

CHAPTER 158**(HB 294)**

AN ACT relating to the Cabinet for Health and Family Services.

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

→Section 1. KRS 12.020 is amended to read as follows:

Departments, program cabinets and their departments, and the respective major administrative bodies that they include are enumerated in this section. It is not intended that this enumeration of administrative bodies be all-inclusive. Every authority, board, bureau, interstate compact, commission, committee, conference, council, office, or any other form of organization shall be included in or attached to the department or program cabinet in which they are included or to which they are attached by statute or statutorily authorized executive order; except in the case of the Personnel Board and where the attached department or administrative body is headed by a constitutionally elected officer, the attachment shall be solely for the purpose of dissemination of information and coordination of activities and shall not include any authority over the functions, personnel, funds, equipment, facilities, or records of the department or administrative body.

I. Cabinet for General Government - Departments headed by elected officers:

1. The Governor.
2. Lieutenant Governor.
3. Department of State.
 - (a) Secretary of State.
 - (b) Board of Elections.
 - (c) Registry of Election Finance.
4. Department of Law.
 - (a) Attorney General.
5. Department of the Treasury.
 - (a) Treasurer.
6. Department of Agriculture.
 - (a) Commissioner of Agriculture.
 - (b) Kentucky Council on Agriculture.
7. Auditor of Public Accounts.

II. Program cabinets headed by appointed officers:

1. Justice and Public Safety Cabinet:
 - (a) Department of Kentucky State Police.
 - (b) Department of Criminal Justice Training.
 - (c) Department of Corrections.
 - (d) Department of Juvenile Justice.
 - (e) Office of the Secretary.
 - (f) Office of Drug Control Policy.
 - (g) Office of Legal Services.
 - (h) Office of the Kentucky State Medical Examiner.
 - (i) Parole Board.
 - (j) Kentucky State Corrections Commission.

- (k) Office of Legislative and Intergovernmental Services.
 - (l) Office of Management and Administrative Services.
 - (m) Office of Investigations.
 - (n) Department for Public Advocacy.
2. Education and Workforce Development Cabinet:
- (a) Office of the Secretary.
 - (b) Office of Legal and Legislative Services.
 - 1. Client Assistance Program.
 - (c) Office of Communication.
 - (d) Office of Budget and Administration.
 - 1. Division of Human Resources.
 - 2. Division of Administrative Services.
 - 3. Division of Technology Services.
 - (e) Office of Educational Programs.
 - (f) Board of Directors for the Center for School Safety.
 - (g) Council on Postsecondary Education.
 - 1. Foundation for Adult Education.
 - (h) Department of Education.
 - 1. Kentucky Board of Education.
 - (i) Department for Libraries and Archives.
 - (j) Department of Workforce Investment.
 - 1. Office for the Blind.
 - 2. Office of Vocational Rehabilitation.
 - 3. Office of Career and Technical Education.
 - 4. Office of Employment and Training.
 - (k) Foundation for Workforce Development.
 - (l) Kentucky Office for the Blind State Rehabilitation Council.
 - (m) Kentucky Technical Education Personnel Board.
 - (n) Kentucky Workforce Investment Board.
 - (o) Statewide Council for Vocational Rehabilitation.
 - (p) Statewide Independent Living Council.
 - (q) Unemployment Insurance Commission.
 - (r) Education Professional Standards Board.
 - 1. Division of Educator Preparation.
 - 2. Division of Certification.
 - 3. Division of Professional Learning and Assessment.
 - 4. Division of Legal Services.
 - (s) Kentucky Commission on the Deaf and Hard of Hearing.
 - (t) Kentucky Educational Television.

- (u) Kentucky Environmental Education Council.
- 3. Energy and Environment Cabinet:
 - (a) Office of the Secretary.
 - 1. Office of Legislative and Intergovernmental Affairs.
 - 2. Office of General Counsel.
 - a. Environmental Protection Legal Division.
 - 3. Office of Administrative Hearings.
 - 4. Mine Safety Review Commission.
 - 5. Kentucky State Nature Preserves Commission.
 - 6. Kentucky Environmental Quality Commission.
 - 7. Kentucky Public Service Commission.
 - (b) Department for Environmental Protection.
 - 1. Office of the Commissioner.
 - 2. Division for Air Quality.
 - 3. Division of Water.
 - 4. Division of Environmental Program Support.
 - 5. Division of Waste Management.
 - 6. Division of Enforcement.
 - 7. Division of Compliance Assistance.
 - (c) Department for Natural Resources.
 - 1. Office of the Commissioner.
 - 2. Division of Technical and Administrative Support.
 - 3. Division of Mine Permits.
 - 4. Division of Mine Reclamation and Enforcement.
 - 5. Division of Abandoned Mine Lands.
 - 6. Division of Oil and Gas.
 - 7. Office of Mine Safety and Licensing.
 - 8. Division of Forestry.
 - 9. Division of Conservation.
 - (d) Department for Energy Development and Independence.
 - 1. Division of Efficiency and Conservation.
 - 2. Division of Renewable Energy.
 - 3. Division of Biofuels.
 - 4. Division of Energy Generation Transmission and Distribution.
 - 5. Division of Carbon Management.
 - 6. Division of Fossil Energy Development.
- 4. Public Protection Cabinet.
 - (a) Office of the Secretary.
 - 1. Office of Communications and Public Outreach.

