

1 AN ACT relating to maternal and child health.

2 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

3 ➔SECTION 1. A NEW SECTION OF KRS CHAPTER 211 IS CREATED TO
4 READ AS FOLLOWS:

5 *(1) The Kentucky maternal psychiatry access program, also known as the Kentucky*
6 *Lifeline for Moms, is hereby established. The purpose of the program shall be to*
7 *help health care practitioners in the Commonwealth meet the needs of a mother*
8 *with mental illness or an intellectual disability.*

9 *(2) The program shall be operated by the Cabinet for Health and Family Services,*
10 *Department for Public Health, Division of Maternal and Child Health.*

11 *(3) The program shall, at a minimum, employ a psychiatrist licensed pursuant to*
12 *KRS Chapter 311 and a psychologist licensed pursuant to KRS Chapter 319.*

13 *(4) The program shall operate a dedicated hotline phone number Monday through*
14 *Friday from 8 a.m. to 5 p.m. local time that serves as the entry point to the*
15 *program for health care practitioners to be able to get services for a mother with*
16 *mental illness or with an intellectual disability. Services shall include:*

17 *(a) An immediate clinical consultation over the telephone;*

18 *(b) An expedited face-to-face mental health consultation;*

19 *(c) Care coordination for assistance with referrals to community behavioral*
20 *health services; and*

21 *(d) Continuing professional education specifically designed for health care*
22 *practitioners.*

23 *(5) The department shall, within sixty (60) days of the effective date of this Act,*
24 *promulgate administrative regulations in accordance with KRS Chapter 13A to*
25 *implement the provisions of this section.*

26 ➔Section 2. KRS 211.122 is amended to read as follows:

27 (1) The Cabinet for Health and Family Services shall, in cooperation with maternal and

1 infant health and mental health professional societies:

2 (a) Develop written information on perinatal mental health disorders and make it
3 available on its website for access by birthing centers, hospitals that provide
4 labor and delivery services, and the public; and

5 (b) Provide access on its website to one (1) or more evidence-based clinical
6 assessment tools designed to detect the symptoms of perinatal mental health
7 disorders for use by health care providers providing perinatal care and health
8 care providers providing pediatric infant care.

9 (2) The Cabinet for Health and Family Services shall establish **the Kentucky maternal**
10 **and infant health collaborative. The collaborative shall be composed of the**
11 **following members appointed by the secretary of the Cabinet for Health and**
12 **Family Services:**~~[a collaborative panel composed of]~~

13 (a) **Four (4)** representatives of health care facilities that provide obstetrical, ~~and~~
14 ~~newborn~~ care, maternal, and infant health care, **one (1) of whom shall be a**
15 **member of the Kentucky Chapter of the American College of Obstetricians**
16 **and Gynecologists;**

17 (b) **Two (2)** providers ~~of~~ maternal mental health **care;**

18 (c) **Two (2)** ~~providers,~~ representatives of university mental health training
19 programs;

20 (d) **Two (2)** ~~maternal health~~ advocates;

21 (e) **Three (3)** ~~women,~~ **each of whom shall have** ~~with~~ experience living with
22 **at least one (1) of the following:**

23 **1.** Perinatal mental health disorders;

24 **2.** **Substance use disorder; and**

25 **3.** **Intimate partner violence;**

26 (f) **One (1) public health director of a local health department in the**
27 **Commonwealth; and**

1 (g) The commissioner of the Department for Public Health or his or her
 2 designee.

3 (3) The~~[, and other stakeholders for the]~~ purposes of the collaborative shall be:

- 4 (a) Improving the quality of prevention and treatment of perinatal mental health
 5 disorders;
- 6 (b) Promoting the implementation of evidence-based bundles of care to improve
 7 patient safety;
- 8 (c) Identifying unaddressed gaps in service related to perinatal mental health
 9 disorders that are linked to geographic, racial, and ethnic inequalities; lack of
 10 screenings; and insufficient access to treatments, professionals, or support
 11 groups; and
- 12 (d) Exploring grant and other funding opportunities and making
 13 recommendations for funding allocations to address the need for services and
 14 supports for perinatal mental health disorders.

15 ~~(4)~~~~(3)~~ The collaborative shall annually review the operations of the Kentucky
 16 maternal psychiatry access program established in Section 1 of this Act.

17 (5) The objectives set forth in subsection ~~(3)~~~~(2)(a) to (d)~~ of this section may be
 18 achieved by incorporating the collaborative's~~[panel's]~~ findings and
 19 recommendations into other programs administered by the Cabinet for Health and
 20 Family Services that are intended to improve maternal health care quality and
 21 safety.

22 ~~(6)~~~~(4)~~ On or before November 1 of each year, the collaborative~~[panel]~~ shall submit a
 23 report to the Interim Joint Committee on Families and Children, the Interim Joint
 24 Committee on Health Services, and the Advisory Council for Medical Assistance
 25 describing the collaborative's~~[panel's]~~ work and any recommendations to address
 26 identified gaps in services and supports for perinatal mental health disorders.

27 ➔Section 3. KRS 211.690 is amended to read as follows:

- 1 (1) There is established within the Cabinet for Health and Family Services the Health
 2 Access Nurturing Development Services (HANDS) program as a voluntary
 3 statewide home visitation program, for the purpose of providing assistance to at-risk
 4 parents during the prenatal period and until the child's third birthday. The HANDS
 5 program recognizes that parents are the primary decision-makers for their children.
 6 The goals of the HANDS program shall be~~are~~ to:
- 7 (a) Facilitate safe and healthy delivery of babies;
 - 8 (b) Provide information about optimal child growth and human development;
 - 9 (c) Facilitate the safety and health of homes; and
 - 10 (d) Encourage greater self-sufficiency of families.
- 11 (2) The cabinet shall administer the HANDS program in cooperation with the Cabinet
 12 for Health and Family Services and the local public health departments. The
 13 voluntary home visitation program may supplement, but shall not duplicate, any
 14 existing program that provides assistance to parents of young children.
- 15 (3) The HANDS program shall include ~~an~~ educational components~~component~~ on:
- 16 (a) The recognition and prevention of pediatric abusive head trauma, as defined
 17 in KRS 620.020;
 - 18 (b) Information related to lactation consultation and breastfeeding
 19 information; and
 - 20 (c) Information related to the importance of safe sleep for babies as a way to
 21 prevent sudden infant death syndrome as defined in KRS 213.011.
- 22 (4) Participants in the HANDS program shall express informed consent to participate
 23 by written agreement on a form promulgated by the Cabinet for Health and Family
 24 Services.
- 25 (5) Participants in the HANDS program shall participate in the home visitation
 26 program through in-person face-to-face methods or through tele-service delivery
 27 methods. For the purposes of this subsection, "tele-service" means a home

1 visitation service provided through video communication with the HANDS
 2 provider, parent, and child present in real time.

3 ➔SECTION 4. A NEW SECTION OF SUBTITLE 17 OF KRS CHAPTER 304
 4 IS CREATED TO READ AS FOLLOWS:

5 (1) As used in this section:

6 (a) "Health benefit plan" has the same meaning as in KRS 304.17A-005,
 7 except for purposes of this section, the term includes student health
 8 insurance offered by a Kentucky-licensed insurer under written contract
 9 with a university or college whose students it proposes to insure; and

10 (b) "Individual Exchange":

11 1. Means a governmental agency or nonprofit entity that makes qualified
 12 health plans, as defined in 42 U.S.C. sec. 18021, as amended,
 13 available to qualified individuals;

14 2. Includes an exchange serving the individual market for qualified
 15 individuals; and

16 3. Does not include a Small Business Health Options Program serving
 17 the small group market for qualified employers.

18 (2) To the extent permitted by federal law:

19 (a) The following shall provide a special enrollment period to pregnant women
 20 who are eligible for coverage:

21 1. Any insurer offering a health benefit plan in the individual market,
 22 which shall include student health insurance coverage as defined in
 23 45 C.F.R. sec. 147.145, as amended; and

24 2. Any individual exchange operating in this state;

25 (b) Except as provided in paragraph (c) of this subsection, the insurer or
 26 exchange shall allow a pregnant woman, and any individual who is eligible
 27 for coverage because of a relationship to a pregnant woman, to enroll for

1 coverage under the plan or on the exchange at any time during the
 2 pregnancy;

3 (c) If the insurer or exchange is required by federal law to limit the enrollment
 4 period to a period that is less than the period provided in paragraph (b) of
 5 this subsection:

6 1. The enrollment period shall not be less than the maximum period of
 7 time permitted by federal law; and

8 2. The enrollment period shall begin not earlier than the date that the
 9 pregnant woman receives confirmation of the pregnancy from a
 10 medical professional;

11 (d) The coverage required under this subsection shall begin no later than the
 12 first day of the first calendar month in which a medical professional
 13 determines that the pregnancy began, except that a pregnant woman may
 14 direct coverage to begin on the first day of any month occurring after that
 15 date but during the pregnancy; and

16 (e) If a directive under paragraph (d) of this subsection falls outside of the
 17 pregnancy period, the coverage required under this subsection shall begin
 18 no later than the first day of the last month that occurred during the
 19 pregnancy.

