth of Kentucky without a temporary work permit, multistate licensure privilege pursuant to KRS 314.475, or a current license or provisional license issued by the board;
 - 2. Practiced as an advanced practice registered nurse in the Commonwealth of Kentucky without current licensure issued by the board prior to filing an application for licensure;
 - 3. Practiced as an advanced practice registered nurse after expiration of the current certification granted by the appropriate national organization or agency;
 - 4. Practiced as a licensed certified professional midwife after the license lapsed due to non-renewal;
 - 5. Practiced as a dialysis technician after the dialysis technician credential lapsed due to non-renewal;
 - 6.~~[4.]~~ Rectified noncompliance with continuing education requirements, as established in 201 KAR 20:215, Section 3;
 - 7.~~[5.]~~ Tested positive on a drug screen for a nonprescribed drug,~~[or]illicit substance,~~ or THC without proof of certification or registry identification card, and obtained a substance use disorder evaluation that does not indicate a diagnosis of substance use disorder;
 - 8.~~[6.]~~ Failed to report a criminal conviction or disciplinary action against any professional license or credential in Kentucky or in another jurisdiction on an application;
 - 9.~~[7.]~~ Committed a substandard nursing, dialysis technician, or licensed certified professional midwife act where:
 - a. The continuing practice by the respondent~~[nurse]~~ does not pose a risk of harm to the client or another;
 - b. The potential risk of physical, emotional, or financial harm to the client due to the incident is minimal;
 - c. The respondent~~[nurse]~~ subsequently exhibits a conscientious approach to and accountability for his or her practice; and
 - d. The respondent~~[nurse]~~ subsequently has demonstrated the knowledge and skill to practice safely; or

10.[8-] As an advanced practice registered nurse (APRN) [with a Collaborative Agreement for Prescriptive Authority for Controlled Substances (CAPA-CS)]who has obtained a DEA registration number for the prescribing of controlled substances:

- a. Failed to register with KASPER or the PDMP, as defined in 201 KAR 20:057, Section 1;
- b. Failed to report a DEA registration number to the board; or
- c. Failed to notify the board of ~~[the]~~a CAPA-NS or CAPA-CS, or the rescission of either.

(b) The issuance of a consent decree shall be restricted to ~~[only]~~those individuals described in paragraph (a) of this subsection who have not ~~[previously]~~been issued a consent decree for the same or substantially similar violation and that is ineligible for expungement under 201 KAR 20:410. **If/When** determining whether a same or substantially similar prior consent decree would disqualify an individual's eligibility for another consent decree, the board shall disregard 201 KAR 20:410, Section 5.~~[and who have not violated any other provision of KRS Chapter 314 or any other laws of the Commonwealth of Kentucky or of the United States.]~~

(c) ~~[The license may be issued by board staff after the individual meets all requirements for licensure upon ratification of the consent decree by the board.]~~

~~[(d)]~~ Upon ratification by the board of the consent decree, the investigation of the specific complaint shall be terminated.

~~[(d)]~~(e) If the consent decree is not ratified by the board, charges may be brought pursuant to KRS 314.091, and the matter shall be resolved as directed therein.

~~[(e)]~~(f) Consent decrees that have been ratified by the board shall not be reported to other state boards of nursing, the national council of state boards of nursing, or other organizations, unless required by law.

(6) Special standards for an Advanced Practice Registered Nurse (APRN) with a Collaborative Agreement for Prescriptive Authority for Controlled Substances (CAPA-CS).

(a) An APRN licensed in Kentucky or an applicant for APRN licensure in Kentucky who has been convicted of any felony offense after July 20, 2012, relating to controlled substances in any state shall be permanently banned from prescribing controlled substances.

(b) An APRN licensed in Kentucky or an applicant for licensure in Kentucky who has been convicted of any misdemeanor offense after July 20, 2012, relating to prescribing or dispensing controlled substances in any state shall have their authority to prescribe controlled substances suspended for at least three (3) months and further restricted as established by the board.

(c) The board shall mirror in time and scope any disciplinary limitation placed on an APRN licensed in Kentucky by a licensing board of another state if the disciplinary action resulted from improper, inappropriate, or illegal prescribing or dispensing of controlled substances.

(d) An applicant for APRN licensure in Kentucky ~~[as an APRN]~~who has disciplinary action by a licensing board of another state which resulted from improper, inappropriate, or illegal prescribing or dispensing of controlled substances shall have his or her application denied.

(e) Cases that come under KRS 314.011(21)(c) shall not be considered convictions for the purpose of this subsection.

Section 3. The executive director or designee shall notify the complainant and the person against whom the complaint was made of the final disposition of the case.

Section 4. The restrictions or conditions imposed by the board on a temporary work permit, DT applicant, holder of a multistate licensure privilege, or license or provisional license may include the following:

(1) Prohibiting the performance of specific healthcare~~[nursing]~~ acts including:

(a) Access to, responsibility for, or the administration of controlled substances;

(b) Administration of medication;

(c) Supervisory functions; or

(d) Any act that the individual is unable to safely perform;

(2) Requiring the individual have continuous, direct, or on-site supervision by a licensed nurse, physician, or another specifically identified classification of professional licensure in Kentucky;

(3) Specifying the individual's practice setting;

(4) Specifying the types of patients to whom the individual may give professional~~[nursing]~~ care;

- (5) Requiring the individual to notify the board in writing of a change in name, address, or employment;
- (6) Requiring the individual to have his or her employer submit to the board written reports of performance or compliance with the requirements established by the board;
- (7) Requiring the individual to submit to the board evidence of:
 - (a) Physical, mental health, neuropsychological, psychosocial, psychosexual, or substance use disorder evaluations;
 - (b) Counseling;
 - (c) Therapy; or
 - (d) Drug screens;
- (8) Meeting with representatives of the board;
- (9) Issuing the license or temporary work permit for a specified period of time;
- (10) Requiring the individual to notify the board in writing of criminal arrests, charges, or convictions;
- (11) Requiring the individual to be employed as a nurse, dialysis technician, or licensed certified professional midwife for a specified period of time; or
- (12) Requiring the individual to complete continuing education or other training in a specific subject.

Section 5. Anonymous Complaints. Section 1(2)(a) of this administrative regulation notwithstanding, the board shall accept an anonymous complaint if the complaint is accompanied by sufficient corroborating evidence as would allow the board to believe, based upon a totality of the circumstances, that a reasonable probability exists that the complaint is meritorious.

Section 6. In accordance with 42 U.S.C. 1320a-7e et seq., 1396r-2 et seq., and 45 C.F.R. Part 60[federal law], the board shall submit all disciplinary actions to the National Practitioner Data Bank of the United States Department of Health and Human Services either directly or through a reporting agent.

Section 7.

- (1) The board may conduct a random audit of the prescribing practices of an advanced practice registered nurse (APRN) through a review of data in KASPER or PDMP[data], as defined in 201 KAR 20:057, Section 1, such as patient records, pharmacy records, or other relevant material.
- (2) An APRN who is audited shall cooperate with the audit. Failure to cooperate may subject the APRN to disciplinary action pursuant to KRS 314.091.
- ~~[(3)] [The board may initiate disciplinary action pursuant to this administrative regulation for any potential violation of the law.]~~

Section 8. The board may initiate disciplinary proceedings pursuant to this administrative regulation for any potential violation of KRS Chapter 314 or 201 KAR Chapter 20.

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KENTUCKY BOARD OF NURSING

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October 6, 2025

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

Re: 201 KAR 20:410. Expungement of records.

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 201 KAR 20:410, the Kentucky Board of Nursing proposes the attached suggested substitute Amendment to 201 KAR 20:410.

Sincerely,


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SUGGESTED SUBSTITUTE

BOARDS AND COMMISSIONS
Board of Nursing

201 KAR 20:410. Expungement of records.

RELATES TO: KRS 314.131

STATUTORY AUTHORITY: KRS 314.131(1), (10)[(9)]

CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with the requirements of 2025 RS HB 6, Section 8, because the amendments to this regulation will not have a major economic impact.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131(1) and (10)[(9)] authorize the Board of Nursing to promulgate administrative regulations to establish which disciplinary records may be expunged. This administrative regulation establishes which records may be expunged and the procedure for expungement.

Section 1. Definitions[Definition].

(1) "Encumbrance" means a revocation or suspension of, or any limitation on, the full and unrestricted practice imposed by the board on any licensee or credential holder.

(2) "Expungement" means that all affected physical records ~~are~~[shall be] destroyed and affected electronic records removed from the board's computer systems so that the matter ~~does~~[shall] not appear on a license validation search via the board website or any other search of board records. ~~[sealed and that the proceedings to which they refer shall be deemed never to have occurred.]~~

(3) "Complex reprimand" means disciplinary action that resulted in an encumbrance.

(4) **"Consent decree" means an agreement pursuant to 201 KAR 20:161, Section 2(5).**

(5) "Plain reprimand" means a disciplinary action applicable to a licensee or credential holder that is not a complex reprimand.

~~[(5) "Consent decree" means an agreement pursuant to 201 KAR 20:161, Section 2(5).]~~

Section 2. **(1) The board shall not report cases that have been expunged to another state agency, board of nursing, or organization.**

(2) The board[, and] shall reply to any inquiry regarding the expunged records that no record exists on the matter and that the proceedings to which ~~the records~~[they] refer shall be ~~found~~[deemed] never to have occurred.

