

210.040 Powers and duties of cabinet. (Effective July 15, 2026)

The Cabinet for Health and Family Services shall:

- (1) Exercise all functions of the state in relation to the administration and operation of the state facilities for the care and treatment of persons with mental illness;
- (2) Establish or acquire, in accordance with the provisions of KRS 56.440 to 56.550, other or additional facilities for psychiatric care and treatment of persons who are or may become state charges;
- (3) Cooperate with other state agencies for the development of a statewide mental health program looking toward the prevention of mental illness and the aftercare of persons released from public or private mental hospitals;
- (4) Provide for the custody, maintenance, care, and medical and psychiatric treatment of the patients of the facilities operated by the cabinet, including emergency and other medical care required to be provided outside of the facility while the patient is admitted to the facility. Expenses of the outside medical provider, other than elective procedures or elective surgery, shall be paid by the cabinet and included in the determination of the patient liability when not covered by the patient's third-party payor;
- (5) Provide psychiatric consultation for the state penal and correctional institutions, and for the state facilities operated for children or for persons with an intellectual disability;
- (6) Administer and supervise programs for the care of persons with mental illness outside of state facilities;
- (7) Administer and supervise programs for the care of persons with chronic mental illness, including but not limited to provision of the following:
 - (a) Identification of persons with chronic mental illness residing in the area to be served;
 - (b) Assistance to persons with chronic mental illness in gaining access to essential mental health services, medical and rehabilitation services, employment, housing, and other support services designed to enable persons with chronic mental illness to function outside inpatient facilities to the maximum extent of their capabilities;
 - (c) Establishment of community-based transitional living facilities with twenty-four (24) hour supervision and community-based cooperative facilities with part-time supervision; provided that, no more than either one (1) transitional facility or one (1) cooperative facility may be established in a county containing a city of the first class or consolidated local government with any funds available to the cabinet;
 - (d) Assurance of the availability of a case manager for each person with chronic mental illness to determine what services are needed and to be responsible for their provision; and
 - (e) Coordination of the provision of mental health and related support services with the provision of other support services to persons with chronic mental illness;

- (8) Require all providers who receive public funds through state contracts, state grants, or reimbursement for services provided to have formalized quality assurance and quality improvement processes, including but not limited to a grievance procedure; and
- (9) Supervise private mental hospitals receiving patients committed by order of a court.

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History: Amended 2026 Ky. Acts ch. 122, sec. 4, effective July 15, 2026. -- Amended 2010 Ky. Acts ch. 141, sec. 14, effective July 15, 2010. -- Amended 2005 Ky. Acts ch. 99, sec. 301, effective June 20, 2005. -- Amended 2003 Ky. Acts ch. 5, sec. 5, effective June 24, 2003. -- Amended 2002 Ky. Acts ch. 346, sec. 200, effective July 15, 2002. -- Amended 1998 Ky. Acts ch. 426, sec. 246, effective July 15, 1998. -- Amended 1982 Ky. Acts ch. 210, sec. 2, effective July 15, 1982. -- Amended 1974 Ky. Acts ch. 74, Art. VI, sec. 55. -- Amended 1960 Ky. Acts ch. 64, sec. 2. -- Created 1952 Ky. Acts ch. 50, sec. 4.