20 (3) (a) Nothing in this section shall be construed to imply that the insured is not
 21 responsible for the payment of premiums for each month during which
 22 coverage is provided.

23 (b) For any coverage provided under this section, the original or first premium
 24 shall become due and owing not earlier than thirty (30) days after the date
 25 of enrollment.

26 ➔Section 5. KRS 304.17A-145 is amended to read as follows:

27 (1) As used in this section:

- 1 (a) "Health benefit plan" has the same meaning as in KRS 304.17A-005,
 2 except for purposes of this section, the term:
- 3 1. Includes student health insurance offered by a Kentucky-licensed
 4 insurer under written contract with a university or college whose
 5 students it proposes to insure; and
- 6 2. Does not include a group health benefit plan that provides
 7 grandfathered health plan coverage as defined in 45 C.F.R. sec.
 8 147.140(a), as amended;
- 9 (b) "In-home program" means a program offered by a health care facility or
 10 health care professional for the treatment of substance use disorder which
 11 the insured accesses through telehealth or digital health services; and
- 12 (c) "Telehealth" or "digital health" has the same meaning as in KRS 211.332.
- 13 (2) (a) A health benefit plan shall provide~~issued or renewed on or after July 15,~~
 14 ~~1996, that provides~~ maternity coverage.
- 15 (b) The coverage required by this subsection includes coverage for:~~shall~~
 16 ~~provide~~
- 17 1. All individuals covered under the plan, including dependents,
 18 regardless of age;
- 19 2. Maternity care associated with pregnancy, childbirth, and postpartum
 20 care;
- 21 3. Labor and delivery;
- 22 4. All breastfeeding services and supplies required under 42 U.S.C. sec.
 23 300gg-13(a) and any related federal regulations, as amended; and
- 24 5. ~~Coverage for~~ Except as provided in subsection (3) of this section,
 25 inpatient care for a mother and her newly-born child for a minimum of:
 26 a. Forty-eight (48) hours after vaginal delivery; or ~~and a minimum~~
 27 ~~of~~

1 **b.** Ninety-six (96) hours after delivery by Cesarean section.

2 ~~(3)(2)~~ The provisions of subsection ~~(2)(b)5.(1)~~ of this section shall not apply to a
3 health benefit plan if:

4 **(a)** The ~~health benefit~~ plan authorizes an initial postpartum home visit which
5 would include the collection of an adequate sample for the hereditary and
6 metabolic newborn screening; and ~~if~~

7 **(b)** The attending physician, with the consent of the mother of the **newly**
8 **born** ~~newly born~~ child, authorizes a shorter length of stay ~~than that required~~
9 ~~of health benefit plans in subsection (1) of this section~~ upon the physician's
10 determination that the mother and newborn meet the criteria for medical
11 stability in the most current version of "Guidelines for Perinatal Care"
12 prepared by the American Academy of Pediatrics and the American College
13 of Obstetricians and Gynecologists.

14 **(4) A health benefit plan shall provide coverage:**

15 **(a) To pregnant and postpartum women for an in-home program; and**

16 **(b) For telehealth or digital health services that are related to maternity care**
17 **associated with pregnancy, childbirth, and postpartum care.**

18 ➔Section 6. KRS 18A.225 (Effective January 1, 2025) is amended to read as
19 follows:

20 (1) (a) The term "employee" for purposes of this section means:

- 21 1. Any person, including an elected public official, who is regularly
22 employed by any department, office, board, agency, or branch of state
23 government; or by a public postsecondary educational institution; or by
24 any city, urban-county, charter county, county, or consolidated local
25 government, whose legislative body has opted to participate in the state-
26 sponsored health insurance program pursuant to KRS 79.080; and who
27 is either a contributing member to any one (1) of the retirement systems

- 1 administered by the state, including but not limited to the Kentucky
2 Retirement Systems, County Employees Retirement System, Kentucky
3 Teachers' Retirement System, the Legislators' Retirement Plan, or the
4 Judicial Retirement Plan; or is receiving a contractual contribution from
5 the state toward a retirement plan; or, in the case of a public
6 postsecondary education institution, is an individual participating in an
7 optional retirement plan authorized by KRS 161.567; or is eligible to
8 participate in a retirement plan established by an employer who ceases
9 participating in the Kentucky Employees Retirement System pursuant to
10 KRS 61.522 whose employees participated in the health insurance plans
11 administered by the Personnel Cabinet prior to the employer's effective
12 cessation date in the Kentucky Employees Retirement System;
- 13 2. Any certified or classified employee of a local board of education or a
14 public charter school as defined in KRS 160.1590;
- 15 3. Any elected member of a local board of education;
- 16 4. Any person who is a present or future recipient of a retirement
17 allowance from the Kentucky Retirement Systems, County Employees
18 Retirement System, Kentucky Teachers' Retirement System, the
19 Legislators' Retirement Plan, the Judicial Retirement Plan, or the
20 Kentucky Community and Technical College System's optional
21 retirement plan authorized by KRS 161.567, except that a person who is
22 receiving a retirement allowance and who is age sixty-five (65) or older
23 shall not be included, with the exception of persons covered under KRS
24 61.702(2)(b)3. and 78.5536(2)(b)3., unless he or she is actively
25 employed pursuant to subparagraph 1. of this paragraph; and
- 26 5. Any eligible dependents and beneficiaries of participating employees
27 and retirees who are entitled to participate in the state-sponsored health

- 1 insurance program;
- 2 (b) The term "health benefit plan" for the purposes of this section means a health
3 benefit plan as defined in KRS 304.17A-005;
- 4 (c) The term "insurer" for the purposes of this section means an insurer as defined
5 in KRS 304.17A-005; and
- 6 (d) The term "managed care plan" for the purposes of this section means a
7 managed care plan as defined in KRS 304.17A-500.
- 8 (2) (a) The secretary of the Finance and Administration Cabinet, upon the
9 recommendation of the secretary of the Personnel Cabinet, shall procure, in
10 compliance with the provisions of KRS 45A.080, 45A.085, and 45A.090,
11 from one (1) or more insurers authorized to do business in this state, a group
12 health benefit plan that may include but not be limited to health maintenance
13 organization (HMO), preferred provider organization (PPO), point of service
14 (POS), and exclusive provider organization (EPO) benefit plans
15 encompassing all or any class or classes of employees. With the exception of
16 employers governed by the provisions of KRS Chapters 16, 18A, and 151B,
17 all employers of any class of employees or former employees shall enter into
18 a contract with the Personnel Cabinet prior to including that group in the state
19 health insurance group. The contracts shall include but not be limited to
20 designating the entity responsible for filing any federal forms, adoption of
21 policies required for proper plan administration, acceptance of the contractual
22 provisions with health insurance carriers or third-party administrators, and
23 adoption of the payment and reimbursement methods necessary for efficient
24 administration of the health insurance program. Health insurance coverage
25 provided to state employees under this section shall, at a minimum, contain
26 the same benefits as provided under Kentucky Kare Standard as of January 1,
27 1994, and shall include a mail-order drug option as provided in subsection

1 (13) of this section. All employees and other persons for whom the health care
2 coverage is provided or made available shall annually be given an option to
3 elect health care coverage through a self-funded plan offered by the
4 Commonwealth or, if a self-funded plan is not available, from a list of
5 coverage options determined by the competitive bid process under the
6 provisions of KRS 45A.080, 45A.085, and 45A.090 and made available
7 during annual open enrollment.

8 (b) The policy or policies shall be approved by the commissioner of insurance
9 and may contain the provisions the commissioner of insurance approves,
10 whether or not otherwise permitted by the insurance laws.