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2. Office of Legal Services.
 - a. Insurance Legal Division.
 - b. Charitable Gaming Legal Division.
 - c. Alcoholic Beverage Control Legal Division.
 - d. Housing, Buildings and Construction Legal Division.
 - e. Financial Institutions Legal Division.
- (b) Crime Victims Compensation Board.
- (c) Board of Claims.
- (d) Kentucky Board of Tax Appeals.
- (e) Kentucky Boxing and Wrestling Authority.
- (f) Kentucky Horse Racing Commission.
 1. Division of Licensing.
 2. Division of Incentives and Development.
 3. Division of Veterinary Services.
 4. Division of Security and Enforcement.
- (g) Department of Alcoholic Beverage Control.
 1. Division of Distilled Spirits.
 2. Division of Malt Beverages.
 3. Division of Enforcement.
- (h) Department of Charitable Gaming.
 1. Division of Licensing and Compliance.
 2. Division of Enforcement.
- (i) Department of Financial Institutions.
 1. Division of Depository Institutions.
 2. Division of Non-Depository Institutions.
 3. Division of Securities.
- (j) Department of Housing, Buildings and Construction.
 1. Division of Fire Prevention.
 2. Division of Plumbing.
 3. Division of Heating, Ventilation, and Air Conditioning.
 4. Division of Building Code Enforcement.
- (k) Department of Insurance.
 1. Property and Casualty Division.
 2. Health and Life Division.
 3. Division of Financial Standards and Examination.
 4. Division of Agent Licensing.
 5. Division of Insurance Fraud Investigation.
 6. Consumer Protection Division.
 7. Division of Kentucky Access.

- (l) Office of Occupations and Professions.
- 5. Labor Cabinet.
 - (a) Office of the Secretary.
 - 1. Division of Management Services.
 - 2. Office of General Counsel.
 - (b) Office of General Administration and Program Support for Shared Services.
 - 1. Division of Human Resource Management.
 - 2. Division of Fiscal Management.
 - 3. Division of Budgets.
 - 4. Division of Information Services.
 - (c) Office of Inspector General for Shared Services.
 - (d) Department of Workplace Standards.
 - 1. Division of Employment Standards, Apprenticeship, and Mediation.
 - 2. Division of Occupational Safety and Health Compliance.
 - 3. Division of Occupational Safety and Health Education and Training.
 - 4. Division of Workers' Compensation Funds.
 - (e) Department of Workers' Claims.
 - 1. Office of General Counsel for Workers' Claims.
 - 2. Office of Administrative Law Judges.
 - 3. Division of Claims Processing.
 - 4. Division of Security and Compliance.
 - 5. Division of Information and Research.
 - 6. Division of Ombudsman and Workers' Compensation Specialist Services.
 - 7. Workers' Compensation Board.
 - 8. Workers' Compensation Advisory Council.
 - 9. Workers' Compensation Nominating Commission.
 - (f) Workers' Compensation Funding Commission.
 - (g) Kentucky Labor-Management Advisory Council.
 - (h) Occupational Safety and Health Standards Board.
 - (i) Prevailing Wage Review Board.
 - (j) Apprenticeship and Training Council.
 - (k) State Labor Relations Board.
 - (l) Employers' Mutual Insurance Authority.
 - (m) Kentucky Occupational Safety and Health Review Commission.
- 6. Transportation Cabinet:
 - (a) Department of Highways.
 - 1. Office of Project Development.
 - 2. Office of Project Delivery and Preservation.
 - 3. Office of Highway Safety.

