INTERIM JOINT COMMITTEE ON LICENSING, OCCUPATIONS, AND ADMINISTRATIVE REGULATIONS

Minutes of the 5th Meeting of the 2025 Interim

October 23, 2025

Call to Order and Roll Call

The fifth meeting of the Interim Joint Committee on Licensing, Occupations, and Administrative Regulations was held on October 23, 2025, at 11:00 AM in Room 154 of the Capitol Annex. Senator Julie Raque Adams, Chair, called the meeting to order, and the secretary called the roll.

Present were:

Members: Senator Julie Raque Adams, Co-Chair; Senators Cassie Chambers Armstrong, Karen Berg, Donald Douglas, Jimmy Higdon, Jason Howell, Amanda Mays Bledsoe, Christian McDaniel, Stephen Meredith, Michael J. Nemes, and Matt Nunn; and Representatives Chad Aull, Kim Banta, Emily Callaway, Mike Clines, Stephanie Dietz, Anne Gay Donworth, Daniel Fister, Patrick Flannery, Al Gentry, Samara Heavrin, Thomas Huff, Kevin Jackson, Nima Kulkarni, Michael Meredith, Amy Neighbors, Rebecca Raymer, Tom Smith, and Nick Wilson.

Guests: Representative Vanessa Grossl; Whitney Duddey, MHA, RD, LD, FAND, Consumer Protection Coordinator, Kentucky Academy of Nutrition and Dietetics (KAND); Kaitlyn Bison, Policy Analyst, Council of State Governments (CSG), National Center for Interstate Compacts (NCIC); Chris R. Millett, MM, MT-BC, Assistant Professor of Music Therapy, School of Music, University of Louisville (UofL); Laura Elliott Buckner, MM, MT-BC, Music Therapist; Kimberly Sena Moore, PhD, MT-BC, Regulatory Affairs Associate, Certification Board for Music Therapists (CBMT); Adam Meier, Director of Healthcare Policy, The Cicero Institute; and Rupinder Kaur, Executive Director for Physician and Advanced Provider Recruitment, Baptist Health.

LRC Staff: Bryce Amburgey, Wendy Craig, CaraBell Preece, and Lisa W. Moore.

Approval of the September 25, 2025, Meeting Minutes

A motion was made by Senator Douglas and seconded by Representative Fister to approve the minutes of the September 25, 2025, meeting. Minutes were approved by voice vote without objection.

Dietitian Licensure Compact

Representative Grossl; Whitney Duddey, MHA, RD, LD, FAND, Consumer Protection

Coordinator, KAND; and Kaitlyn Bison, Policy Analyst, CSG, NCIC, discussed the dietitian licensure compact. Representative Grossl said she intends to file the compact as a new bill in the 2026 Regular Session. A fiscal note has been completed and it is revenue neutral. Licensing fees will cover the administrative expenses. She noted the Department for Defense and Steven P. Bullard, Brigadier General (Retired) and Executive Director, Kentucky Commission on Military Affairs, support the enactment of the compact. The compact would provide licensees with opportunities for multistate practice, increase mobility for individuals who are relocating, improve public safety, and promote workforce development. It will also provide career sustainability and financial stability for Kentucky's military service members and their spouses. She encouraged committee members to become co-sponsors.

Ms. Duddey said the compact will facilitate mobility for licensees and expand employment opportunities into new markets. It eases the burden of multiple licenses, while improving the continuity of care. Fifteen states have enacted the compact.

Ms. Bison said CSG has facilitated the development of 21 active occupational license compacts, including 10 in Kentucky. The Kentucky Board of Dietitians and Nutritionists will have jurisdiction over any individual practicing under the compact in Kentucky.

Responding to Representative Gentry, Ms. Bison said Ohio and Tennessee are the only states bordering Kentucky with active dietitian licensure compacts. She expects more states to add the compacts soon.

Responding to Representative Smith, Ms. Bison said she has not seen individuals offering cheaper services online in connection with other occupational compacts. The compacts provide a larger pool of practitioners and greater access to patients through telehealth services. Representative Grossl said dietitians in Louisville cannot serve patients from Indiana, but could if Indiana joins the compact.