(3) The individual whose records have been expunged may state that the proceedings to which the records[they] referred ~~to~~ never occurred. ~~[A nurse whose record has been expunged may state that disciplinary records do not exist upon inquiry.]~~

Section 3. Upon a written request from an individual~~[a nurse]~~ against whom disciplinary action or a consent decree has been taken, the board shall expunge the disciplinary actions and consent decrees indicated in subsections (1) through (3) of this section~~[below]~~, subject to the exceptions set forth in Sections 4 ~~through~~[1] 6 of this administrative regulation~~[records relating to the following categories of disciplinary action]~~:

(1) Consent decrees that are at least three (3)~~[five (5)]~~ years old if all the terms of the consent decree have been met;

(2) Agreed orders and decisions that are at least five (5)~~[ten (10)]~~ years old and that resulted in a plain reprimand, if ~~[there has not been subsequent disciplinary action and]~~ all ~~[of]~~ the terms of the agreed order or decision have been met; and

(3) Agreed orders and decisions that are at least ~~ten (10)~~twenty (20) years old that resulted in a complex reprimand, if ~~[there has not been subsequent disciplinary action and]~~ all [of] the terms of the agreed order or decision have been met.

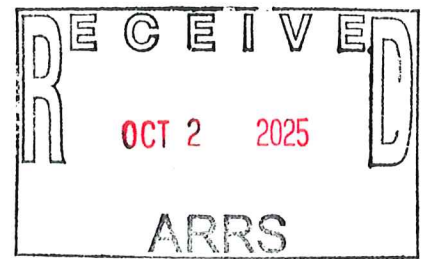
Section 4. The calculation of the time under Section 3 of this administrative regulation shall be tolled until the individual who is subject to a consent decree or disciplinary action has satisfied all **terms** ~~[requirements specified]~~ in the consent decree or disciplinary action, and the length of time of the existence of the consent decree or disciplinary action shall be measured from the date all **terms**~~[requirements listed]~~ were **satisfied**~~[met]~~ by the individual.~~[The board shall not report cases that have been expunged to another state agency, other board of nursing, or other organization.]~~

Section 5. Expungement of a consent decree or disciplinary action shall not occur if there is an open and active Board of Nursing investigation or disciplinary proceeding pending against the affected individual pursuant to 201 KAR 20:161 or 201 KAR 20:162.

Section 6. Expungement of a disciplinary action shall be unavailable if the affected individual has had subsequent disciplinary action that is also ineligible for expungement. Consideration regarding an individual's eligibility for expungement **shall**~~[must]~~ always begin with **an** assessment of the age and relevant tolling as to the most recent consent decree or disciplinary action.

Section 7. Without a request pursuant to Section 3 of this administrative regulation, the board may initiate expungement of records subject to the criteria set forth in ~~[Sections 3 through 7 of]~~ this administrative regulation.

CONTACT PERSON: Jeffrey R. Prather, General Counsel, Kentucky Board of Nursing. 312 Whittington Parkway, Suite 300 Louisville, Kentucky 40222, (502) 338-2851, Jeffrey.Prather@ky.gov.



KENTUCKY BOARD OF PHYSICAL THERAPY

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Stephen Curley
EXECUTIVE DIRECTOR

October 2, 2025

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

RE: 201 KAR 22:020. Eligibility and credentialing procedure.

Dear Ms. Caudill:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 201 KAR 22:020, the Kentucky Board of Physical Therapy proposes the attached amendment to 201 KAR 22:020.

Sincerely,

A handwritten signature in blue ink, appearing to read "Stephen Curley".

Stephen Curley, Executive Director
Kentucky Board of Physical Therapy

TEAM
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Final, 9-26-2025

SUGGESTED SUBSTITUTE

BOARDS AND COMMISSIONS

Board of Physical Therapy

201 KAR 22:020. Eligibility and credentialing procedure.

RELATES TO: KRS ~~[164.772,]~~ 327.010, 327.050, 327.060, 327.075, 327.080, 327.310

STATUTORY AUTHORITY: KRS 327.040(1), (11), (13)

CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with the requirements of 2025 RS HB 6, Section 8.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(1) requires the board to determine if physical therapist applicants meet the qualifications and standards required by KRS Chapter 327. KRS 327.040(13) authorizes the board to promulgate administrative regulations regarding the qualifications for physical therapist assistants. This administrative regulation establishes the criteria for eligibility, methods, and procedures of qualifying for a credential to practice physical therapy in Kentucky.

Section 1. An application shall be accepted for credentialing as a physical therapist or physical therapist assistant based on successful completion by the applicant of one (1) of the following processes:

- (1) Examination;
- (2) Endorsement; or
- (3) Reinstatement.

Section 2. Examination Candidate.

(1) To be eligible for the examination, the applicant for licensure as a physical therapist shall:

- (a) Have successfully completed the academic and clinical requirements of a physical ~~therapist~~therapist program accredited by CAPTE;
- (b) Submit certification of completion by the educational administrator of that program;
- (c) Have successfully completed the Jurisprudence Exam;
- (d) Submit a complete Application for Credentialing that includes a photo taken within one (1) year;
- (e) Submit the correct, nonrefundable fee as required in 201 KAR 22:135;
- (f) Submit to the board a completed nationwide criminal background check as required by KRS 327.310 with the background investigation completed no later than six (6) months prior to the date of the filing of the application;
- (g) If applicable, submit on an Applicant Special Accommodations Request Form a request for a reasonable accommodation in testing due to a documented disability; and
- (h) Register for the NPTE examination.

(2) To be eligible for the examination, the applicant for certification as a physical therapist assistant shall:

- (a) Have successfully completed the academic and clinical requirements of a physical ~~therapist~~therapist or physical therapist assistant program accredited by CAPTE; and
 - (b) Complete the requirements of subsection (1)(b) through (h) of this section.
- (3) ~~[Effective July 1, 2012,]~~ After ~~[after]~~ six (6) failed attempts at ~~[either]~~ the physical therapist or physical therapist assistant examination, ~~per exam level~~or combination thereof, in any jurisdiction, an applicant for licensure or certification shall not be eligible to register for any additional examinations.

Section 3. An applicant for credentialing who is registered for the examination in another jurisdiction shall:

- (1) Meet the eligibility requirements of Section 2 of this administrative regulation; and
- (2) Register with the FSBPT Score Transfer Service to have results submitted to Kentucky.

Section 4. To be eligible for a temporary permit, the candidate shall:

- (1) Meet the qualifications of Section 2 or 3 of this administrative regulation, except for the retake provisions in Section 2(3) of this administrative regulation;
- (2) Complete a Supervisory Agreement for Applicant with Temporary Permit with one (1) or more physical therapists; and
- (3) Have not failed either the physical therapist or physical therapist assistant examination in any jurisdiction.

Section 5.

- (1) Upon issuance of a temporary permit, the physical therapist or physical therapist assistant applicant shall practice only under the supervision of a physical therapist currently engaged in the practice of physical therapy in Kentucky who:
 - (a) Has practiced in Kentucky for more than one (1) year; and
 - (b) Has an unrestricted license.
- (2) A supervising physical therapist:
 - (a) Shall be on-site at all times during the practice of the applicant with a temporary permit;
 - (b) Shall be responsible for the practice of physical therapy by the applicant with a temporary permit;
 - (c) Shall review, approve, date, and co-sign all physical therapy documentation by the applicant with a temporary permit;
 - (d) May designate an alternate supervising physical therapist who meets the qualifications of subsection (1)(a) and (b) of this section. The alternate supervising physical therapist shall sign and date written documentation of the acceptance of the responsibility as identified in paragraph (a) through (c) of this subsection; and
 - (e) Shall notify the board immediately if the supervisory relationship is terminated.
- (3) The applicant with a temporary permit shall:
 - (a) Disclose the applicant's temporary credential status to all patients prior to initiating treatment;
 - (b) Sign documentation with temporary permit number and designation as required in 201 KAR 22:053, Section 5(5)(a) or (b); and
 - (c) Notify the board immediately if the supervisory relationship is terminated.
- (4) The temporary permit shall expire the earlier of:
 - (a) Six (6) months from the date of issuance; or
 - (b) Notice of exam results by the board. A temporary permit holder who is registered for the examination in another jurisdiction shall register with the FSBPT Score Transfer Service to have results submitted to Kentucky within forty-eight (48) hours of the release of the exam results.

Section 6. A physical therapist applicant who meets the qualifications for physical therapy licensure by examination may become a special candidate for physical therapist assistant certification by examination.