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4. Highway District Offices One through Twelve.
 - (b) Department of Vehicle Regulation.
 - (c) Department of Aviation.
 - (d) Department of Rural and Municipal Aid.
 1. Office of Local Programs.
 2. Office of Rural and Secondary Roads.
 - (e) Office of the Secretary.
 1. Office of Public Affairs.
 2. Office for Civil Rights and Small Business Development.
 3. Office of Budget and Fiscal Management.
 4. Office of Inspector General.
 - (f) Office of Support Services.
 - (g) Office of Transportation Delivery.
 - (h) Office of Audits.
 - (i) Office of Human Resource Management.
 - (j) Office of Information Technology.
 - (k) Office of Legal Services.
7. Cabinet for Economic Development:
- (a) Office of Administration and Support.
 - (b) Department for New Business Development.
 - (c) Department of Financial Incentives.
 - (d) Department for Existing Business Development.
 - (e) Tobacco Research Board.
 - (f) Kentucky Economic Development Finance Authority.
 - (g) Office of Research and Information Technology.
 - (h) Department of Commercialization and Innovation.
 - (i) Office of Legal Services.
 - (j) Commission on Small Business Advocacy.
8. Cabinet for Health and Family Services:
- (a) *Office of the Secretary*~~{Department for Public Health}~~.
 - (b) *Office of Health Policy*~~{Department for Medicaid Services}~~.
 - (c) *Office of Legal*~~{Department for Mental Health and Mental Retardation}~~ Services.
 - (d) *Office of Inspector General*~~{Kentucky Commission for Children with Special Health Care Needs}~~.
 - (e) Office of *Communications and Administrative Review*~~{Health Policy}~~.
 - (f) Office of the *Ombudsman*~~{Secretary}~~.
 - (g) Office of *Policy and Budget*~~{Legal Services}~~.
 - (h) Office of *Human Resource Management*~~{Inspector General}~~.
 - (i) Office of *Administrative and Technology Services*~~{Legislative and Public Affairs}~~.

- (j) Department for **Public Health**~~{Community Based Services}~~.
 - (k) Department for **Medicaid Services**~~{Disability Determination Services}~~.
 - (l) **Department for Behavioral Health, Developmental and Intellectual Disabilities**~~{Office of the Ombudsman}~~.
 - (m) Department for **Aging and Independent Living**~~{Human Support Services}~~.
 - (n) **Department for Community Based Services**~~{Kentucky Commission on Community Volunteerism and Service}~~.
 - (o) **Department for Income Support**~~{Office of Fiscal Services}~~.
 - (p) **Department for Family Resource Centers and Volunteer Services**~~{Office of Human Resource Management}~~.
 - (q) **Kentucky Commission on Community Volunteerism and Service**~~{Office of Technology}~~.
 - (r) **Kentucky Commission for Children with Special Health Care Needs**~~{Office of Contract Oversight}~~.
 - (s) Governor's Office of **Electronic Health Information**~~{Wellness and Physical Activity}~~.
 - ~~{(t) Department for Aging and Independent Living}~~
9. Finance and Administration Cabinet:
- (a) Office of General Counsel.
 - (b) Office of the Controller.
 - (c) Office of Administrative Services.
 - (d) Office of Public Information.
 - (e) Office of Policy and Audit.
 - (f) Department for Facilities and Support Services.
 - (g) Department of Revenue.
 - (h) Commonwealth Office of Technology.
 - (i) State Property and Buildings Commission.
 - (j) Office of Equal Employment Opportunity and Contract Compliance.
 - (k) Kentucky Employees Retirement Systems.
 - (l) Commonwealth Credit Union.
 - (m) State Investment Commission.
 - (n) Kentucky Housing Corporation.
 - (o) Kentucky Local Correctional Facilities Construction Authority.
 - (p) Kentucky Turnpike Authority.
 - (q) Historic Properties Advisory Commission.
 - (r) Kentucky Tobacco Settlement Trust Corporation.
 - (s) Kentucky Higher Education Assistance Authority.
 - (t) Kentucky River Authority.
 - (u) Kentucky Teachers' Retirement System Board of Trustees.
 - (v) Executive Branch Ethics Commission.
10. Tourism, Arts and Heritage Cabinet:
- (a) Kentucky Department of Travel and Tourism.