11 (c) Any carrier bidding to offer health care coverage to employees shall agree to
12 provide coverage to all members of the state group, including active
13 employees and retirees and their eligible covered dependents and
14 beneficiaries, within the county or counties specified in its bid. Except as
15 provided in subsection (20) of this section, any carrier bidding to offer health
16 care coverage to employees shall also agree to rate all employees as a single
17 entity, except for those retirees whose former employers insure their active
18 employees outside the state-sponsored health insurance program and as
19 otherwise provided in KRS 61.702(2)(b)3.b. and 78.5536(2)(b)3.b.

20 (d) Any carrier bidding to offer health care coverage to employees shall agree to
21 provide enrollment, claims, and utilization data to the Commonwealth in a
22 format specified by the Personnel Cabinet with the understanding that the data
23 shall be owned by the Commonwealth; to provide data in an electronic form
24 and within a time frame specified by the Personnel Cabinet; and to be subject
25 to penalties for noncompliance with data reporting requirements as specified
26 by the Personnel Cabinet. The Personnel Cabinet shall take strict precautions
27 to protect the confidentiality of each individual employee; however,

1 confidentiality assertions shall not relieve a carrier from the requirement of
2 providing stipulated data to the Commonwealth.

3 (e) The Personnel Cabinet shall develop the necessary techniques and capabilities
4 for timely analysis of data received from carriers and, to the extent possible,
5 provide in the request-for-proposal specifics relating to data requirements,
6 electronic reporting, and penalties for noncompliance. The Commonwealth
7 shall own the enrollment, claims, and utilization data provided by each carrier
8 and shall develop methods to protect the confidentiality of the individual. The
9 Personnel Cabinet shall include in the October annual report submitted
10 pursuant to the provisions of KRS 18A.226 to the Governor, the General
11 Assembly, and the Chief Justice of the Supreme Court, an analysis of the
12 financial stability of the program, which shall include but not be limited to
13 loss ratios, methods of risk adjustment, measurements of carrier quality of
14 service, prescription coverage and cost management, and statutorily required
15 mandates. If state self-insurance was available as a carrier option, the report
16 also shall provide a detailed financial analysis of the self-insurance fund
17 including but not limited to loss ratios, reserves, and reinsurance agreements.

18 (f) If any agency participating in the state-sponsored employee health insurance
19 program for its active employees terminates participation and there is a state
20 appropriation for the employer's contribution for active employees' health
21 insurance coverage, then neither the agency nor the employees shall receive
22 the state-funded contribution after termination from the state-sponsored
23 employee health insurance program.

24 (g) Any funds in flexible spending accounts that remain after all reimbursements
25 have been processed shall be transferred to the credit of the state-sponsored
26 health insurance plan's appropriation account.

27 (h) Each entity participating in the state-sponsored health insurance program shall

1 provide an amount at least equal to the state contribution rate for the employer
2 portion of the health insurance premium. For any participating entity that used
3 the state payroll system, the employer contribution amount shall be equal to
4 but not greater than the state contribution rate.

5 (3) The premiums may be paid by the policyholder:

6 (a) Wholly from funds contributed by the employee, by payroll deduction or
7 otherwise;

8 (b) Wholly from funds contributed by any department, board, agency, public
9 postsecondary education institution, or branch of state, city, urban-county,
10 charter county, county, or consolidated local government; or

11 (c) Partly from each, except that any premium due for health care coverage or
12 dental coverage, if any, in excess of the premium amount contributed by any
13 department, board, agency, postsecondary education institution, or branch of
14 state, city, urban-county, charter county, county, or consolidated local
15 government for any other health care coverage shall be paid by the employee.

16 (4) If an employee moves his or her place of residence or employment out of the
17 service area of an insurer offering a managed health care plan, under which he or
18 she has elected coverage, into either the service area of another managed health care
19 plan or into an area of the Commonwealth not within a managed health care plan
20 service area, the employee shall be given an option, at the time of the move or
21 transfer, to change his or her coverage to another health benefit plan.

22 (5) No payment of premium by any department, board, agency, public postsecondary
23 educational institution, or branch of state, city, urban-county, charter county,
24 county, or consolidated local government shall constitute compensation to an
25 insured employee for the purposes of any statute fixing or limiting the
26 compensation of such an employee. Any premium or other expense incurred by any
27 department, board, agency, public postsecondary educational institution, or branch

1 of state, city, urban-county, charter county, county, or consolidated local
2 government shall be considered a proper cost of administration.

3 (6) The policy or policies may contain the provisions with respect to the class or classes
4 of employees covered, amounts of insurance or coverage for designated classes or
5 groups of employees, policy options, terms of eligibility, and continuation of
6 insurance or coverage after retirement.

7 (7) Group rates under this section shall be made available to the disabled child of an
8 employee regardless of the child's age if the entire premium for the disabled child's
9 coverage is paid by the state employee. A child shall be considered disabled if he or
10 she has been determined to be eligible for federal Social Security disability benefits.

11 (8) The health care contract or contracts for employees shall be entered into for a
12 period of not less than one (1) year.

13 (9) The secretary shall appoint thirty-two (32) persons to an Advisory Committee of
14 State Health Insurance Subscribers to advise the secretary or the secretary's
15 designee regarding the state-sponsored health insurance program for employees.
16 The secretary shall appoint, from a list of names submitted by appointing
17 authorities, members representing school districts from each of the seven (7)
18 Supreme Court districts, members representing state government from each of the
19 seven (7) Supreme Court districts, two (2) members representing retirees under age
20 sixty-five (65), one (1) member representing local health departments, two (2)
21 members representing the Kentucky Teachers' Retirement System, and three (3)
22 members at large. The secretary shall also appoint two (2) members from a list of
23 five (5) names submitted by the Kentucky Education Association, two (2) members
24 from a list of five (5) names submitted by the largest state employee organization of
25 nonschool state employees, two (2) members from a list of five (5) names submitted
26 by the Kentucky Association of Counties, two (2) members from a list of five (5)
27 names submitted by the Kentucky League of Cities, and two (2) members from a

1 list of names consisting of five (5) names submitted by each state employee
2 organization that has two thousand (2,000) or more members on state payroll
3 deduction. The advisory committee shall be appointed in January of each year and
4 shall meet quarterly.

5 (10) Notwithstanding any other provision of law to the contrary, the policy or policies
6 provided to employees pursuant to this section shall not provide coverage for
7 obtaining or performing an abortion, nor shall any state funds be used for the
8 purpose of obtaining or performing an abortion on behalf of employees or their
9 dependents.

10 (11) Interruption of an established treatment regime with maintenance drugs shall be
11 grounds for an insured to appeal a formulary change through the established appeal
12 procedures approved by the Department of Insurance, if the physician supervising
13 the treatment certifies that the change is not in the best interests of the patient.

14 (12) Any employee who is eligible for and elects to participate in the state health
15 insurance program as a retiree, or the spouse or beneficiary of a retiree, under any
16 one (1) of the state-sponsored retirement systems shall not be eligible to receive the
17 state health insurance contribution toward health care coverage as a result of any
18 other employment for which there is a public employer contribution. This does not
19 preclude a retiree and an active employee spouse from using both contributions to
20 the extent needed for purchase of one (1) state sponsored health insurance policy
21 for that plan year.

22 (13) (a) The policies of health insurance coverage procured under subsection (2) of
23 this section shall include a mail-order drug option for maintenance drugs for
24 state employees. Maintenance drugs may be dispensed by mail order in
25 accordance with Kentucky law.

26 (b) A health insurer shall not discriminate against any retail pharmacy located
27 within the geographic coverage area of the health benefit plan and that meets

1 the terms and conditions for participation established by the insurer, including
2 price, dispensing fee, and copay requirements of a mail-order option. The
3 retail pharmacy shall not be required to dispense by mail.

4 (c) The mail-order option shall not permit the dispensing of a controlled
5 substance classified in Schedule II.

6 (14) The policy or policies provided to state employees or their dependents pursuant to
7 this section shall provide coverage for obtaining a hearing aid and acquiring hearing
8 aid-related services for insured individuals under eighteen (18) years of age, subject
9 to a cap of one thousand four hundred dollars (\$1,400) every thirty-six (36) months
10 pursuant to KRS 304.17A-132.

11 (15) Any policy provided to state employees or their dependents pursuant to this section
12 shall provide coverage for the diagnosis and treatment of autism spectrum disorders
13 consistent with KRS 304.17A-142.

14 (16) Any policy provided to state employees or their dependents pursuant to this section
15 shall provide coverage for obtaining amino acid-based elemental formula pursuant
16 to KRS 304.17A-258.