Section 7. To be eligible for credentialing by endorsement, the applicant shall:

- (1) Have successfully completed the academic and clinical requirements of a physical ~~therapist~~**[therapy]** or physical therapist assistant program accredited by CAPTE;
- (2) Meet the requirements established in Section 2(1)(b) through (f) of this administrative regulation;
- (3) Have successfully completed the NPTE or its equivalent, predecessor examination and register with the FSBPT Score Transfer Service to have results submitted to Kentucky:
 - (a) ~~For any applicant~~**[A passing score in Kentucky for the person]** who took the NPTE prior to July 1, 1993, ~~the board may issue a credential to a physical therapist or physical therapist assistant who has a current unrestricted credential from another jurisdiction~~ **[of the United States]** ~~if that person meets all qualifications under KRS 327.050, 327.060, and this administrative regulation~~**[201 KAR 22:020]** ~~at the time of the applicant's initial credentialing~~**[shall be at least equal to the national average raw score minus one and five tenths (1.5) standard deviation set equal to a converted score of seventy-five (75)]**; or
 - (b) After July 1, 1993, a passing score shall be the criterion referenced passing point recommended by the FSBPT set equal to a scaled score of 600;
- (4) Have an active credential in this profession in another jurisdiction; and

(5) Have verification of credentials showing the credential has never been revoked, suspended, placed on probation, or is not under disciplinary review in another jurisdiction upon application.

Section 8. To be eligible for reinstatement, the applicant shall meet the requirements in 201 KAR 22:040.

Section 9. A credential issued by the board shall be in effect until March 31 of the next odd-numbered year.

Section 10. A foreign-educated physical therapist shall comply with the provisions of 201 KAR 22:070.

Section 11. Incorporation by Reference.

(1) The following material is incorporated by reference:

- (a) "Application for Credentialing", December 2011;
- (b) "Supervisory Agreement for Applicant with Temporary Permit", January 2017; and
- (c) "Applicant Special Accommodations Request Form", February 2022.

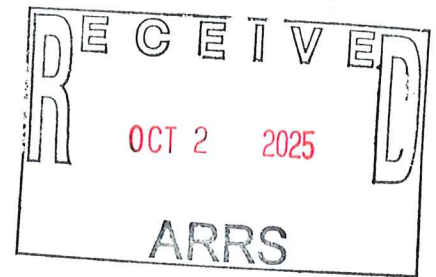
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(3) This material is also available on the board's website[Web site] at pt.ky.gov/Forms/Pages/ExamApplicant.aspx.

CONTACT PERSON: Stephen Curley, Executive Director, Board of Physical Therapy, 312 Whittington Parkway, Suite 102, Louisville, Kentucky 40222, phone (502) 429-7140, fax (502) 429-7142, email Stephen.Curley@ky.gov.



KENTUCKY BOARD OF SOCIAL WORK
125 Holmes Street, Suite 310
Frankfort, Kentucky 40601
(502) 564-2350



Andy Beshear

Governor

Marc Kelly

Executive Director

September 3, 2025

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

Re: 201 KAR 23:075. Continuing education for renewal

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 201 KAR 23:075, the Kentucky Board of Social Work proposes the attached amendment to 201 KAR 23:075.

Please do not hesitate to contact me if you have any questions.

Sincerely,

Marc Kelly
Executive Director
Kentucky Board of Social Work
125 Holmes St., Suite 310
Frankfort, Kentucky 40601



SUGGESTED SUBSTITUTE – To Amended After Comments Version

BOARDS AND COMMISSIONS
Board of Social Work

201 KAR 23:075. Continuing education for renewal.

RELATES TO: KRS ~~194A.540, 210.366~~, 335.070(3), **335.130, 620.020**~~[335.130(4)]~~

STATUTORY AUTHORITY: KRS 335.070(3), (6), 335.130(4)

CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with the requirements of 2025 RS HB 6, Section 8.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 335.070(3) authorizes the board to promulgate administrative regulations pursuant to KRS Chapter 13A to carry out the provisions of KRS 335.010 to 335.160 and ~~[KRS]~~335.990. KRS 335.070(6) and ~~[KRS]~~335.130(4) allow the board to require continuing education as a condition of license renewal. This administrative regulation describes the requirements for continuing education for renewal and prescribes methods and standards for the board to approve continuing education courses.

Section 1. Definitions.

(1) "Academic course" means a course offered by an accredited board-approved postsecondary institution that is~~["means a graduate level social work course"]~~:

- (a) Designated by a social work title or content; or
- (b) A graduate level academic course relevant to social work.

(2) "Approved" means recognized by the Kentucky Board of Social Work.

(3) "Continuing education hour" and "instruction" means fifty (50) continuous clock minutes of participation in continuing education programs.

(4) "Extension" means granting additional time for a licensee to complete the required continuing education hours for renewal.

(5) "In-person learning" means courses or programs attended in person before a live presenter.

~~(6) ["Technology-mediated learning" means courses or programs delivered through electronic media or technology, including:~~

- ~~(a) Distance learning programs;~~
- ~~(b) Online or web-based platforms;~~
- ~~(c) Teleconferencing or virtual seminars;~~
- ~~(d) Self-paced online or self-study courses, provided mechanisms to assess comprehension, engagement, and completion are included, such as real-time quizzes or post-tests; or~~
- ~~(e) Other technology-assisted learning methods approved by the board.~~

~~(7)]~~"Program" means an organized educational experience, which is:

- (a) Planned and evaluated to meet behavioral objectives; and
- (b) Presented in one (1) session or a series.

~~(7) [(8) [(5)]~~ "Provider" means a person or an organization approved by the Kentucky Board of Social Work to provide a single continuing education program~~[over the course of one (1)-year]~~.

~~(8) [(9) [(6)]~~ "Relevant" means having content applicable to the practice of social work.

~~(9) [(10) [(7)]~~ "Sponsor" means a person or an organization approved by the Kentucky Board of Social Work to provide a~~[more than one (1)]~~ continuing education program or programs over the course of one (1) year from the date of approval.

~~(10) "Technology-mediated learning" means courses or programs delivered through electronic media or technology, including:~~

- ~~(a) Distance learning programs;~~
- ~~(b) Online or web-based platforms;~~
- ~~(c) Teleconferencing or virtual seminars;~~

(d) Self-paced online or self-study courses, provided mechanisms to assess comprehension, engagement, and completion are included, such as real-time quizzes or post-tests; or

(e) Other technology-assisted learning methods approved by the board.

(11)[(8)] "Training program in suicide assessment, treatment, and management" means an empirically supported training program approved by the board that is at least six (6) hours in length and contains suicide assessment including screening and referral, suicide treatment, and suicide management as required by KRS 210.366.

(12) "Undue hardship" means a verifiable condition that imposes a significant and demonstrable barrier to compliance, such as, severe financial hardship, serious health issues, or other exceptional circumstances as substantiated by appropriate documentation.

(13) "Waiver" means a formal exception that releases a licensee from having to complete the specified continuing education requirements.

Section 2. Accrual and Computation of Continuing Education Hours for Renewal.

(1) Each certified social worker and licensed clinical social worker shall complete a minimum of thirty (30) continuing education hours during the three (3) year period for renewal, which shall be completed in person or through technology-mediated learning~~[before a live presenter or through home or self-study, courses delivered through electronic media or technology including distance learning, online, or teleconference courses]~~.

(2) Each licensed social worker shall complete a minimum of fifteen (15) continuing education hours during the three (3) year period for renewal, which shall be completed in person or through technology-mediated learning~~[before a live presenter or through home or self-study, courses delivered through electronic media or technology including distance learning, online, or teleconference courses]~~.

(3) All continuing education hours shall be relevant to the licensee's level of licensure.

(4) Kentucky Code of Ethical Conduct. Each renewal period, as part of the required continuing education hours, each licensee shall complete a board approved minimum three (3) hour course on the Kentucky Code of Ethical Conduct established in 201 KAR 23:080, which shall be taken in person or through technology-mediated learning~~[before a live presenter or through courses delivered through electronic media or technology including distance learning, online, or teleconference courses]~~.

(a) The required course shall utilize 201 KAR 23:080 in whole or in part for the course and shall be a minimum of three (3) instruction hours.

(b) All courses shall provide a framework for ethical decision-making and provide a copy of 201 KAR 23:080.

(c) The required course ~~shall~~**[may]** focus on one (1) or more of the ~~[following]~~ topics of:

1. Maintaining Professional Boundaries: Recognizing and establishing boundaries to ensure professional integrity;[-]

2. Dual Relationships and Conflicts of Interest: Identifying and managing situations ~~if~~**[where]** personal and professional roles may overlap;[-]

3. Self-Disclosure: Understanding when, how, and if sharing personal information is appropriate;[-]

4. Client Engagement and Welfare: Prioritizing the client's best interests while fostering ethical and effective relationships;[-]

5. Confidentiality in Non-Clinical Practice: Ethical considerations for maintaining privacy in diverse social work settings;[-]

6. Mandatory Reporting, Duty to Warn, Subpoenas, and Court Orders: Balancing confidentiality with legal obligations and ethical considerations;[-]

7. Documentation and Record Keeping: Ensuring ethical accuracy, transparency, and confidentiality in professional records;[-]

8. Ethical Use of Technology in Social Work: Navigating telehealth, social media, and digital tools ethically;[-]

9. Ethical Decision-Making Models: Applying structured approaches to resolve ethical dilemmas effectively;[-]

10. Ethics in addressing implicit bias and promoting equity in social work practice;[-]

11. Practicing across state lines; or[-]

12. Other board approved topics related to 201 KAR 23:080.

(5) ~~[Clinical Social Work Supervision.]~~ Each renewal period, as part of the required continuing education hours, each licensed clinical social worker who is a board approved supervisor pursuant to 201 KAR 23:070, Section 4(1)(~~e~~)(~~d~~)(~~e~~2-), shall complete a three (3) hour, board approved clinical social work supervision course, which shall be taken in person or through technology-mediated learning~~[before a live presenter]~~.