Music Therapy

Chris R. Millett, MM, MT-BC, Assistant Professor of Music Therapy, School of Music, UofL; Laura Elliott Buckner, MM, MT-BC, Music Therapist; and Kimberly Sena Moore, PhD, MT-BC, Regulatory Affairs Associate, CBMT, provided an overview of music therapy in the Commonwealth. Mr. Millett discussed 2025 RS SB 42, which would have created a music therapy license in the state. Music therapy is a form of treatment that uses music to improve physical, emotional, and cognitive well-being. Music therapy can treat patients with autism spectrum disorder, Alzheimer's disease, stroke, brain injury, and substance abuse. It can be used to promote social interaction, improve self-esteem, and enhance overall quality of life.

Mr. Millett said the proposed legislation based on SB 42 creates a licensing board that will

be self-sustaining through modest application renewal fees. Music therapists are not currently licensed in Kentucky, and unqualified therapists can cause more harm than good. The bill helps to protect Kentuckians and provide them with more treatment options.

Chair Adams said music connects people in a variety of ways.

Responding to Senator Higdon, Ms. Sena Moore said music therapy licensure can facilitate billing insurance and Medicaid for services.

Responding to Representative Donworth, Ms. Sena Moore said she does not know if patients are eligible to use Health Savings Account (HSA) funds. Mr. Millett said some UofL students have used HSA funds for music therapy services through Seven Counties Services. Representative Donworth noted how music therapy helps to treat autistic, Alzheimer's, and dementia patients.

Expanding Physician Access Act

Adam Meier, Director of Healthcare Policy, The Cicero Institute, and Rupinder Kaur, Executive Director for Physician and Advanced Provider Recruitment, Baptist Health, discussed the Expanding Physician Access Act. Mr. Meier said Kentucky faces a severe physician shortage, especially in rural areas. Kentucky is projected to be short 2,926 doctors by 2030. Kentucky's physician-to-patient ratio is 23 percent worse than the national average, and nearly 32.3 percent of Kentucky physicians are within retirement range. One solution is to open pathways for experienced doctors licensed abroad to practice in the United States without repeating a multi-year post-med school residency program, while ensuring internationally-licensed doctors meet or exceed United States standards. The act would allow hospitals, physician practices, and other healthcare providers to sponsor and mentor international doctors as they transition to United States practice, and it would automatically convert provisional licenses for sponsored, internationally-licensed doctors to full licenses after three years of successful practice.

Ms. Kaur said rural communities are losing doctors at an alarming rate, leaving some without immediate healthcare access. Pregnant women are especially affected by this crisis, as maternal mortality rates continue to increase. Other states, such as Tennessee, are passing similar legislation as patients face long and growing wait times to see doctors, particularly specialists such as neurologists and oncologists.

Responding to Chair Adams, it was reported that the legislation did not pass the House of Representatives in the 2025 RS.

Responding to Representative Aull, Mr. Meier directed members to a map provided by the Cicero Institute that shows how many states have a permanent pathway or pending bills for

international physician licensing reform. He said the doctors would have to meet the same testing and licensing requirements as United States doctors.

Responding to Senator Berg, Mr. Meier said the doctors can change jobs as long as they remain with a Kentucky employer. Ms. Kaur said Baptist Health is struggling to find partners to replace rural physicians. Senator Berg stressed the importance of patient safety through oversight of international doctors. She said they receive different training and education.

Responding to Senator Nunn, Ms. Kaur said international doctors meeting the requirements will not be required to complete a United States residency. She will research and report the statistics on success rates of United States residency-trained doctors versus internationally trained doctors.

Responding to Senator Douglas, Mr. Meier said internationally-trained doctors tend to be hired in rural areas. Ms. Kaur said Baptist Health requires internationally-trained doctors to stay five years in a rural shortage area. After five years, individuals have usually made a life and integrated into the community.

Chair Adams said accreditation is evolving within the medical field.

Representative Donworth said she shares concerns with Senator Douglas and Senator Berg, but Kentuckians need more access to healthcare. The bill's details will be crucial.

Kentucky Real Estate Commission and the Board of Alcohol and Drug Counselors Updates

Representative Flannery provided the committee updates on the Real Estate Commission and the Board of Alcohol and Drug Counselors.

Adjournment

With no further business before the committee, the meeting adjourned at 12:00 PM.