17 (17) If a state employee's residence and place of employment are in the same county,
18 and if the hospital located within that county does not offer surgical services,
19 intensive care services, obstetrical services, level II neonatal services, diagnostic
20 cardiac catheterization services, and magnetic resonance imaging services, the
21 employee may select a plan available in a contiguous county that does provide
22 those services, and the state contribution for the plan shall be the amount available
23 in the county where the plan selected is located.

24 (18) If a state employee's residence and place of employment are each located in
25 counties in which the hospitals do not offer surgical services, intensive care
26 services, obstetrical services, level II neonatal services, diagnostic cardiac
27 catheterization services, and magnetic resonance imaging services, the employee

1 may select a plan available in a county contiguous to the county of residence that
 2 does provide those services, and the state contribution for the plan shall be the
 3 amount available in the county where the plan selected is located.

4 (19) The Personnel Cabinet is encouraged to study whether it is fair and reasonable and
 5 in the best interests of the state group to allow any carrier bidding to offer health
 6 care coverage under this section to submit bids that may vary county by county or
 7 by larger geographic areas.

8 (20) Notwithstanding any other provision of this section, the bid for proposals for health
 9 insurance coverage for calendar year 2004 shall include a bid scenario that reflects
 10 the statewide rating structure provided in calendar year 2003 and a bid scenario that
 11 allows for a regional rating structure that allows carriers to submit bids that may
 12 vary by region for a given product offering as described in this subsection:

13 (a) The regional rating bid scenario shall not include a request for bid on a
 14 statewide option;

15 (b) The Personnel Cabinet shall divide the state into geographical regions which
 16 shall be the same as the partnership regions designated by the Department for
 17 Medicaid Services for purposes of the Kentucky Health Care Partnership
 18 Program established pursuant to 907 KAR 1:705;

19 (c) The request for proposal shall require a carrier's bid to include every county
 20 within the region or regions for which the bid is submitted and include but not
 21 be restricted to a preferred provider organization (PPO) option;

22 (d) If the Personnel Cabinet accepts a carrier's bid, the cabinet shall award the
 23 carrier all of the counties included in its bid within the region. If the Personnel
 24 Cabinet deems the bids submitted in accordance with this subsection to be in
 25 the best interests of state employees in a region, the cabinet may award the
 26 contract for that region to no more than two (2) carriers; and

27 (e) Nothing in this subsection shall prohibit the Personnel Cabinet from including

1 other requirements or criteria in the request for proposal.

2 (21) Any fully insured health benefit plan or self-insured plan issued or renewed on or
 3 after July 12, 2006, to public employees pursuant to this section which provides
 4 coverage for services rendered by a physician or osteopath duly licensed under KRS
 5 Chapter 311 that are within the scope of practice of an optometrist duly licensed
 6 under the provisions of KRS Chapter 320 shall provide the same payment of
 7 coverage to optometrists as allowed for those services rendered by physicians or
 8 osteopaths.

9 (22) Any fully insured health benefit plan or self-insured plan issued or renewed to
 10 public employees pursuant to this section shall comply with:

- 11 (a) KRS 304.12-237;
- 12 (b) KRS 304.17A-270 and 304.17A-525;
- 13 (c) KRS 304.17A-600 to 304.17A-633;
- 14 (d) KRS 205.593;
- 15 (e) KRS 304.17A-700 to 304.17A-730;
- 16 (f) KRS 304.14-135;
- 17 (g) KRS 304.17A-580 and 304.17A-641;
- 18 (h) KRS 304.99-123;
- 19 (i) KRS 304.17A-138;
- 20 (j) KRS 304.17A-148;
- 21 (k) KRS 304.17A-163 and 304.17A-1631;
- 22 (l) KRS 304.17A-265;
- 23 (m) KRS 304.17A-261;
- 24 (n) KRS 304.17A-262; ~~and~~
- 25 (o) **Section 5 of this Act;**
- 26 **(p) Section 14 of this Act; and**
- 27 **(q)** Administrative regulations promulgated pursuant to statutes listed in this

1 subsection.

2 **(23) (a) Any fully insured health benefit plan or self-insured plan issued or renewed**
 3 **to public employees pursuant to this section shall provide a special**
 4 **enrollment period to pregnant women who are eligible for coverage in**
 5 **accordance with the requirements set forth in Section 4 of this Act.**

6 **(b) The Department of Employee Insurance shall, at or before the time a public**
 7 **employee is initially offered the opportunity to enroll in the plan or**
 8 **coverage, provide the employee a notice of the special enrollment rights**
 9 **under this subsection.**

10 ➔Section 7. KRS 164.2871 (Effective January 1, 2025) is amended to read as
 11 follows:

12 (1) The governing board of each state postsecondary educational institution is
 13 authorized to purchase liability insurance for the protection of the individual
 14 members of the governing board, faculty, and staff of such institutions from liability
 15 for acts and omissions committed in the course and scope of the individual's
 16 employment or service. Each institution may purchase the type and amount of
 17 liability coverage deemed to best serve the interest of such institution.

18 (2) All retirement annuity allowances accrued or accruing to any employee of a state
 19 postsecondary educational institution through a retirement program sponsored by
 20 the state postsecondary educational institution are hereby exempt from any state,
 21 county, or municipal tax, and shall not be subject to execution, attachment,
 22 garnishment, or any other process whatsoever, nor shall any assignment thereof be
 23 enforceable in any court. Except retirement benefits accrued or accruing to any
 24 employee of a state postsecondary educational institution through a retirement
 25 program sponsored by the state postsecondary educational institution on or after
 26 January 1, 1998, shall be subject to the tax imposed by KRS 141.020, to the extent
 27 provided in KRS 141.010 and 141.0215.

- 1 (3) Except as provided in KRS Chapter 44, the purchase of liability insurance for
 2 members of governing boards, faculty and staff of institutions of higher education
 3 in this state shall not be construed to be a waiver of sovereign immunity or any
 4 other immunity or privilege.
- 5 (4) The governing board of each state postsecondary education institution is authorized
 6 to provide a self-insured employer group health plan to its employees, which plan
 7 shall:
- 8 (a) Conform to the requirements of Subtitle 32 of KRS Chapter 304; and
 9 (b) Except as provided in subsection (5) of this section, be exempt from
 10 conformity with Subtitle 17A of KRS Chapter 304.
- 11 (5) A self-insured employer group health plan provided by the governing board of a
 12 state postsecondary education institution to its employees shall comply with:
- 13 (a) KRS 304.17A-163 and 304.17A-1631;
 14 (b) KRS 304.17A-265;
 15 (c) KRS 304.17A-261;~~and~~
 16 (d) KRS 304.17A-262;
 17 (e) Section 5 of this Act; and
 18 (f) Section 14 of this Act.
- 19 (6) (a) A self-insured employer group health plan provided by the governing board
 20 of a state postsecondary education institution to its employees shall provide
 21 a special enrollment period to pregnant women who are eligible for
 22 coverage in accordance with the requirements set forth in Section 4 of this
 23 Act.
- 24 (b) The governing board of a state postsecondary education institution shall, at
 25 or before the time an employee is initially offered the opportunity to enroll
 26 in the plan or coverage, provide the employee a notice of the special
 27 enrollment rights under this subsection.

1 ➔Section 8. KRS 194A.099 is amended to read as follows:

- 2 (1) The Division of Health Benefit Exchange *within the Office of Data Analytics* shall
 3 administer the provisions of the Patient Protection and Affordable Care Act of
 4 2010, Pub. L. No. 111-148.
- 5 (2) The Division of Health Benefit Exchange shall:
- 6 (a) Facilitate enrollment in health coverage and the purchase and sale of qualified
 7 health plans in the individual market;
- 8 (b) Facilitate the ability of eligible individuals to receive premium tax credits and
 9 cost-sharing reductions and enable eligible small businesses to receive tax
 10 credits, in compliance with all applicable federal and state laws and
 11 regulations;
- 12 (c) Oversee the consumer assistance programs of navigators, in-person assisters,
 13 certified application counselors, and insurance agents as appropriate;
- 14 (d) At a minimum, carry out the functions and responsibilities required pursuant
 15 to 42 U.S.C. sec. 18031 to implement and comply with federal regulations in
 16 accordance with 42 U.S.C. sec. 18041; ~~and~~
- 17 (e) Regularly consult with stakeholders in accordance with 45 C.F.R. sec.
 18 155.130; and
- 19 *(f) Comply with Section 4 of this Act.*
- 20 (3) The Office *of Data Analytics*:
- 21 *(a)* May enter into contracts and other agreements with appropriate entities,
 22 including but not limited to federal, state, and local agencies, as permitted
 23 under 45 C.F.R. sec. 155.110, to the extent necessary to carry out the duties
 24 and responsibilities of the office ~~if, provided that~~ the agreements incorporate
 25 adequate protections with respect to the confidentiality of any information to
 26 be shared; ~~and~~
- 27 ~~*(b)(4)*~~ ~~The office~~ Shall pursue all available federal funding for the further

1 development and operation of the Division of Health Benefit Exchange; ~~[-]~~

2 ~~(c)(5) [The Office of Health Data and Analytics]~~ Shall promulgate
 3 administrative regulations in accordance with KRS Chapter 13A to implement
 4 this section; and ~~[-]~~

5 ~~(d)(6) [The office]~~ Shall not establish procedures and rules that conflict with or
 6 prevent the application of the Patient Protection and Affordable Care Act of
 7 2010, Pub. L. No. 111-148.