(6) Training Program in Suicide Assessment, Treatment, and Management. Every six (6) years, as part of the required continuing education hours, each licensee shall complete a minimum of six (6) hours of continuing education in a board approved training program in suicide assessment, treatment, and management as required by KRS 210.366(2).

(a) The training program in suicide assessment, treatment, and management shall be approved by the board, by a pre-approved provider or sponsor identified in Section 3(1) of this administrative regulation, or by one (1) of the following boards:

1. Kentucky Board of Licensure of Marriage and Family Therapists;
2. Kentucky Board of Licensed Professional Counselors;
3. Kentucky Board of Licensure for Pastoral Counselors;
4. Kentucky Board of Alcohol and Drug Counselors;
5. Kentucky Board of Examiners of Psychology; or
6. Kentucky Board of Licensure for Occupational Therapy.

(b) Exemptions. A licensee shall be exempted from completion of the training program in suicide assessment, treatment, and management if he or she:

1. Teaches or taught a graduate-level counseling course in suicide assessment, treatment, and management at least once during the six (6) year period; or
2. Teaches or taught a six (6) hour continuing education course in suicide assessment, treatment, and management at least once during the six (6) year period.

(7) Domestic Violence and Elder Abuse, Neglect, and Exploitation. During the three (3) year renewal period following initial licensure, as part of the required continuing education hours, each licensee shall complete a three (3) hour course in domestic violence, and elder abuse, neglect, and exploitation as defined by KRS 194A.540.

(8) Pediatric Abusive Head Trauma. At least one (1) time every six (6) years, as part of the required continuing education hours, each licensee shall complete one and one-half (1.5) hours of continuing education covering the recognition and prevention of pediatric abusive head trauma as defined in KRS 620.020.

(9) Telehealth. **Social workers shall comply with the telehealth training requirements set forth in**~~[As required by]~~ KRS 335.158, **including completion of**~~[after July 1, 2025, all licensed social workers shall complete]~~ a board-approved two-hour training course on the use of telehealth to provide social work services ~~as~~every six (6) years a part of the required continuing education for license renewal.

(10) Academic Credit Equivalency. Academic credit equivalency for continuing education hours shall be based on one (1) credit hour equals fifteen (15) continuing education hours.

Section 3. Methods of Acquiring Continuing Education Hours. Continuing education hours for renewal shall be directly related to the professional growth and development of the licensee. The hours may be earned by completing any of the continuing education programs listed in this section.

(1) Preapproved programs not requiring board review and approval. Except for courses on the Kentucky Code of Ethical Conduct under Section 2(4) of this administrative regulation, and courses on clinical social work supervision under 201 KAR 23:070, Section 4(1)(~~d~~) and (~~e~~)(~~e~~2-), which require separate review and approval by the board, an educational program from any of the following providers shall be ~~[deemed to be]~~ relevant to the practice of social work and shall be approved without further review by the board if it is:

(a) Sponsored or approved by:

1. The Association of Social Work Boards (ASWB);
2. The National Association of Social Workers (NASW) or any of its affiliated state chapters;
3. The National Association of Black Social Workers (NABSW) or any of its affiliated state chapters;

4. The North American Association of Christians in Social Work or any of its affiliated state chapters; or
5. The Clinical Social Work Association or any of its affiliated state chapters;
- (b) Sponsored by:
 1. The American Psychological Association or any of its affiliated state chapters;
 2. The American Counseling Association or any of its affiliated state chapters;
 3. The National Board for Certified Counselors or any of its affiliated state chapters;
 4. The American Psychiatric Association or any of its affiliated state chapters; or
 5. A college, school, department, or program of social work in Kentucky, which is accredited by the Council on Social Work Education (CSWE); or
- (c) An academic course offered by an accredited postsecondary institution directly related to social work, counseling, or psychology.
- (2) Programs requiring board review and approval.
 - (a) A program that is not provided or sponsored by a preapproved provider or sponsor identified in subsection (1) of this section shall be reviewed by the board and approved for continuing education credit if the board determines that it is:
 1. Relevant to the practice of social work; and
 2. Contributes to the continuing professional competency of licensees.
 - (b) The board may approve various methods in which a continuing education program is presented including:
 1. Technology-mediated learning~~[Home or self-study, courses delivered through electronic media or technology including distance learning, online, or teleconference courses];~~ and
 2. In-service training, conferences, or workshops provided by other organizations, educational institutions, or other service providers ~~[approved by the board]~~.
 - (c) Board approval for technology-mediated learning~~[home or self-study courses, courses delivered through electronic media or technology including distance learning, online, or teleconference courses]~~ shall be obtained each year unless the continuing education program does not require board approval under subsection (1) of this section.
- (3) Relevant programs or academic courses presented by the licensee. A licensee who presents relevant programs or academic courses shall earn full continuing education credit for each contact hour of instruction, not to exceed one-half (1/2) of the continuing education renewal requirements. Credit shall not be issued for repeated instruction of the same course content or program within the same renewal period unless substantially revised or updated versions of a course or program can be clearly documented and approved by the board.
- (4) Relevant articles authored by the licensee. A licensee who is an author of a relevant article, which is published in a professionally recognized or juried publication, shall earn seven and a half (7 1/2) hours of the continuing education requirements for renewal if a certified social worker or fifteen (15) hours of the continuing education requirements for renewal if a licensed social worker or licensed clinical social worker, if the article was published within one (1) year immediately preceding his or her renewal date.
- (5) ~~[The following]~~ Continuing education courses shall be submitted to the board for approval and shall not be automatically preapproved under subsection (1) of this section that cover the:
 - (a) Kentucky Code of Ethical Conduct required by Section 2(4) of this administrative regulation; and
 - (b) Clinical social work supervision for board-approved supervisors required by 201 KAR 23:070, Section 4(1)~~(d) and (e)~~~~[(e)2]~~.
- (6) A licensee or board member may earn continuing education hours for renewal by attending a board meeting~~[of the board]~~, in person, at the rate of one (1) hour of continuing education per board meeting up to a maximum of six (6) hours~~(hours)~~ per three (3) year renewal period.

Section 4. Procedures for Approval and Renewal of Continuing Education Providers and Programs.

- (1) Provider Approval. A provider seeking approval of a continuing education program shall apply to the board at least~~[no less than]~~ thirty (30) days in advance of the commencement of the program, and provide the information required by subsection (3) of this section.
- (2) The board shall approve a continuing education program if it determines that the program being presented:

- (a) Is relevant to the practice of social work;
 - (b) Contributes to the continuing professional competency of a licensee; and
 - (c) Has competent instructors with appropriate academic training, professional license or certification, or professionally recognized experience.
- (3) The board may approve a provider of a continuing education program for one (1) year if the provider:
- (a) Files a completed Provider or Sponsor~~[or Sponsor]~~ Application for Continuing Education Approval, which includes:
 - 1. A published program outline that includes an explanation of the program objectives;
 - 2. The names and qualifications of the instructors presented in the form of resumes or curriculum vitae~~[vitas]~~;
 - 3. A copy of the evaluation sheet by which the licensee can assess and comment on the program;
 - 4. A copy of the program agenda stating the number of continuing education credit hours, including all breaks;
 - 5. The number of continuing education credit hours requested;
 - 6. A copy of the official certificate of completion or attendance from the provider; and
 - 7. A statement whether the provider is requesting approval to meet the requirements of ~~[the following]~~ courses on the:
 - a. Kentucky Code of Ethical Conduct required by Section 2(4) of this administrative regulation; or
 - b. Clinical social work supervision for board-approved supervisors required by 201 KAR 23:070, Section 4(1)(d) and (e)~~(e)2~~; and
 - (b) Pays an initial application fee, payable to the Kentucky State Treasurer, of:
 - 1. \$100 for each one (1) day program of eight (8) hours or less; and
 - 2. \$100 for each additional one (1) day program of eight (8) hours or less.
- (4) If the provider is requesting approval to meet the requirements of the Kentucky Code of Ethical Conduct course required for renewal by Section 2(4) of this administrative regulation, a minimum of one (1) presenter or instructor for the course shall:
- (a) Hold a degree in social work;
 - (b) Hold an active license to practice social work in the Commonwealth of Kentucky;
 - (c) Not have an unresolved, pending disciplinary action before the board; and
 - (d) Not be practicing social work under terms or conditions of supervision imposed by the board.
- (5) If the provider is requesting approval for the clinical social work supervision course, whether the initial six (6) [6-]hour course or the three (3) [3-]hour renewal course required for board approved supervisors, each presenter or instructor shall meet all qualifications for board-approved supervisors as established in~~[to meet the requirements of the clinical social work supervision course required for board approved supervisors by]~~ 201 KAR 23:070~~[, Section 4(1)(c)2-, each presenter and instructor for the course shall:]~~
- ~~[(a)] [Hold a degree in social work;]~~
 - ~~[(b)] [Hold an active social work license in the Commonwealth of Kentucky;]~~
 - ~~[(c)] [Be a board approved supervisor;]~~
 - ~~[(d)] [Not have an unresolved, pending disciplinary action before the board; and]~~
 - ~~[(e)] [Not be practicing social work under terms or conditions of supervision imposed by the board.]~~
- (6) A provider of continuing education shall be responsible for providing documentation in the form of a certificate of attendance or completion directly to the licensee, as established in Section 7(5) of this administrative regulation.
- (7) A provider of a continuing education program requiring board approval shall not advertise that a course has been approved before written board approval has been received.
- (8) Provider Renewal. An approved provider shall submit a Provider or Sponsor [Renewal]~~[Renewal]~~ Application for Continuing Education Approval for a subsequent one (1) year period by:
- (a) Notifying the board that the original information required in this section for each program remains current; and
 - (b) Paying a renewal fee, payable to the Kentucky State Treasurer, of:
 - 1. Fifty (50) dollars for each one (1) day program of eight (8) hours or less; and
 - 2. \$100 for each additional one (1) day program of eight (8) hours or less.