- (1) Division of Tourism Services.
 - (2) Division of Marketing and Administration.
 - (3) Division of Communications and Promotions.
- (b) Kentucky Department of Parks.
- (1) Division of Information Technology.
 - (2) Division of Human Resources.
 - (3) Division of Financial Operations.
 - (4) Division of Facilities Management.
 - (5) Division of Facilities Maintenance.
 - (6) Division of Customer Services.
 - (7) Division of Recreation.
 - (8) Division of Golf Courses.
 - (9) Division of Food Services.
 - (10) Division of Rangers.
 - (11) Division of Resort Parks.
 - (12) Division of Recreational Parks and Historic Sites.
- (c) Department of Fish and Wildlife Resources.
- (1) Division of Law Enforcement.
 - (2) Division of Administrative Services.
 - (3) Division of Engineering.
 - (4) Division of Fisheries.
 - (5) Division of Information and Education.
 - (6) Division of Wildlife.
 - (7) Division of Public Affairs.
- (d) Kentucky Horse Park.
- (1) Division of Support Services.
 - (2) Division of Buildings and Grounds.
 - (3) Division of Operational Services.
- (e) Kentucky State Fair Board.
- (1) Office of Administrative and Information Technology Services.
 - (2) Office of Human Resources and Access Control.
 - (3) Division of Expositions.
 - (4) Division of Kentucky Exposition Center Operations.
 - (5) Division of Kentucky International Convention Center.
 - (6) Division of Public Relations and Media.
 - (7) Division of Venue Services.
 - (8) Division of Personnel Management and Staff Development.
 - (9) Division of Sales.
 - (10) Division of Security and Traffic Control.

- (11) Division of Information Technology.
 - (12) Division of the Louisville Arena.
 - (13) Division of Fiscal and Contract Management.
 - (14) Division of Access Control.
 - (f) Office of the Secretary.
 - (1) Office of Finance.
 - (2) Office of Research and Administration.
 - (3) Office of Governmental Relations and Tourism Development.
 - (4) Office of the Sports Authority.
 - (5) Kentucky Sports Authority.
 - (g) Office of Legal Affairs.
 - (h) Office of Human Resources.
 - (i) Office of Public Affairs and Constituent Services.
 - (j) Office of Creative Services.
 - (k) Office of Capital Plaza Operations.
 - (l) Office of Arts and Cultural Heritage.
 - (m) Kentucky African-American Heritage Commission.
 - (n) Kentucky Foundation for the Arts.
 - (o) Kentucky Humanities Council.
 - (p) Kentucky Heritage Council.
 - (q) Kentucky Arts Council.
 - (r) Kentucky Historical Society.
 - (1) Division of Museums.
 - (2) Division of Oral History and Educational Outreach.
 - (3) Division of Research and Publications.
 - (4) Division of Administration.
 - (s) Kentucky Center for the Arts.
 - (1) Division of Governor's School for the Arts.
 - (t) Kentucky Artisans Center at Berea.
 - (u) Northern Kentucky Convention Center.
 - (v) Eastern Kentucky Exposition Center.
11. Personnel Cabinet:
- (a) Office of the Secretary.
 - (b) Department for Personnel Administration.
 - (c) Office for Employee Relations.
 - (d) Kentucky Public Employees Deferred Compensation Authority.
 - (e) Office of Administrative Services.
 - (f) Office of Legal Services.
 - (g) Office of Government Training.

(h) Department for Employee Insurance.

III. Other departments headed by appointed officers:

1. Department of Military Affairs.
2. Department for Local Government.
3. Kentucky Commission on Human Rights.
4. Kentucky Commission on Women.
5. Department of Veterans' Affairs.
6. Kentucky Commission on Military Affairs.
7. Office of Minority Empowerment.
8. Governor's Council on Wellness and Physical Activity.

➔Section 2. KRS 12.550 is amended to read as follows:

- (1) The Governor's Council on Wellness and Physical Activity is hereby established and authorized to operate the Governor's Wellness and Physical Activity Program, Inc. for the purpose of establishing and implementing a health, wellness, and fitness program for Kentucky and to promote a healthy lifestyle for all citizens of the Commonwealth. The Governor's Council on Wellness and Physical Activity shall be attached to the ***Department for Public Health***~~{Office of the Governor}~~ for administrative purposes.
- (a) The ex officio members of the Governor's Council on Wellness and Physical Activity shall be as follows:
1. The Governor or the Governor's designee from the executive cabinet;
 2. The secretary of the Cabinet for Health and Family Services or designee;
 3. The secretary of the Personnel Cabinet or designee;
 4. The secretary of the Education and Workforce Development Cabinet;
 5. The Senate co-chair of the Interim Joint Committee on Health and Welfare of the General Assembly; and
 6. The House co-chair of the Interim Joint Committee on Health and Welfare of the General Assembly.
- (b) In addition to the ex officio members, the Governor shall appoint five (5) council members to serve three (3) year terms on the Governor's Council on Wellness and Physical Activity. Members appointed by the Governor may be reappointed by the Governor to serve successive terms. In making appointments, the Governor shall attempt to include individuals from different geographic regions of the Commonwealth of Kentucky. The Governor shall make appointments to fill vacancies as they occur. Each appointment after the initial appointment shall be for a three (3) year term unless the appointment is to fill the unexpired portion of a term.
- (c) The Governor or, if so designated by the Governor, the chairman of the council shall have the authority to hire, fire, and manage all personnel of the Governor's Wellness and Physical Activity Program, Inc., including the executive director.
- (d) The council shall administer funds appropriated or gifts, donations, or funds received from any source. The council may expend funds in its discretion to carry out the intent of KRS 12.020, 12.023, ***and*** 12.550~~{, 194A.030 and 194A.085}~~.
- (e) The council shall closely coordinate with the ***Department for Public Health***~~{Governor's Office of Wellness and Physical Activity}~~ to establish policies and procedures.
- (f) The council shall select from its membership a chairman and any other officers it considers essential. The council may have committees and subcommittees as determined by the council.
- (g) The council shall~~{develop funding and support plans that provide for the maintenance of the Governor's Office of Wellness and Physical Activity, and shall}~~ make recommendations to the Governor and secretary of the Cabinet for Health and Family Services.