8 ➔ Section 9. KRS 205.522 is amended to read as follows:

9 (1) *With respect to the administration and provision of Medicaid benefits pursuant to*
 10 *this chapter,* the Department for Medicaid Services, ~~[- and]~~ any managed care
 11 organization contracted to provide Medicaid benefits pursuant to this chapter, and
 12 *the state's medical assistance program* shall *be subject to, and* comply with, the
 13 *following, as applicable:* ~~[- provisions of]~~

14 (a) KRS 304.17A-163; ~~[-]~~

15 (b) *KRS* 304.17A-1631; ~~[-]~~

16 (c) *KRS* 304.17A-167; ~~[-]~~

17 (d) *KRS* 304.17A-235; ~~[-]~~

18 (e) *KRS* 304.17A-257; ~~[-]~~

19 (f) *KRS* 304.17A-259; ~~[-]~~

20 (g) *KRS* 304.17A-263; ~~[-]~~

21 (h) *KRS* 304.17A-515; ~~[-]~~

22 (i) *KRS* 304.17A-580; ~~[-]~~

23 (j) *KRS* 304.17A-600, 304.17A-603, and 304.17A-607; ~~[- and]~~

24 (k) *KRS* 304.17A-740 to 304.17A-743; ~~[- as applicable]~~

25 (l) *Section 5 of this Act; and*

26 (m) *Section 14 of this Act.*

27 (2) A managed care organization contracted to provide Medicaid benefits pursuant to

1 this chapter shall comply with the reporting requirements of KRS 304.17A-732.

2 ➔Section 10. KRS 205.592 is amended to read as follows:

3 **(1) Except as provided in subsection (2) of this section,** pregnant women, new mothers
4 up to twelve (12) months postpartum, and children up to age one (1) shall be
5 eligible for participation in the Kentucky Medical Assistance Program if:

6 ~~(a)(1)~~ They have family income up to but not exceeding one hundred and
7 eighty-five percent (85%) of the nonfarm income official poverty guidelines
8 as promulgated by the Department of Health and Human Services of the
9 United States as revised annually; and

10 ~~(b)(2)~~ They are otherwise eligible for the program.

11 **(2) The percentage established in subsection (1)(a) of this section may be increased**
12 **to the extent:**

13 **(a) Permitted under federal law; and**

14 **(b) Funding is available.**

15 ➔Section 11. KRS 205.6485 is amended to read as follows:

16 (1) **As used in this section, "KCHIP" means the Kentucky Children's Health**
17 **Insurance Program.**

18 **(2)** The Cabinet for Health and Family Services shall:

19 **(a)** Prepare a state child health plan, **known as KCHIP,** meeting the requirements
20 of Title XXI of the Federal Social Security Act, for submission to the
21 Secretary of the United States Department of Health and Human Services
22 within such time as will permit the state to receive the maximum amounts of
23 federal matching funds available under Title XXI; **and** ~~the cabinet shall,~~

24 **(b)** By administrative regulation promulgated in accordance with KRS Chapter
25 13A, establish the following:

26 ~~1.(a)~~ The eligibility criteria for children covered by **KCHIP, which**
27 **shall include a provision that** ~~the Kentucky Children's Health Insurance~~

1 ~~Program. However,~~ no person eligible for services under Title XIX of
 2 the Social Security Act, 42 U.S.C. secs. 1396 to 1396v, as amended,
 3 shall be eligible for services under KCHIP,~~[the Kentucky Children's~~
 4 ~~Health Insurance Program]~~ except to the extent that Title XIX coverage
 5 is expanded by KRS 205.6481 to 205.6495 and KRS 304.17A-340;

6 ~~2.[(b)]~~ The schedule of benefits to be covered by KCHIP~~[the Kentucky~~
 7 ~~Children's Health Insurance Program]~~, which shall:~~[include preventive~~
 8 ~~services, vision services including glasses, and dental services including~~
 9 ~~at least sealants, extractions, and fillings, and which shall]~~

10 a. Be at least equivalent to one (1) of the following:

11 ~~i. [1.]~~ The standard Blue Cross/Blue Shield preferred provider
 12 option under the Federal Employees Health Benefit Plan
 13 established by 5 U.S.C. sec. 8903(1);

14 ~~ii. [2.]~~ A mid-range health benefit coverage plan that is offered and
 15 generally available to state employees; or

16 ~~iii. [3.]~~ Health insurance coverage offered by a health
 17 maintenance organization that has the largest insured
 18 commercial, non-Medicaid enrollment of covered lives in the
 19 state; and

20 **b. Comply with subsection (6) of this section;**

21 ~~3. [(c)]~~ The premium contribution per family ~~for [of]~~ health insurance
 22 coverage available under the KCHIP, which~~[Kentucky Children's~~
 23 ~~Health Insurance Program with provisions for the payment of premium~~
 24 ~~contributions by families of children eligible for coverage by the~~
 25 ~~program based upon a sliding scale relating to family income. Premium~~
 26 ~~contributions]~~ shall be based;

27 a. On a six (6) month period; and

1 **b.** **Upon a sliding scale relating to family income** not to exceed:

2 ~~i.~~^[1.] Ten dollars (\$10), to be paid by a family with income
3 between one hundred percent (100%) to one hundred thirty-
4 three percent (133%) of the federal poverty level;

5 ~~ii.~~^[2.] Twenty dollars (\$20), to be paid by a family with income
6 between one hundred thirty-four percent (134%) to one
7 hundred forty-nine percent (149%) of the federal poverty
8 level; and

9 ~~iii.~~^[3.] One hundred twenty dollars (\$120), to be paid by a
10 family with income between one hundred fifty percent
11 (150%) to two hundred percent (200%) of the federal
12 poverty level, and which may be made on a partial payment
13 plan of twenty dollars (\$20) per month or sixty dollars (\$60)
14 per quarter;

15 ~~4.~~^[(d)] There shall be no copayments for services provided under
16 **KCHIP**~~[the Kentucky Children's Health Insurance Program]~~; and

17 ~~5.~~^[(e)] **a.** The criteria for health services providers and insurers
18 wishing to contract with the Commonwealth to provide~~[the~~
19 ~~children's health insurance]~~ coverage **under KCHIP.**

20 **b.** ~~[However,]~~ The cabinet shall provide, in any contracting process
21 for **coverage of**~~[the]~~ preventive **services**~~[health insurance~~
22 ~~program]~~, the opportunity for a public health department to bid on
23 preventive health services to eligible children within the public
24 health department's service area. A public health department shall
25 not be disqualified from bidding because the department does not
26 currently offer all the services required by~~[paragraph (b) of]~~ this
27 **section**~~[subsection].~~ The criteria shall be set forth in administrative

1 regulations under KRS Chapter 13A and shall maximize
 2 competition among the providers and insurers. The ~~Cabinet for~~
 3 Finance and Administration ***Cabinet*** shall provide oversight over
 4 contracting policies and procedures to assure that the number of
 5 applicants for contracts is maximized.

6 ~~(3)(2)~~ Within twelve (12) months of federal approval of the state's Title XXI child
 7 health plan, the Cabinet for Health and Family Services shall assure that a KCHIP
 8 program is available to all eligible children in all regions of the state. If necessary,
 9 in order to meet this assurance, the cabinet shall institute its own program.

10 ~~(4)(3)~~ KCHIP recipients shall have direct access without a referral from any
 11 gatekeeper primary care provider to dentists for covered primary dental services
 12 and to optometrists and ophthalmologists for covered primary eye and vision
 13 services.