Section 5. Procedures for Approval and Renewal of Continuing Education for Sponsors and Programs.

(1) Sponsor Approval. A sponsor seeking approval of continuing education programs shall apply to the board ~~at least~~no less than thirty (30) days in advance of the commencement of the program, and provide the information required by subsection (3) of this section.

(2) The board shall approve a continuing education program if it determines that the program being presented~~[meets the following criteria]~~:

- (a) Is relevant to the practice of social work;
- (b) Contributes to the professional competency of the licensee; and
- (c) Has competent instructors with appropriate academic training, professional licenses or certifications, or professionally recognized experience.

(3) The board may approve a sponsor of continuing education programs for one (1) year if the sponsor:

(a) Files a completed Provider or~~[Provider or]~~ Sponsor Application for Continuing Education Approval, which includes:

- 1. A published program outline that includes an explanation of the program objectives;
- 2. The names and qualifications of each presenter and instructor documented in the form of resumes or curriculum vitae~~[vitas]~~;
- 3. A copy of the evaluation sheet by which the licensee can assess and comment on the program;
- 4. A copy of the program agenda stating the number of continuing education credit hours, including all breaks;
- 5. The number of continuing education credit hours requested;
- 6. A copy of the official certificate of completion and attendance from the sponsor; and
- 7. A statement whether the sponsor is requesting approval to meet the requirements of~~[the following]~~ courses on the:
 - a. Kentucky Code of Ethical Conduct required by Section 2(4) of this administrative regulation; or
 - b. Clinical social work supervision for board-approved supervisors required by 201 KAR 23:070, Section 4(1)~~(d) and (e)~~(e)2.; and

(b) Pays an initial application fee of \$250 made payable to the Kentucky State Treasurer.

(4) If the sponsor is requesting approval to meet the requirements of the Kentucky Code of Ethical conduct course required for renewal by Section 2(4) of this administrative regulation, a minimum of one

(1) presenter or instructor for the course shall:

- (a) Hold a degree in social work;
- (b) Hold an active license to practice social work in the Commonwealth of Kentucky;
- (c) Not have an unresolved, pending disciplinary action before the board; and
- (d) Not be practicing social work under terms or conditions of supervision imposed by the board.

(5) If the sponsor is requesting approval for the clinical social work supervision course, whether the initial six (6) [6-]hour or the three (3) [3-]hour renewal course required for board-approved supervisors, each presenter or instructor shall meet all qualifications for board-approved supervisors as established in~~[to meet the requirements of the clinical social work supervision course required for board-approved supervisors by] 201 KAR 23:070[, Section 4(1)(e)2., each presenter or instructor for the course shall:]~~

~~[(a)] [Hold a degree in social work;]~~

~~[(b)] [Hold an active social work license in the Commonwealth of Kentucky;]~~

~~[(c)] [Be a board-approved supervisor;]~~

~~[(d)] [Not have an unresolved, pending disciplinary action before the board; and]~~

~~[(e)] [Not be practicing social work under terms or conditions of supervision imposed by the board].~~

(6) The board shall periodically review the programs that a sponsor has provided to determine if the sponsor continues to meet the requirements of this administrative regulation.

(7) An approved sponsor shall submit an annual report to the board of the continuing education programs offered during that calendar year and shall include copies of attendance sheets and evaluations (or evaluation summaries) for each program.

(8) A sponsor of a continuing education program shall be responsible for providing documentation in the form of a certificate of attendance or completion directly to the licensee, so that the licensee can comply with the requirements as established in Section 7(5) of this administrative regulation.

(9) A sponsor of a continuing education program requiring board approval shall not advertise that the course has been approved before written board approval has been received.

(10) Sponsor Renewal. An approved sponsor shall submit a Provider or Sponsor ~~[Renewal]~~ Application for Continuing Education Approval for a subsequent one (1) year period by notifying the board that the original information required in this section for each program remains current and by paying \$150 renewal fee made payable to the Kentucky State Treasurer.

(11) A sponsor may request to add a program after being approved as a sponsor ~~if/so long as/~~ the program meets the requirements of this section, and the sponsor submits:

(a) ~~A Provider or Sponsor~~**[An]** Application ~~for Continuing Education Approval~~ as required in this section; and

(b) Pays a fee of ~~twenty-five (25) dollars~~**[\$25]**.

Section 6. Individual Request for Board Review and Approval of Continuing Education Courses.

(1) A licensee may request an individual review of a continuing education program that was otherwise not approved if it was completed during the three (3) year renewal period if the individual licensee:

(a) Applies for individual review by submitting the Individual Application for Continuing Education Approval that includes the:

1. Certificate of completion or attendance;
2. Resume of each instructor; and
3. Program agenda indicating hours of instruction; and

(b) Pays a fee of ten (10) dollars made payable to the Kentucky State Treasurer.

(2) The board's review shall be based on the standards for continuing education established by this administrative regulation.

(3) The board's approval of a continuing education program under this section shall:

- (a) Qualify as if it has been obtained from an approved provider or sponsor; and
- (b) Be limited to the particular program upon which the request for individual review is based.

Section 7. Responsibilities and Reporting Requirements of Licensees. Each licensee shall be responsible for obtaining the required continuing education hours for her or his renewal. The licensee shall identify his or her own continuing education needs, seek continuing professional education activities to meet those needs, and develop ways to integrate new knowledge, skills, and attitudes. Each licensee shall:

(1) Select approved programs by which to earn continuing education hours for renewal;

(2) Submit to the board, if applicable, a request for continuing education programs requiring approval by the board as established in Section 3 of this administrative regulation;

(3) Maintain her or his records of continuing education hours;

(4) At the time of renewal, list the continuing education hours obtained during that licensure renewal period; and

(5) If requested by the board, furnish documentation of continuing education courses completed at the time of his or her renewal.

(a) In each calendar year, the board shall require up to fifteen (15) percent of all licensees to furnish documentation of the completion of continuing education hours for the current renewal period;

(b) Documentation of continuing education hours shall not otherwise be reported to the board;

(c) Documentation shall take the form of official documents including:

1. Transcripts;
2. Certificates of completion or attendance;
3. Affidavits signed by instructors; or
4. Receipts for fees paid to the provider or sponsor; and

(d) Each licensee shall retain copies of his or her documentation for a period of one (1) year following the date of his or her last renewal.

Section 8. Board to Approve Continuing Education Hours; Appeal if Approval Denied. If an **Individual** Application for ~~[approval of]~~ Continuing Education **Approval for** hours is denied, in whole or part, the applicant may submit an appeal in writing within thirty (30) days of receipt of a denial. This decision shall/will include a clear justification for the outcome. The appeal process shall/does not suspend the applicant's obligation to meet the continuing education requirements. ~~[a licensee, provider, or sponsor may request the board to reconsider its decision. The request shall be in writing and shall be received by~~

~~the board within thirty (30) days after the date of the board's decision denying approval of continuing education hours.]~~

Section 9. Waiver or Extensions of Continuing Education Requirements.

(1) ~~If [in cases where]~~ a licensee is unable to meet the **minimum** continuing education requirements **or make the required reports of continuing education credits** due to a documented medical disability, illness, or undue hardship, the board may grant a waiver, or **an** extension of up to one (1) calendar year **to fulfill the requirements for renewal or to make the required reports of continuing education requirements**. A licensee shall submit a written request including all relevant supporting evidence **as established in subsection (3) of this section**. The board reserves the right to request additional documentation if necessary.

(2) Waivers and extensions shall apply ~~only[solely]~~ to ~~[non-statutory]~~ continuing education requirements **established by administrative regulation. Continuing education[; statutory]** requirements ~~established[mandated]~~ by **KRS 194A.540, 210.366, 335.130, and 620.020[law]** shall **not be waived or extended[remain[remai]] obligatory**.

~~(3)[(1)] [In individual cases involving medical disability, illness, or undue hardship as determined by the board, the board may grant waivers of the minimum continuing education requirements or extensions of time to fulfill the requirements for renewal or make the required reports of continuing education credits.~~

~~(4)[(2)]~~ A licensee ~~submitting[may submit]~~ a written request to the board for a waiver or extension of time involving medical disability, illness, or undue hardship **shall include relevant supporting evidence as established in paragraph (a) through (c) of this subsection**.

(a) If the request is based on medical disability or illness, the licensee shall include a written statement signed by a licensed physician.