- (h) The council shall meet quarterly or more often as necessary for the conduct of its business. A majority of the members shall constitute a quorum for the transaction of business. Members' designees shall have voting privileges at committee meetings.
 - (i) Members of the council shall serve without compensation but shall be reimbursed for their necessary travel expenses actually incurred in the discharge of their duties on the council, subject to Finance and Administration Cabinet administrative regulations.
 - (j) The council may establish working groups as necessary.
 - (k) The council shall establish the Governor's Wellness and Physical Activity Program, Inc. pursuant to the requirements in KRS 12.020, 12.023, *and* 12.550~~, 194A.030, and 194A.085~~.
- (2) Funds appropriated for purposes of the program shall ~~only be used to facilitate the goals of the Governor's Office of Wellness and Physical Activity and shall~~ not lapse at the end of the fiscal year.
- (3) (a) The Governor's Wellness and Physical Activity Program, Inc. shall follow standard accounting practices and shall submit the following financial reports to the Office of the Governor, the Finance and Administration Cabinet, and the Legislative Research Commission:
- 1. Quarterly reports of expenditures of state funds, submitted on or before the thirtieth day after the end of each quarter in the corporation's fiscal year;
 - 2. Annual reports of receipts and expenditures for the Governor's Wellness and Physical Activity Program, Inc., submitted on or before the sixtieth day after the end of the fiscal year of the corporation; and
 - 3. The report of an annual financial audit conducted by an independent auditor, submitted on or before September 1 of each year.
- (b) The Governor's Wellness and Physical Activity Program, Inc. ~~and the Governor's Office of Wellness and Physical Activity~~ shall file quarterly reports with the Office of the Governor and the Legislative Research Commission. The report shall include a detail of the operations of the program for the preceding year. The report shall include information concerning the participant demographics, number of incentives distributed, and program outcomes according to such measures of success as the board may adopt.

➔Section 3. KRS 13B.020 is amended to read as follows:

- (1) The provisions of this chapter shall apply to all administrative hearings conducted by an agency, with the exception of those specifically exempted under this section. The provisions of this chapter shall supersede any other provisions of the Kentucky Revised Statutes and administrative regulations, unless exempted under this section, to the extent these other provisions are duplicative or in conflict. This chapter creates only procedural rights and shall not be construed to confer upon any person a right to hearing not expressly provided by law.
- (2) The provisions of this chapter shall not apply to:
- (a) Investigations, hearings to determine probable cause, or any other type of information gathering or fact finding activities;
 - (b) Public hearings required in KRS Chapter 13A for the promulgation of administrative regulations;
 - (c) Any other public hearing conducted by an administrative agency which is nonadjudicatory in nature and the primary purpose of which is to seek public input on public policy making;
 - (d) Military adjudicatory proceedings conducted in accordance with KRS Chapter 35;
 - (e) Administrative hearings conducted by the legislative and judicial branches of state government;
 - (f) Administrative hearings conducted by any city, county, urban-county, charter county, or special district contained in KRS Chapters 65 to 109, or any other unit of local government operating strictly in a local jurisdictional capacity;
 - (g) Informal hearings which are part of a multilevel hearing process that affords an administrative hearing at some point in the hearing process if the procedures for informal hearings are approved and promulgated in accordance with subsections (4) and (5) of this section;
 - (h) Limited exemptions granted for specific hearing provisions and denoted by reference in the text of the applicable statutes or administrative regulations;