14 ~~(5)(4)~~ ***KCHIP*** ~~The Kentucky Children's Health Insurance Plan~~ shall comply with
 15 KRS 304.17A-163 and 304.17A-1631.

16 ***(6) The schedule of benefits required under subsection (2)(b)2. of this section shall***
 17 ***include:***

18 ***(a) Preventive services;***

19 ***(b) Vision services, including glasses;***

20 ***(c) Dental services, including sealants, extractions, and fillings; and***

21 ***(d) The coverage required under:***

22 ***1. Section 5 of this Act; and***

23 ***2. Section 14 of this Act.***

24 ➔SECTION 12. A NEW SECTION OF KRS CHAPTER 205 IS CREATED TO
 25 READ AS FOLLOWS:

26 ***(1) As used in this section:***

27 ***(a) "Breast pump kit" means a collection of tubing, valves, flanges, bottles, and***

1 other parts required to extract human milk using a breast pump;

2 (b) "In-home program" means a program offered by a health care facility or
 3 health care professional for the treatment of substance use disorder which
 4 the insured accesses through telehealth or digital health service;

5 (c) "Lactation consultation" means the clinical application of scientific
 6 principles and a multidisciplinary body of evidence for evaluation, problem
 7 identification, treatment, education, and consultation to families regarding
 8 the course of lactation and feeding by a qualified clinical lactation care
 9 practitioner, including but not be limited to:

10 1. Clinical maternal, child, and feeding history and assessment related to
 11 breastfeeding and human lactation through the systematic collection
 12 of subjective and objective information;

13 2. Analysis of data;

14 3. Development of a lactation management and child feeding plan with
 15 demonstration and instruction to parents;

16 4. Provision of lactation and feeding education;

17 5. The recommendation and use of assistive devices;

18 6. Communication to the primary health care practitioner or
 19 practitioners and referral to other health care practitioners, as needed;

20 7. Appropriate follow-up with evaluation of outcomes; and

21 8. Documentation of the encounter in a patient record;

22 (d) "Qualified clinical lactation care practitioner" means a licensed health care
 23 practitioner wherein lactation consultation is within their legal scope of
 24 practice; and

25 (e) "Telehealth" or "digital health" has the same meaning as in KRS 211.332.

26 (2) The Department for Medicaid Services and any managed care organization with
 27 which the department contracts for the delivery of Medicaid services shall provide

1 coverage:

2 (a) For lactation consultation;

3 (b) For breastfeeding equipment;

4 (c) To pregnant and postpartum women for an in-home program; and

5 (d) For telehealth or digital health services that are related to maternity care
6 associated with pregnancy, childbirth, and postpartum care.

7 (3) The coverage required by this section shall:

8 (a) Not be subject to:

9 1. Any cost-sharing requirements, including but not limited to
10 copayments; or

11 2. Utilization management requirements, including but not limited to
12 prior authorization, prescription, or referral, except as permitted in
13 paragraph (d) of this subsection;

14 (b) Be provided in conjunction with each birth for the duration of
15 breastfeeding, as defined by the beneficiary;

16 (c) For lactation consultation, include:

17 1. In-person, one-on-one consultation, including home visits, regardless
18 of location of service provision;

19 2. The delivery of consultation via telehealth, as defined in KRS 205.510,
20 if the beneficiary requests telehealth consultation in lieu of in-person,
21 one-on-one consultation; or

22 3. Group consultation, if the beneficiary requests group consultation in
23 lieu of in-person, one-on-one consultation; and

24 (d) For breastfeeding equipment, include:

25 1. Purchase of a single-user, double electric breast pump, or a manual
26 pump in lieu of a double electric breast pump, if requested by the
27 beneficiary;

- 1 2. Rental of a multi-user breast pump on the recommendation of a
 2 licensed health care provider; and
- 3 3. Two (2) breast pump kits as well as appropriately sized breast pump
 4 flanges and other lactation accessories recommended by a health care
 5 provider.
- 6 (4) (a) The breastfeeding equipment described in subsection (3)(d) of this section
 7 shall be furnished within forty-eight (48) hours of notification of need, if
 8 requested after the birth of the child, or by the later of two (2) weeks before
 9 the beneficiary's expected due date or seventy-two (72) hours after
 10 notification of need, if requested prior to the birth of the child.
- 11 (b) If the department cannot ensure delivery of breastfeeding equipment in
 12 accordance with paragraph (a) of this subsection, an individual may
 13 purchase equipment and the department or a managed care organization
 14 with whom the department contracts for the delivery of Medicaid services
 15 shall reimburse the individual for all out-of-pocket expenses incurred by the
 16 individual, including any balance billing amounts.

17 ➔SECTION 13. A NEW SECTION OF KRS CHAPTER 216 IS CREATED TO
 18 READ AS FOLLOWS:

- 19 (1) As used in this section:
- 20 (a) "Pregnant" has the same meaning as in KRS 311.772;
- 21 (b) "Perinatal" means occurring in, concerned with, or being in the period
 22 around the time of birth; and
- 23 (c) "Baby" includes both an unborn child as defined in KRS 311.781 and an
 24 infant as defined in KRS 311.821.
- 25 (2) All hospitals and alternative birthing centers offering obstetric services and
 26 maternal-fetal medicine and all midwives shall provide or make referrals to a
 27 perinatal palliative care program or perinatal palliative care support services for

- 1 pregnant women, birth fathers, and family members when there is a:
- 2 (a) Prenatal diagnosis indicating that a baby may die before or after birth;
- 3 (b) Diagnosis of fetal anomalies where the likelihood of long-term survival is
- 4 uncertain or minimal; or
- 5 (c) Newborn diagnosed with a potentially life-limiting illness.
- 6 (3) Perinatal palliative care programs and support services shall include but not be
- 7 limited to:
- 8 (a) Coordination of care between medical, obstetric, neonatal, and perinatal
- 9 palliative care providers, hospital staff, and the pregnant woman, birth
- 10 father, and family members;
- 11 (b) Care and specialized support through the remainder of a pregnancy, the
- 12 birth, the newborn period, and the death;
- 13 (c) Providing anticipatory guidance, education, and support for pregnant
- 14 women, birth fathers, and family members before, during, and after
- 15 delivery;
- 16 (d) Providing resources and referrals as needed;
- 17 (e) Assistance with making medical decisions;
- 18 (f) Counseling;
- 19 (g) Education, including specific information about the baby's diagnosis;
- 20 (h) Emotional support;
- 21 (i) Guidance on what to expect throughout the grieving process;
- 22 (j) Assistance with the creation of memories and keepsakes;
- 23 (k) Preparation for meeting the baby and understanding the limitations that
- 24 may be present at birth;
- 25 (l) Pastoral, emotional, and spiritual support for pregnant women, birth
- 26 fathers, and family members; and
- 27 (m) Preparing a plan of care for the baby which may include medical

1 interventions as needed in the home, hospital, or neonatal hospice.

2 (4) The Cabinet for Health and Family Services shall create and maintain a list of
 3 perinatal palliative care programs and service providers on its website.

4 (5) Nothing in this section shall be interpreted as permitting any violation of KRS
 5 311.772.

6 ➔SECTION 14. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER
 7 304 IS CREATED TO READ AS FOLLOWS:

8 (1) Except as provided in subsection (2) of this section, a health benefit plan shall
 9 provide coverage for perinatal palliative care programs and support services as
 10 described in Section 13 of this Act.

11 (2) Notwithstanding any other provision of this chapter, if the application of any
 12 requirement of this section to a qualified health plan as defined in 42 U.S.C. sec.
 13 18021(a)(1), as amended, would result in a determination that the state must
 14 make payments to defray the cost of the requirement under 42 U.S.C. sec.
 15 18031(d)(3) and 45 C.F.R. sec. 155.170, as amended, then the requirement shall
 16 not apply to the qualified health plan until the cost defrayal requirement is no
 17 longer applicable.