(b) If the request is based upon undue hardship, the licensee shall submit a written explanation of the nature of the undue hardship.

(c) The board may request that a licensee provide additional information and verification by a third party.

~~[(3)] [The board may grant a waiver of the minimum continuing education requirements or an extension of time to a licensee to fulfill the continuing education requirements for renewal for a period of time not to exceed one (1) calendar year.]~~

~~(4)[(5)][(4)]~~ If the medical disability, illness, or undue hardship upon which a waiver or extension has been granted continues beyond the period of the waiver or extension, the licensee may reapply for the waiver or extension.

(a) If the reapplication is based on medical disability or illness, the licensee shall include a written statement signed by a licensed physician.

(b) If the reapplication is based upon undue hardship, the licensee shall submit a written explanation of the nature of the undue hardship.

(c) The board may request that a licensee provide additional information and verification by a third party to support the reapplication.

Section 10. Continuing Education Requirements for Reinstatement of Expired License.

(1) A certified social worker or a licensed clinical social worker who requests reinstatement of an expired license shall submit documentation of completion of thirty (30) hours of continuing education within the three (3) year period immediately preceding the date he or she submits the request for reinstatement to the board **on the Application for Renewal, as incorporated by reference in 201 KAR 23:051**.

(2) A licensed social worker who requests reinstatement of an expired license shall submit documentation of completing fifteen (15) hours of continuing education within the three (3) year period immediately preceding the date he or she submits the request for reinstatement to the board **on the Application for Renewal, as incorporated by reference in 201 KAR 23:051**.

(3) If the licensee requesting reinstatement cannot provide evidence of completion of the required hours of continuing education, the board may reinstate the license for six (6) months on the condition that the licensee obtain the required hours of continuing education for his or her level of licensure within six (6) months of the date the license is reinstated.

(a) The continuing education hours completed for reinstatement shall be in addition to the continuing education requirements for renewal established in Section 2 of this administrative regulation and shall not be used to comply with the requirements of that section.

(b) Failure to obtain the required continuing education hours within the approved six (6) month period shall result in termination of the reinstated license.

Section 11. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) "Provider or Sponsor Application for Continuing Education Approval", 7/2025~~[4/2025]~~~~[2/2017]~~; and

(b) ~~["Provider or Sponsor Renewal Application for Continuing Education Approval", 2/2017; and; and]~~

~~[(e)]~~ "Individual Application for Continuing Education Approval", 7/2025~~[2/2017]~~.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at Kentucky Board of Social Work, 125 Holmes Street, Suite 310,~~[43-44 Fountain Place,]~~ Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. or on the board's website at~~[Web-site]~~ bsw.ky.gov.

CONTACT PERSON: Marc Kelly, Executive Director, Kentucky Board of Social Work, 125 Holmes Street, Suite 310, Frankfort Kentucky 40601, phone (502) 564-2350, e-mail marc.kelly@ky.gov.

MATERIAL INCORPORATED BY REFERENCE

The agency needs to file one (1) clean copy of the:

"Provider or Sponsor Application for Continuing Education Approval" that:

- Includes an updated edition date of 7/2025
- Mentions the renewal fee for an approved provider of:
 - \$50.00 for each one (1) day program of eight (8) hours or less;
 - \$100 fee for each additional one (1) day program of eight (8) hours or less; and
 - Made check or money order payable to the KY State Treasurer.
- Mentions the renewal fee for an approved sponsor of:
 - \$150.00 renewal fee
 - \$25.00 fee if requesting to add a program after being approved
 - Made check or money order payable to the KY State Treasurer.
- Change all references from "must" to "shall" on the instruction sheet and in the body of the form
- Add a statement that if renewing "A Provider or sponsor shall affirm that the original instructor(s) and program content in the original or approved application will remain the same."

"Individual Application for Continuing Education Approval" that:

- Includes an updated edition date of 7/2025

INSTRUCTIONS
Provider or Sponsor Application for Continuing
Education Approval

Instructions for form usage:

1. Once you have completed the application, you shall print the form, and apply your handwritten signature. Applications submitted without the appropriate signatures will not be reviewed.
2. All forms shall be filled out completely as directed. Forms having "See Attached" will not be reviewed or returned.
3. The completed application along with required fee may be submitted to the Kentucky Board of Social Work by mail to 125 Holmes Street, Suite 310, Frankfort, Kentucky 40601.

Instructions for completing the "Application for Continuing Education Credit Approval Form":

- "Individual" means a licensee or certificate holder may request an individual review of a continuing education program that has not been otherwise approved by submitting an "Individual Continuing Education Credit Approval form along with the required fee of \$10.
- "Provider" means a person or an organization approved by the Kentucky Board of Social Work to provide a single continuing education program for each one-day program of eight (8) hours or less. The fee for review of a "Provider Application for Continuing Education Credit Approval" is \$100 for each one-day program of eight (8) or less and may be renewed annually for a fee of \$50 to offer the same approved course with no changes in content or instructors. All providers shall receive approval from the Kentucky Board of Social Work prior to providing any continuing education program. Application(s) shall be submitted at least thirty (30) days in advance of the commencement of the program.
- "Sponsor" means a person or an organization approved by the Kentucky Board of Social Work to provide more than one (1) continuing education program over the course of a year. The fee for review of a "Sponsor Application for Continuing Education Credit Approval" is \$250 and may be renewed annually for a fee of \$150 to offer the same approved program(s) with no changes in content or instructors. Sponsors shall be approved by The Kentucky Board of Social Work before providing any continuing education programs. Application(s) shall be submitted at least thirty (30) days in advance of the commencement of the program.
- Courses that are to be approved to meet the Ethics for Renewal Requirement shall be acquired in the area of the social work code of ethics as established by 201 KAR 23:080 and shall be a minimum of 3 hours in length. All Ethics Courses require approval by the Kentucky Board of Social Work. Please be detailed in the content and qualifications of the instructors when submitting these courses for approval.
- Courses that are established to meet the supervision requirement shall be on the supervisory practices and methods for licensed clinical social workers relating to the requirements in KRS Chapter 335 and 201 KAR 23:070. This course shall be presented in person and shall be a minimum of 3 hours in length. All Supervision Courses require approval by the Kentucky Board of Social Work. Please be detailed in the content and qualifications of the instructors when submitting these courses for approval. Courses on Supervision shall be presented by a licensee who currently is a board approved LCSW Supervisor.

KENTUCKY BOARD OF SOCIAL WORK
125 Holmes Street, Suite 310
Frankfort KY 40601
bsw.ky.gov
502-564-2350

Provider or Sponsor Application for Continuing Education Approval

NOTE: All applications shall be submitted thirty (30) days in advance of the start date of the program.

Date of application:

Check one (1): Are you applying as a Provider or a Sponsor?

- ☐ Provider: Initial Application Fee: \$100.00 for each program of eight (8) hours or less
If the program extends to another day, please add an additional \$100 fee
Make check or money order payable to KY State Treasurer
- ☐ Sponsor: Initial Application Fee: \$250.00
Make check or money order payable to KY State Treasurer

- Apply online at bsw.ky.gov/Continuing Education; or
- Complete and mail the application including required attachments and fee.

1. Provider or Sponsor Name:

Address:

Street:

City: State: Zip Code:

Phone:

Email address:

2. Name of person submitting application:

Signature of person submitting application:

Phone:

Email address:

3. Type of Organization:

- ☐ Accredited University/College: Social Work Dept.
- ☐ Accredited University/College: Other Dept.
- ☐ Private Educational Organization
- ☐ Government Agency
- ☐ Professional Society/Association
- ☐ Hospital/Medical School
- ☐ Mental Health Center/Clinic
- ☐ Other (Specify)

☐ PROVIDERS shall complete Items 1 through 6 with attachments.

☐ SPONSORS shall complete Items 1 through 6 with attachments
for each program requiring approval.

4. Title of Program/s:

Program Date(s):

Number of Contact Hours Requested: Note: 50 min. equals 1

CEU, do not include breaks.

5. Is this program to be considered for the three (3) hour ethics
program for renewal? ☐ Yes ☐ No

☐ If yes, this program and instructor(s) shall meet the
requirements of 201 KAR 23:075 and 201 KAR 23:080

6. Is this program to be considered for the three (3) hour clinical social
work supervision program for approved LCSW supervisors?

☐ Yes ☐ No

☐ If yes, this program and instructor(s) shall meet the
requirements of 201 KAR 23:070 and 201 KAR 23:075.

7. Format of Program Delivery: (Check all that apply)

- ☐ Live event: in person/face-to-face
- ☐ Online or on-demand webinar
- ☐ Other: specify

8. Instructors (attach verification resume or curriculum vitae for each instructor)

Name of Instructor:

Title of Instructor:

9.	Program Description:	
10.	Program Objectives:	
11.	Program Outline:	
12.	Method of Evaluation:	

If renewing, a Provider or Sponsor shall affirm that the original instructor(s) and program content in the original or approved application will remain the same.