- (i) Administrative hearings exempted pursuant to subsection (3) of this section;
 - (j) Administrative hearings exempted, in whole or in part, pursuant to subsections (4) and (5) of this section; and
 - (k) Any administrative hearing which was commenced but not completed prior to July 15, 1996.
- (3) The following administrative hearings are exempt from application of this chapter in compliance with 1994 Ky. Acts ch. 382, sec. 19:
- (a) Finance and Administration Cabinet
 - 1. Higher Education Assistance Authority
 - a. Wage garnishment hearings conducted under authority of 20 U.S.C. sec. 1095a and 34 C.F.R. sec. 682.410
 - b. Offset hearings conducted under authority of 31 U.S.C. sec. 3720A and sec. 3716, and 34 C.F.R. sec. 30.33
 - 2. Department of Revenue
 - a. Any licensing and bond revocation hearings conducted under the authority of KRS 138.210 to 138.448 and 234.310 to 234.440
 - b. Any license revocation hearings under KRS 131.630 and 138.130 to 138.205
 - (b) Cabinet for Health and Family Services
 - 1. Office of Health Policy
 - a. Certificate-of-need hearings and licensure conducted under authority of KRS Chapter 216B
 - b. Licensure revocation hearings conducted under authority of KRS Chapter 216B
 - 2. Department for Community Based Services
 - a. Supervised placement revocation hearings conducted under authority of KRS Chapter 630
 - 3. Department for **Income Support**~~[Disability Determination Services]~~
 - a. Disability determination hearings conducted under authority of 20 C.F.R. sec. 404
 - (c) Justice and Public Safety Cabinet
 - 1. Department of Kentucky State Police
 - a. Kentucky State Police Trial Board disciplinary hearings conducted under authority of KRS Chapter 16
 - 2. Department of Corrections
 - a. Parole Board hearings conducted under authority of KRS Chapter 439
 - b. Prison adjustment committee hearings conducted under authority of KRS Chapter 197
 - c. Prison grievance committee hearings conducted under authority of KRS Chapters 196 and 197
 - 3. Department of Juvenile Justice
 - a. Supervised placement revocation hearings conducted under KRS Chapter 635
 - (d) Energy and Environment Cabinet
 - 1. Department for Natural Resources
 - a. Surface mining hearings conducted under authority of KRS Chapter 350
 - 2. Department for Environmental Protection
 - a. Wild River hearings conducted under authority of KRS Chapter 146
 - b. Water resources hearings conducted under authority of KRS Chapter 151

- c. Water plant operator and water well driller hearings conducted under authority of KRS Chapter 223
 - d. Environmental protection hearings conducted under authority of KRS Chapter 224
 - e. Petroleum Storage Tank Environmental Assurance Fund hearings under authority of KRS Chapter 224
 - 3. Public Service Commission
 - a. Utility hearings conducted under authority of KRS Chapters 74, 278, and 279
 - (e) Labor Cabinet
 - 1. Department of Workers' Claims
 - a. Workers' compensation hearings conducted under authority of KRS Chapter 342
 - 2. Kentucky Occupational Safety and Health Review Commission
 - a. Occupational safety and health hearings conducted under authority of KRS Chapter 338
 - (f) Public Protection Cabinet
 - 1. Board of Claims
 - a. Liability hearings conducted under authority of KRS Chapter 44
 - (g) Education and Workforce Development Cabinet
 - 1. Unemployment Insurance hearings conducted under authority of KRS Chapter 341
 - (h) Secretary of State
 - 1. Registry of Election Finance
 - a. Campaign finance hearings conducted under authority of KRS Chapter 121
 - (i) State universities and colleges
 - 1. Student suspension and expulsion hearings conducted under authority of KRS Chapter 164
 - 2. University presidents and faculty removal hearings conducted under authority of KRS Chapter 164
 - 3. Campus residency hearings conducted under authority of KRS Chapter 164
 - 4. Family Education Rights to Privacy Act hearings conducted under authority of 20 U.S.C. sec. 1232 and 34 C.F.R. sec. 99
 - 5. Federal Health Care Quality Improvement Act of 1986 hearings conducted under authority of 42 U.S.C. sec. 11101 to 11115 and KRS Chapter 311.
- (4) Any administrative hearing, or portion thereof, may be certified as exempt by the Attorney General based on the following criteria:
- (a) The provisions of this chapter conflict with any provision of federal law or regulation with which the agency must comply, or with any federal law or regulation with which the agency must comply to permit the agency or persons within the Commonwealth to receive federal tax benefits or federal funds or other benefits;
 - (b) Conformity with the requirement of this chapter from which exemption is sought would be so unreasonable or so impractical as to deny due process because of undue delay in the conduct of administrative hearings; or
 - (c) The hearing procedures represent informal proceedings which are the preliminary stages or the review stages of a multilevel hearing process, if the provisions of this chapter or the provisions of a substantially equivalent hearing procedure exempted under subsection (3) of this section are applied at some level within the multilevel process.
- (5) The Attorney General shall not exempt an agency from any requirement of this chapter until the agency establishes alternative procedures by administrative regulation which, insofar as practical, shall be consistent with the intent and purpose of this chapter. When regulations for alternative procedures are submitted to the

Administrative Regulation Review Subcommittee, they shall be accompanied by the request for exemption and the approval of exemption from the Attorney General. The decision of the Attorney General, whether affirmative or negative, shall be subject to judicial review in the Franklin Circuit Court within thirty (30) days of the date of issuance. The court shall not overturn a decision of the Attorney General unless the decision was arbitrary or capricious or contrary to law.