18 ➔Section 15. KRS 405.075 is amended to read as follows:

19 (1) As used in this section:

20 (a) "Newborn infant" means an infant who is medically determined to be less
 21 than thirty (30) days old;

22 (b) "Newborn safety device" means a device:

23 1. Designed to permit a parent to anonymously place a newborn infant in
 24 the device with the intent to leave the newborn and for an emergency
 25 medical services provider to remove the newborn from the device and
 26 take custody of the newborn infant;

27 2. Installed with an adequate dual alarm system connected to the physical

- 1 location where the device is physically installed. The dual alarm system
 2 shall be:
- 3 a. Tested at least one (1) time per month to ensure the alarm system
 4 is in working order; and
 - 5 b. Visually checked at least two (2) times per day to ensure the alarm
 6 system is in working order;
- 7 3. Approved by and physically located inside a participating staffed Class
 8 I, Class II, Class III, or Class IV ground ambulance provider, staffed
 9 police station, staffed fire station, or staffed hospital that:
- 10 a. Is licensed or otherwise legally operating in this state; and
 - 11 b. Is staffed continuously on a twenty-four (24) hour basis every day
 12 by a licensed emergency medical services provider **except when**
 13 **all licensed emergency medical services providers are**
 14 **temporarily off-site providing emergency medical services as**
 15 **defined in KRS 311A.010**; and
- 16 4. Located in an area that is conspicuous and visible to Class I, Class II,
 17 Class III, or Class IV ground ambulance provider, police station, fire
 18 station, or hospital staff; and
- 19 (c) "Participating place of worship" means a recognized place of religious
 20 worship that has voluntarily agreed to perform the duty granted in this section
 21 and display signage prominently on its premises regarding its participation in
 22 this section and its operating hours during which staff will be present.
- 23 (2) A parent shall have the right to remain anonymous, shall not be pursued, and shall
 24 not be considered to have abandoned or endangered a newborn infant under KRS
 25 Chapters 508 and 530 if the parent:
- 26 (a) Places a newborn infant:
 - 27 1. With an emergency medical services provider;

- 1 2. At a staffed police station, fire station, or hospital;
- 2 3. At a participating place of worship; or
- 3 4. Inside a newborn safety device that meets the requirements of
- 4 subsection (1) of this section; and
- 5 (b) Expresses no intent to return for the newborn infant.
- 6 (3) (a) Any emergency medical services provider, police officer, or firefighter who
- 7 accepts physical custody of a newborn infant, or who physically retrieves a
- 8 newborn infant from a newborn safety device that meets the requirements of
- 9 subsection (1) of this section, in accordance with this section shall
- 10 immediately arrange for the infant to be taken to the nearest hospital
- 11 emergency room and shall have implied consent to any and all appropriate
- 12 medical treatment.
- 13 (b) Any staff member at a participating place of worship who accepts physical
- 14 custody of a newborn infant in accordance with this section shall immediately
- 15 contact the 911 emergency telephone service as set forth in KRS 65.750 to
- 16 65.760, wireless enhanced 911 system as set forth in KRS 65.7621 to
- 17 65.7643, or emergency medical services as set forth in KRS Chapter 311A for
- 18 transportation to the nearest hospital emergency room.
- 19 (4) By placing a newborn infant in the manner described in this section, the parent:
- 20 (a) Waives the right to notification required by subsequent court proceedings
- 21 conducted under KRS Chapter 620 until such time as a claim of parental
- 22 rights is made; and
- 23 (b) Waives legal standing to make a claim of action against any person who
- 24 accepts physical custody of the newborn infant.
- 25 (5) A staffed police station, fire station, hospital, emergency medical facility, or
- 26 participating place of worship may post a sign easily seen by the public stating that:
- 27 "This facility is a safe and legal place to surrender a newborn infant who is less than

1 30 days old. A parent who places a newborn infant at this facility and expresses no
 2 intent to return for the infant shall have the right to remain anonymous and not be
 3 pursued and shall not be considered to have abandoned or endangered their
 4 newborn infant under KRS Chapters 508 and 530."

5 (6) Actions taken by an emergency medical services provider, police officer,
 6 firefighter, or staff member at a participating place of worship in conformity with
 7 the duty granted in this section shall be immune from criminal or civil liability.
 8 Nothing in this subsection shall limit liability for negligence.

9 (7) The provisions of subsection (2) of this section shall not apply when indicators of
 10 child physical abuse or child neglect are present.

11 (8) KRS 211.951, 216B.190, 405.075, 620.350, and 620.355 shall be known as "The
 12 Representative Thomas J. Burch Safe Infants Act."

13 ➔Section 16. KRS 156.095 is amended to read as follows:

14 (1) The Kentucky Department of Education shall establish, direct, and maintain a
 15 statewide program of professional development to improve instruction in the public
 16 schools.

17 (2) Each local school district superintendent shall appoint a certified school employee
 18 to fulfill the role and responsibilities of a professional development coordinator
 19 who shall disseminate professional development information to schools and
 20 personnel. Upon request by a school council or any employees of the district, the
 21 coordinator shall provide technical assistance to the council or the personnel that
 22 may include assisting with needs assessments, analyzing school data, planning and
 23 evaluation assistance, organizing districtwide programs requested by school
 24 councils or groups of teachers, or other coordination activities.

25 (a) The manner of appointment, qualifications, and other duties of the
 26 professional development coordinator shall be established by Kentucky Board
 27 of Education through promulgation of administrative regulations.

1 (b) The local district professional development coordinator shall participate in the
2 Kentucky Department of Education annual training program for local school
3 district professional development coordinators. The training program may
4 include, but not be limited to, the demonstration of various approaches to
5 needs assessment and planning; strategies for implementing long-term,
6 school-based professional development; strategies for strengthening teachers'
7 roles in the planning, development, and evaluation of professional
8 development; and demonstrations of model professional development
9 programs. The training shall include information about teacher learning
10 opportunities relating to the core content standards. The Kentucky Department
11 of Education shall regularly collect and distribute this information.

12 (3) The Kentucky Department of Education shall provide or facilitate optional,
13 professional development programs for certified personnel throughout the
14 Commonwealth that are based on the statewide needs of teachers, administrators,
15 and other education personnel. Programs may include classified staff and parents
16 when appropriate. Programs offered or facilitated by the department shall be at
17 locations and times convenient to local school personnel and shall be made
18 accessible through the use of technology when appropriate. They shall include
19 programs that: address the goals for Kentucky schools as stated in KRS 158.6451,
20 including reducing the achievement gaps as determined by an equity analysis of the
21 disaggregated student performance data from the state assessment program
22 developed under KRS 158.6453; engage educators in effective learning processes
23 and foster collegiality and collaboration; and provide support for staff to
24 incorporate newly acquired skills into their work through practicing the skills,
25 gathering information about the results, and reflecting on their efforts. Professional
26 development programs shall be made available to teachers based on their needs
27 which shall include but not be limited to the following areas:

- 1 (a) Strategies to reduce the achievement gaps among various groups of students
2 and to provide continuous progress;
- 3 (b) Curriculum content and methods of instruction for each content area,
4 including differentiated instruction;
- 5 (c) School-based decision making;
- 6 (d) Assessment literacy;
- 7 (e) Integration of performance-based student assessment into daily classroom
8 instruction;
- 9 (f) Nongraded primary programs;
- 10 (g) Research-based instructional practices;
- 11 (h) Instructional uses of technology;
- 12 (i) Curriculum design to serve the needs of students with diverse learning styles
13 and skills and of students of diverse cultures;
- 14 (j) Instruction in reading, including phonics, phonemic awareness,
15 comprehension, fluency, and vocabulary;
- 16 (k) Educational leadership; and
- 17 (l) Strategies to incorporate character education throughout the curriculum.
- 18 (4) The department shall assist school personnel in assessing the impact of professional
19 development on their instructional practices and student learning.
- 20 (5) The department shall assist districts and school councils with the development of
21 long-term school and district improvement plans that include multiple strategies for
22 professional development based on the assessment of needs at the school level.
- 23 (a) Professional development strategies may include but are not limited to
24 participation in subject matter academies, teacher networks, training institutes,
25 workshops, seminars, and study groups; collegial planning; action research;
26 mentoring programs; appropriate university courses; and other forms of
27 professional development.