REQUIRED ATTACHMENTS (UPLOAD OR ATTACH)

- ☐ 1. Resume or CV for each instructor (biographical summaries are not sufficient).
- ☐ 2. Program Agendas indicating hours of instruction including all breaks.
- ☐ 3. Sample evaluation form used by participants to rate the program.
- ☐ 4. Sample certificate of completion (shall include KBSW Approval No. on the certificate with hours of CE credits).
- ☐ 5. Required fee:

Make any check or money order payable to the Kentucky State Treasurer

Provider initial application fee: \$100.00 for each program of eight (8) hours or less. If the program extends to another day, please add an additional \$100 fee.

Provider renewal fee: \$50 for each program of eight (8) hours or less and \$100 for each additional one (1) day program of eight (8) hours or less. A renewal applicant shall offer the same approved course with no changes in content or instructors.

Sponsor initial application fee: \$250

Sponsor renewal fee: \$150 A renewal applicant shall offer the same approved course with no changes in content or instructors.

Sponsor request to add a program after initial approval: \$25.00

KENTUCKY BOARD OF SOCIAL WORK
125 HOLMES STREET, SUITE 310
FRANKFORT, KY 40601
bsw.ky.gov
502-564-2350

OFFICE USE ONLY

Date Received:

Date Reviewed:

Incomplete:

Complete:

KBSW Approval #

Individual Application for Continuing Education Approval

Fee \$10.00 for each course approval (check or money order payable to KY State Treasurer)

Date of application:

1. Name of Licensee: _____ License Number: _____
2. Address _____
Street _____ City _____ State _____ Zip Code _____
Phone: _____
Email Address: _____
3. ATTACH/UPLOAD CERTIFICATE OF COMPLETION FOR COURSE (REQUIRED)
4. Program provided or sponsored by: _____
Title of Program: _____
Date(s) of Presentation: _____
CEU Credit/Contact Hours Requested: _____
NOTE: 50 minutes equals one (1) continuing education hour, do not include breaks, lunch etc.
5. Format of Program Delivery: ☐ Live event: in person/face-to-face ☐ Online or on-demand webinar ☐ Other: specify _____
6. Instructors: _____

☐ ATTACH/UPLOAD RESUME OR CV OF EACH INSTRUCTOR (REQUIRED)

Name of Instructor: _____

Title of Instructor: _____

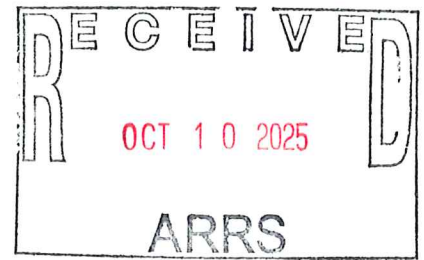
7.	Program Description:	
8.	Program Objectives:	
9.	Method of Evaluation:	

REQUIRED ATTACHMENTS (UPLOAD OR ATTACH):

- ☐ Certificate of completion or attendance
- ☐ Program agenda indicating hours of instruction
- ☐ Resume of each instructor
- ☐ \$10 fee (pay online or mail check or money order payable to Ky. State Treasurer)

Signature of Licensee

Date:



Board of Medical Imaging and Radiation Therapy

Andy Beshear
Governor

2365 Harrodsburg Rd, Suite A220
Lexington, KY 40504
502-782-5687
<https://kbmirt.ky.gov/>

Keri Leamy
Board Chair

October 10, 2025

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

Re: 201 KAR 46:081, Limited x-ray machine operator.

Dear Co-Chairs West and Lewis:

After discussions with Administrative Regulation Review Subcommittee staff of the issues raised by 201 KAR 46:081, the Board of Medical Imaging and Radiation Therapy proposes the attached amendment to 201 KAR 46:081.

Sincerely,

A handwritten signature in blue ink that reads "Elizabeth Morgan".

Elizabeth Morgan, Executive Director
Kentucky Board of Medical Imaging and Radiation Therapy
2365 Harrodsburg Rd, Suite A220
Lexington, Kentucky 40504

Final, 9-30-2025

SUGGESTED SUBSTITUTE

BOARDS AND COMMISSIONS

Board of Medical Imaging and Radiation Therapy

201 KAR 46:081. Limited X-Ray machine operator.

RELATES TO: KRS 12.245, 12.354, 12.357, 311B.020, 311B.050[311B.150], 311B.100(2), 311B.110, 311B.120, 311B.140, 311B.150, 311B.180, 311B.190

STATUTORY AUTHORITY: KRS 311B.050, 311B.100(2), 311B.110

CERTIFICATION STATEMENT: This is to certify that this administrative regulation is in compliance with the requirements of 2025 RS HB 6, Section 8(2) because this administrative regulation is being promulgated to meet a deadline established by 2025 RS HB 72. The Board of Medical Imaging and Radiation Therapy is not one of the agencies that is directed by House Bill 6, Section 8(3) to include a certification by the Governor.

NECESSITY, FUNCTION, AND CONFORMITY: KRS 311B.050 requires the Board of Medical Imaging and Radiation Therapy to promulgate administrative regulations to establish the procedures for the issuance and renewal of a license. KRS 311B.100(2) and KRS 311B.110(6) require the board to promulgate administrative regulations to establish the qualifications for a limited x-ray machine operator. This administrative regulation establishes the requirements for the licensure of a limited x-ray machine operator.

Section 1. Applicability. This administrative regulation shall apply to individuals who perform limited diagnostic radiography while under the direct supervision or indirect supervision of a licensed practitioner of the healing arts.

Section 2. ~~[Limited Licensee Employment Prohibition. An individual who holds a limited license shall not be employed as an operator of a source of radiation at a facility where contrast studies, fluoroscopy, mammography, computed tomography, magnetic resonance imaging, bedside radiography, nuclear medicine, positron emission tomography, or radiation therapy procedures are performed.]~~

~~[Section 3.]~~ Pathway to the Limited X-ray Machine Operator License.

(1) An applicant shall complete a board-approved[an approved] postsecondary educational program that meets the curricular standards of Section 6 of this administrative regulation and successfully pass the Kentucky Limited Scope Exam as referenced in Section 3 of this administrative regulation[American Society of Radiologic Technologists (ASRT) Limited X-Ray Machine Operator Curriculum requirements. ~~An individual shall complete a formal education program for limited x-ray machine operators approved by the board].~~

(2) If an applicant qualifies for licensure under KRS 12.245, 12.354, or 12.357, the applicant shall submit and satisfy the requirements of Section ~~4~~5(1) through (6) of this administrative regulation, and shall submit form DD-214 or other proof of active or prior military service for the applicant or spouse of the applicant.

Section 3.~~[Section 4.]~~ Application for Temporary Limited X-ray Machine Operator License.

(1) An applicant who has completed an[a formal] educational program shall submit:

(a) A completed and signed application Form KBMIRT Form 5;

(b) A nonrefundable, non-transferrable temporary limited x-ray machine operator application and license fee as mandated in 201 KAR 46:020, Section 5, unless the fee is waived in accordance with KRS 311B.140;

(c) The satisfactory results of a criminal background check completed within the past six (6) months in state of residence and employment and any other state of residence and employment within the past five (5) years; and

- (d) A copy of a government-issued photo ID.
- (2) The temporary limited x-ray machine operator license shall be effective for up to one (1) year from date of program completion and shall not be renewable.
- (3) Upon completion of the limited x-ray machine operator educational~~[training]~~ program, individuals shall:
 - (a) Apply for the Kentucky Limited Scope Exam~~[limited scope radiography exam]~~; and
 - (b) Submit the nonrefundable, non-transferrable limited x-ray machine operator examination fee as mandated in 201 KAR 46:020, Section 9.
- (4) An individual shall successfully pass the Kentucky Limited Scope Exam, administered by the American Registry of Radiologic Technologists (ARRT)~~[administered limited scope radiography exam]~~ within one (1) calendar year of program completion and prior to the expiration date of the temporary license, except in the case of instances such as, disability, major illness, accident, or if an active duty member of the Armed Forces of the United States [and] at the discretion of the board.
- (5) If a temporary licensee has successfully passed the Kentucky Limited Scope Exam~~[ARRT administered limited scope radiography exam]~~ prior to the expiration date of the temporary license, the licensee shall be issued a limited x-ray machine operator license, which shall expire on the last day of the licensee's birth month. If the limited x-ray machine operator license is first issued to an individual less than six (6) months before the individual's birth month, the license issued to the individual shall not expire on that date, but instead it shall expire at the last day of the individual's birth month in the following calendar year.

Section 4.~~[Section 5.]~~ Application for Initial Limited X-ray Machine Operator License. An Applicant shall submit:

- (1) A completed and signed application, KBMIRT Form 4;
- (2) A nonrefundable initial application and license fee as established in 201 KAR 46:020, Section 1, unless the fee is waived in accordance with KRS 311B.140;
- (3) The results of a criminal background check completed within the past six (6) months in the state of residence and employment, and any other state of residence and employment within the past five (5) years;
- (4) A copy of government-issued photo ID;
- (5) Documentation of passing results of the Kentucky Limited Scope Exam~~[ARRT administered limited scope radiography exam]~~ within one (1) calendar year of program completion, except in the case of instances such as, disability, major illness, accident, or if an active duty member of the Armed Forces of the United States [and] at the discretion of the board; and
- (6) Verification of graduation from an educational~~[a formal education]~~ program for limited x-ray machine operators approved by the board.

Section 5.~~[Section 6.]~~ The issued license shall identify the licensee as a limited x-ray machine operator. The license shall also identify the category as general, bone densitometry, or podiatry.