- 1 (b) In planning the use of the four (4) days for professional development under
2 KRS 158.070, school councils and districts shall give priority to programs that
3 increase teachers' understanding of curriculum content and methods of
4 instruction appropriate for each content area based on individual school plans.
5 The district may use up to one (1) day to provide district-wide training and
6 training that is mandated by state or federal law. Only those employees
7 identified in the mandate or affected by the mandate shall be required to
8 attend the training.
- 9 (c) State funds allocated for professional development shall be used to support
10 professional development initiatives that are consistent with local school
11 improvement and professional development plans and teachers' individual
12 growth plans. The funds may be used throughout the year for all staff,
13 including classified and certified staff and parents on school councils or
14 committees. A portion of the funds allocated to each school council under
15 KRS 160.345 may be used to prepare or enhance the teachers' knowledge and
16 teaching practices related to the content and subject matter that are required
17 for their specific classroom assignments.
- 18 (6) (a) ~~By August 1, 2010,~~ the Kentucky Cabinet for Health and Family Services
19 shall post on its web page suicide prevention awareness information, to
20 include recognizing the warning signs of a suicide crisis. The web page shall
21 include information related to suicide prevention training opportunities
22 offered by the cabinet or an agency recognized by the cabinet as a training
23 provider.
- 24 (b) By September 15 of each year, every public school shall provide suicide
25 prevention awareness information in person, by live streaming, or via a video
26 recording to all students in grades six (6) through twelve (12). The
27 information may be obtained from the Cabinet for Health and Family Services

1 or from a commercially developed suicide prevention training program.

2 (c) 1. Beginning with the 2018-2019 school year, and every year thereafter, a
3 minimum of one (1) hour of high-quality suicide prevention training,
4 including the recognition of signs and symptoms of possible mental
5 illness, shall be required for all school district employees with job duties
6 requiring direct contact with students in grades six (6) through twelve
7 (12). The training shall be provided either in person, by live streaming,
8 or via a video recording and may be included in the four (4) days of
9 professional development under KRS 158.070.

10 2. When a staff member subject to the training under subparagraph 1. of
11 this paragraph is initially hired during a school year in which the
12 training is not required, the local district shall provide suicide prevention
13 materials to the staff member for review.

14 (d) The requirements of paragraphs (b) and (c) of this subsection shall apply to
15 public charter schools as a health and safety requirement under KRS
16 160.1592(1).

17 (7) (a) By November 1, 2019, and November 1 of each year thereafter, a minimum of
18 one (1) hour of training on how to respond to an active shooter situation shall
19 be required for all school district employees with job duties requiring direct
20 contact with students. The training shall be provided either in person, by live
21 streaming, or via a video recording prepared by the Kentucky Department of
22 Criminal Justice Training in collaboration with the Kentucky Law
23 Enforcement Council, the Kentucky Department of Education, and the Center
24 for School Safety and may be included in the four (4) days of professional
25 development under KRS 158.070.

26 (b) When a staff member subject to the training requirements of this subsection is
27 initially hired after the training has been provided for the school year, the

1 local district shall provide materials on how to respond to an active shooter
2 situation.

3 (c) The requirements of this subsection shall also apply to public charter schools
4 as a health and safety requirement under KRS 160.1592(1).

5 (8) (a) The Kentucky Department of Education shall develop and maintain a list of
6 approved comprehensive evidence-informed trainings on child abuse and
7 neglect prevention, recognition, and reporting that encompass child physical,
8 sexual, and emotional abuse and neglect.

9 (b) The trainings shall be web-based or in-person and cover, at a minimum, the
10 following topics:

- 11 1. Recognizing child physical, sexual, and emotional abuse and neglect;
- 12 2. Reporting suspected child abuse and neglect in Kentucky as required by
13 KRS 620.030 and the appropriate documentation;
- 14 3. Responding to the child; and
- 15 4. Understanding the response of child protective services.

16 (c) The trainings shall include a questionnaire or other basic assessment tool upon
17 completion to document basic knowledge of training components.

18 (d) Each local board of education shall adopt one (1) or more trainings from the
19 list approved by the Department of Education to be implemented by schools.

20 (e) All current school administrators, certified personnel, office staff,
21 instructional assistants, and coaches and extracurricular sponsors who are
22 employed by the school district shall complete the implemented training or
23 trainings by January 31, 2017, and then every two (2) years after.

24 (f) All school administrators, certified personnel, office staff, instructional
25 assistants, and coaches and extracurricular sponsors who are employed by the
26 school district hired after January 31, 2017, shall complete the implemented
27 training or trainings within ninety (90) days of being hired and then every two

1 (2) years after.

2 (g) Every public school shall prominently display the statewide child abuse
 3 hotline number administered by the Cabinet for Health and Family Services,
 4 ~~and~~ the National Human Trafficking Reporting Hotline number
 5 administered by the United States Department for Health and Human
 6 Services, and the Safe Haven Baby Boxes Crisis Line number administered
 7 by the Safe Haven Baby Boxes national organization or any equivalent
 8 successor entity.

9 (9) The Department of Education shall establish an electronic consumer bulletin board
 10 that posts information regarding professional development providers and programs
 11 as a service to school district central office personnel, school councils, teachers, and
 12 administrators. Participation on the electronic consumer bulletin board shall be
 13 voluntary for professional development providers or vendors, but shall include all
 14 programs sponsored by the department. Participants shall provide the following
 15 information: program title; name of provider or vendor; qualifications of the
 16 presenters or instructors; objectives of the program; program length; services
 17 provided, including follow-up support; costs for participation and costs of
 18 materials; names of previous users of the program, addresses, and telephone
 19 numbers; and arrangements required. Posting information on the bulletin board by
 20 the department shall not be viewed as an endorsement of the quality of any specific
 21 provider or program.

22 (10) The Department of Education shall provide training to address the characteristics
 23 and instructional needs of students at risk of school failure and most likely to drop
 24 out of school. The training shall be developed to meet the specific needs of all
 25 certified and classified personnel depending on their relationship with these
 26 students. The training for instructional personnel shall be designed to provide and
 27 enhance skills of personnel to:

- 1 (a) Identify at-risk students early in elementary schools as well as at-risk and
2 potential dropouts in the middle and high schools;
- 3 (b) Plan specific instructional strategies to teach at-risk students;
- 4 (c) Improve the academic achievement of students at risk of school failure by
5 providing individualized and extra instructional support to increase
6 expectations for targeted students;
- 7 (d) Involve parents as partners in ways to help their children and to improve their
8 children's academic progress; and
- 9 (e) Significantly reduce the dropout rate of all students.
- 10 (11) The department shall establish teacher academies to the extent funding is available
11 in cooperation with postsecondary education institutions for elementary, middle
12 school, and high school faculty in core disciplines, utilizing facilities and faculty
13 from universities and colleges, local school districts, and other appropriate agencies
14 throughout the state. Priority for participation shall be given to those teachers who
15 are teaching core discipline courses for which they do not have a major or minor or
16 the equivalent. Participation of teachers shall be voluntary.
- 17 (12) The department shall annually provide to the oversight council established in KRS
18 15A.063, the information received from local schools pursuant to KRS 158.449.
- 19 ➔Section 17. Section 13 of this Act may be cited as the Love Them Both Part II
20 Act.
- 21 ➔Section 18. If the state would, or would likely, be required to make payments to
22 defray the cost of any requirement under Section 4, 5, or 14 of this Act, as provided under
23 42 U.S.C. sec. 18031(d)(3) and 45 C.F.R. sec. 155.170, as amended, then the Department
24 of Insurance shall, within 90 days of the effective date of this section, apply for a waiver
25 under 42 U.S.C. sec. 18052, as amended, or any other applicable federal law of all or any
26 of the cost defrayal requirements.
- 27 ➔Section 19. If the Cabinet for Health and Family Services determines that a

1 waiver or other authorization from a federal agency is necessary to implement Section 8,
2 9, 10, 11, or 12 of this Act for any reason, including the loss of federal funds, the cabinet
3 shall, within 90 days of the effective date of this section, request the waiver or
4 authorization, and may only delay implementation of those provisions for which a waiver
5 or authorization was deemed necessary until the waiver or authorization is granted.

6 ➔Section 20. The Cabinet for Health and Family Services shall study existing
7 doula certification programs in the United States and currently operating doula services in
8 the Commonwealth of Kentucky. The study shall review the training and quality
9 requirements of doula certifications and consider potential recommendations regarding
10 doula services for populations most at risk for poor perinatal outcomes. The Cabinet for
11 Health and Family Services may receive input from parties concerned with this study. By
12 December 1, 2024, the Cabinet for Health and Family Services shall provide a report on
13 the study to the Legislative Research Commission for referral to the Interim Joint
14 Committee on Health Services. As used in this section, "doula services" means services
15 provided by a trained nonmedical professional to support women and families throughout
16 labor and birth, and intermittently during the prenatal and postpartum periods.

17 ➔Section 21. Sections 4 to 8, and 14 of this Act apply to plans issued or renewed
18 on or after January 1, 2025.

19 ➔Section 22. Sections 4 to 8, 14, and 21 of this Act take effect January 1, 2025.