Section 6.~~[Section 7.]~~ Curricular Standards for ~~[Formal]~~ Educational Program. This administrative regulation applies to institutions offering a postsecondary educational program for limited x-ray machine operators.

- (1) Programs for general limited x-ray machine operators shall:
 - (a) Meet the curricular standards established by the American Society of Radiologic Technologists (ASRT);
 - (b) Include a minimum of 240 classroom hours of didactic instruction and 360 clinical hours of education which shall include supervised practice and demonstration of clinical competency until June 30, 2027;
 - (c) Beginning July 1, 2027, include a minimum of 480 classroom hours of didactic instruction and a minimum of 700 clinical clock hours of education that shall include supervised practice and demonstration of clinical competency;
 - ~~(d)~~~~(e)~~ Supply data requested for a complete evaluation of its administration, organization, faculty, physical facilities, student policies, and curriculum;

- (e)[(d)] Provide a structured curriculum with clearly written course descriptions, lesson plans, and objectives;
- (f)[(e)] Provide an adequate faculty, which shall be qualified through academic preparation or experience to teach the subjects assigned;
- (g)[(f)] ~~Employ~~Have a program director who is a licensed radiographer with a minimum of three (3) years of clinical or teaching experience or a combination of clinical and teaching experience;
- (h)[(g)] Provide a one-to-one licensee-to-student ratio consistent with professional educational guidelines in the appropriate field of practice;
- (i)[(h)] Provide appropriate facilities, diverse patient populations, sufficient volume, and a variety of diagnostic exams to properly conduct the educational program;
- (j)[(i)] Prohibit students from applying radiation to human beings for diagnostic purposes until they have obtained practical experience and have had their performance evaluated as satisfactory by the program faculty;
- (k)[(j)] Provide direct or indirect supervision by a licensed practitioner of the healing arts or a licensee as required by the student's level of competency;
- (l)[(k)] Prohibit students from administering radiation to a human being unless under direct or indirect supervision as required by the student's level of competency;
- (m)[(l)] Maintain records of each student's attendance, grades, clinical competency, and subjects completed;
- (n)[(m)] Designate a radiation safety officer; and
- (o)[(n)] Permit site inspections by the board's representative.
- (2) Programs for limited podiatry x-ray machine operators shall:
- (a) Consist of instruction that reflects current modules of the Examination Content Specifications - Limited Scope of Practice in Radiography published by the ARRT. The curriculum shall include items such as:
1. Safety, including radiation physics; radiation protection, including personnel protection; radiation exposure, monitoring, and radiation units; biological effects of radiation; low-dose technique and minimizing patient exposure; applicable federal and state radiation regulations;
 2. Image Production, including principle of the radiographic equipment; image acquisition and technical evaluation; equipment operation and quality assurance; developing and using technique charts; and
 3. Patient Care, including patient interactions and management; and
- (b) Consist of at least six (6) months of clinical experience of static x-ray exams of the foot and ankle ~~limited x-ray procedures~~ while under the direct supervision of a licensed practitioner of the healing arts, a licensed radiologic technologist, or a licensed limited x-ray machine operator.
- (3) Programs for limited bone densitometry x-ray machine operators shall:
- (a) Consist of instruction that reflects current content categories of the Examination Content Specifications - Bone Densitometry Equipment Operator published by the ARRT. The curriculum shall include items such as:
1. Patient Care, including osteoporosis, bone physiology, bone health and patient education, and patient preparation;
 2. Safety, including fundamental principles, biological effects of radiation, units of measurement, and radiation protection; and
 3. Image Production, including fundamentals of x-ray production, quality control, measuring and determining quality in bone mineral density; and
- (b) Consist of at least six (6) months of bone densitometry clinical experience under the direct supervision of a licensed practitioner of the healing arts, a licensed radiologic technologist, or a licensed limited x-ray machine operator.

Section 7.~~[Section 8.]~~ Approved Limited Radiographic Procedures~~[for the Limited X-ray Machine Operator]~~. An individual who holds a limited x-ray machine operator license is limited to performing the procedures authorized for his or her license as described in subsections (1), (2), and (3) of this section.

- (1) An individual holding a general limited x-ray machine operator license shall perform only the following:

- (a) Static x-ray exams~~[Radiography]~~ of the thorax, lungs, and ribs;
 - (b) Static x-ray exams~~[Radiography]~~ of the abdomen;
 - (c) Static x-ray exams~~[Radiography]~~ of the skull and facial structures;
 - (d) Static x-ray exams~~[Radiography]~~ of the upper and lower extremities;
 - (e) Static x-ray exams~~[Radiography]~~ of the pectoral girdle, hips, and pelvis; and
 - (f) Static x-ray exams~~[Radiography]~~ of the cervical, thoracic, and lumbar spines.
- (2) An individual holding a limited podiatry x-ray machine operator license shall perform static x-ray exams~~[radiographic procedures]~~ on the foot and ankle only.
- (3) An individual holding a limited bone densitometry x-ray machine operator license shall perform bone densitometry exams utilizing dedicated Dual Energy X-ray Absorptiometry (DEXA or DXA) equipment~~[radiographic procedures]~~ only.
- (4) A limited x-ray machine operator shall comply with the Limited X-ray Machine Operator Practice Standards as incorporated by reference in 201 KAR 46:035, Section 4.
- (5) A limited x-ray machine operator shall not:
- (a) Perform contrast, fluoroscopy, mammography, computed tomography, magnetic resonance imaging, bedside radiography, nuclear medicine, positron emission tomography, or radiation therapy procedures; or
 - (b) Operate or manipulate equipment utilized in fluoroscopy, mammography, computed tomography, magnetic resonance imaging, bedside radiography, nuclear medicine, positron emission tomography, or radiation therapy procedures.

Section 8.~~[Section 9.]~~ Continuing Education Requirements. Licensees shall complete and document twelve (12) hours of continuing education biennially~~[biennially]~~ as required by 201 KAR 46:060. A minimum of six (6) hours shall be related to radiation safety or medical imaging.

Section 9.~~[Section 10.]~~ Continuing Education Audit Process.

- (1) The board shall select a sample of twenty-five (25) percent of limited x-ray machine operator licensees to audit for continuing education compliance annually.
- (2) The board shall send each licensee selected for audit a notification of audit.
- (3) Each licensee shall maintain his or her personal files such as certificates or records of credit from approved continuing education programs from the current biennium and immediate prior biennium.
- (4) A licensee selected for audit shall complete KBMIRT Form 8, as incorporated by reference in 201 KAR 46:060, and provide the board with a copy of his or her certificates or records of completion.
- (5) Failure to comply with an audit may result in nonrenewal, suspension or revocation of license.

Section 10.~~[Section 11.]~~ Renewal of License. A licensee shall renew annually prior to the expiration of his or her current license, which is the last day of the licensee's birth month, by:

- (1) Completing KBMIRT Form 6; and
- (2) Submitting the Renewal License Fee in accordance with 201 KAR 46:020, Section 2, unless the fee is waived in accordance with KRS 311B.140.

Section 11.~~[Section 12.]~~ Reinstatement of Lapsed License. A licensee who has allowed the license to lapse for up to twelve (12) months is eligible to be reinstated upon submission of KBMIRT Form 6, documentation of twelve (12) hours of continuing education, and the payment of reinstatement and renewal fees pursuant to 201 KAR 46:020, Sections 2 and 7, unless the fees are waived in accordance with KRS 311B.140. A licensee whose license has lapsed for more than twelve (12) months shall:

- (1) Successfully pass the Kentucky Limited Scope Exam~~[ARRT limited scope radiography examination]~~;
- (2) Submit a completed and signed application KBMIRT Form 4;
- (3) Submit a nonrefundable initial application and license fee and reinstatement fee as mandated in 201 KAR 46:020, Sections 1 and 7, unless the fees are waived in accordance with KRS 311B.140;
- (4) Submit satisfactory results of a criminal background check completed within the past six (6) months in state of residence and employment and any other state of residence and employment within the past five (5) years; and
- (5) Submit a copy of a government-issued photo ID.

Section 12.~~[Section 13.]~~ Incorporation by Reference.

(1) The following material is incorporated by reference:

- (a) KBMIRT Form 4, "Limited X-ray Machine Operator License Application", October 2023;
- (b) KBMIRT Form 5, "Temporary Limited X-ray Machine Operator License Application", October 2023;
- (c) KBMIRT Form 6, "Limited X-ray Machine Operator Renewal Application", October 2023;
- (d) "Examination Content Specifications - Limited Scope of Practice in Radiography", January 2023~~[2018]~~; and
- (e) "Examination Content Specifications - Bone Densitometry Equipment Operator", January 2023~~[2018]~~.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Board of Medical Imaging and Radiation Therapy, 2365 Harrodsburg Road, Suite A220, Lexington, Kentucky~~[,]~~ 40504, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the board's website at <https://kbmirt.ky.gov>.

CONTACT PERSON: Elizabeth Morgan, Executive Director, Board of Medical Imaging and Radiation Therapy, 2365 Harrodsburg Rd, Suite A220, Lexington, Kentucky 40504, phone (502) 782-5687; fax (502) 782-6495; email elizabeth.morgan@ky.gov.