- (6) Except to the extent precluded by another provision of law, a person may waive any procedural right conferred upon that person by this chapter.

➔Section 4. KRS 15.290 is amended to read as follows:

- (1) There is hereby established in the Department of Law the Child Support Enforcement Commission which shall consist of nine (9) members as prescribed below:
- (a) The Attorney General, or a designee, who shall also serve as chairman;
 - (b) The secretary of the Cabinet for Health and Family Services, or his *or her* designee, who shall also serve as vice chairman;
 - (c) The director of the Administrative Office of the Courts, or his *or her* designee;
 - (d) The *commissioner, or his or her designee, [director]* of the *Department for Income* ~~Division of Child~~ Support within the Cabinet for Health and Family Services; and
 - (e) The remaining five (5) members shall be appointed by the Governor for terms of four (4) years, except that the initial appointments shall be made in the following manner: One (1) member for two (2) years, two (2) members for three (3) years, and two (2) members for four (4) years. Each member shall serve until a successor is named and any appointment, due to vacancy, shall be for the unexpired term. The remaining five (5) members shall be appointed in the following manner: three (3) members from a list of nine (9) nominees submitted by the Kentucky County Attorney Association, with one (1) of the three members representing either a first class or urban-county government, and two (2) citizen-at-large members.
- (2) The secretary of the cabinet shall reimburse to the Department of Law such an amount as incurred related to the function of the commission. The secretary shall provide such information as may be requested by the commission.
- (3) The commission shall meet at least quarterly and may meet additional times as may be deemed necessary by the chairman.
- (4) Reimbursement for actual travel expenses shall be paid by the Department of Law for commission members, if members are not otherwise eligible for such reimbursement from their respective agency.
- (5) The commission shall have the following responsibilities:
- (a) Advise the Governor on any issue related to the child-support program;
 - (b) Advise the Cabinet for Health and Family Services on any issue related to the child-support program;
 - (c) Advise the Department of Law on any issue related to the child-support program;
 - (d) Advise the Administrative Office of the Courts on any issue related to the child-support program;
 - (e) Provide a regular forum for all parties involved in the child-support program to address any aspect of the administrative or judicial process;
 - (f) Develop and prepare reports and recommendations related to administrative procedures, prosecution, judicial procedures, state or federal legislation; or any other matters which might improve program effectiveness and efficiency; and
 - (g) Initiate recommendations to facilitate interaction between local officials and the cabinet.
- (6) The commission shall prepare and issue an annual report not later than August 15 of each year for the preceding fiscal year which includes a performance assessment for all aspects of the program. The report shall include recommendations to improve performance and service delivery. The report shall be submitted to the Governor and the Legislative Research Commission. The first report shall be due August 15, 1989.
- (7) Nothing in this section shall be construed as modifying the designation of the single state agency as required under the Federal Title IV-D plan.

➔ Section 5. KRS 15A.340 is amended to read as follows:

- (1) As used in this section and KRS 15A.342 and 15A.344, "KY-ASAP" means the Kentucky Agency for Substance Abuse Policy.
- (2) The Office of Drug Control Policy shall administer an endowment from interest generated through funds appropriated or gifts, donations, or funds received from any source. The Office of Drug Control Policy may expend endowment principal, if necessary in its discretion, to carry out the purposes of this section and KRS 15A.342 and 15A.344. These expenditures from the endowment principal are hereby appropriated for this purpose.
- (3) (a) The Office of Drug Control Policy shall oversee the activities specified in this section and KRS 15A.342 and 15A.344 and provide administrative support to the seventeen (17) member KY-ASAP Board, which is created to oversee the activities of KY-ASAP. Membership of the board shall be appointed by the Governor and shall consist of the following:
 1. One (1) member representing the Kentucky Family Resource Youth Services Coalition, or a designee;
 2. One (1) member representing the Kentucky Health Department Association, or a designee;
 3. The secretary of the Cabinet for Health and Family Services, or designee;
 4. The secretary of the Justice and Public Safety Cabinet, or a designee;
 5. One (1) member representing the Division of **Behavioral Health**~~[Mental Health and Substance Abuse Services]~~ within the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~[Mental Health and Mental Retardation Services]~~, Cabinet for Health and Family Services, or a designee;
 6. The commissioner of the Department of Public Health, Cabinet for Health and Family Services, or a designee;
 7. The commissioner of the Department of Alcoholic Beverage Control, or a designee;
 8. The commissioner of the Department of Education;
 9. The director of the Administrative Office of the Courts, or a designee;
 10. One (1) member representing the Kentucky Association of Regional Programs, or a designee;
 11. One (1) member representing the Kentucky Heart Association, or a designee;
 12. One (1) member representing the Kentucky Lung Association, or a designee;
 13. One (1) member representing the Kentucky Cancer Society, or a designee;
 14. Two (2) members representing local tobacco addiction and substance abuse advisory and coordination boards; and
 15. Two (2) members representing private community-based organizations, whether for-profit or nonprofit, with experience in programs involving smoking cessation or prevention or alcohol or substance abuse prevention and treatment.
- (b) Members shall serve for a term of four (4) years, may be reappointed, and may serve no more than two (2) consecutive terms. Members shall not be compensated but shall receive reimbursement for expenses incurred while performing board business.
- (c) The board shall meet at least quarterly. A quorum of nine (9) members shall be required for the transaction of business. Meetings shall be held at the call of the chair, or upon the written request of two (2) members to the chair.
- (d) The board shall:
 1. Oversee deposits and expenditures from the endowment;
 2. Request, in its discretion, an audit relating to the expenditure of endowment funds;
 3. Receive quarterly reports from the commissioner of the Department of Alcoholic Beverage Control regarding KY-ASAP's activities;

4. Progress toward development and implementation of the strategic plan;
 5. Recommend to KY-ASAP the most efficient means for using public funds to coordinate, supplement, and support high quality and ongoing programs of all public agencies and private service providers related to smoking cessation and prevention and alcohol and substance abuse prevention and treatment;
 6. Recommend matters for review and analysis by KY-ASAP; and
 7. Perform other duties as necessary for the oversight of KY-ASAP.
- (4) The Office of Drug Control Policy and KY-ASAP shall promote the implementation of research-based strategies that target Kentucky's youth and adult populations.
 - (5) The Office of Drug Control Policy and KY-ASAP shall vigorously pursue the philosophy that tobacco in the hands of Kentucky's youth is a drug abuse problem because of the addictive qualities of nicotine, and because tobacco is the most prevalent gateway drug that leads to later and escalated drug and alcohol abuse.

➔Section 6. KRS 17.556 is amended to read as follows:

The board shall consist of the members named in subsections (1) and (2) of this section:

- (1)
 - (a) The commissioner of the Department of Corrections, or the commissioner's designee;
 - (b) The commissioner of the Department of Juvenile Justice, or the commissioner's designee;
 - (c) The program administrator of the Sex Offender Treatment Program created pursuant to KRS 197.400; and
 - (d) The commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~(Mental Health and Mental Retardation Services)~~, or the commissioner's designee.
- (2) The following members, appointed by the Governor:
 - (a) One (1) probation and parole officer;
 - (b) Four (4) mental health professionals licensed or certified pursuant to KRS Chapter 309, 311, 314, 319, or 335 who demonstrated expertise in working with sex offenders;
 - (c) One (1) professional working in an agency which provides services to adult or child victims of sex offenses; and
 - (d) One (1) representative of an advocacy group with a demonstrated interest in the welfare of victims of sex offenses.
- (3) The Governor shall appoint the first chair of the board who shall serve for a term of two (2) years after which the chair shall be elected by the members of the board.
- (4) The probation and parole officer and the members identified in subsection (2) of this section shall serve for the remainder of the term of office of the Governor during whose incumbency they were appointed, unless removed sooner for cause, but they shall remain on the board until their successors are appointed or until they are reappointed.
- (5) No member appointed pursuant to subsection (4) of this section may be represented by a designee.
- (6) No member appointed pursuant to subsection (4) of this section shall serve more than four (4) years unless reappointed.
- (7) All members identified under subsection (1) of this section shall serve during their terms of office.
- (8) All members of the board shall be reimbursed for their necessary travel and other expenses actually incurred in the discharge of their duties on the board.
- (9) The board shall be empowered to create committees for the purpose of carrying out its statutory duties.
- (10) The board shall be attached to the Department of Corrections for administrative purposes.

➔Section 7. KRS 36.255 is amended to read as follows:

- (1) The Kentucky Community Crisis Response Board is hereby created as a separate administrative body of state government within the meaning of KRS Chapter 12 and attached for administrative purposes to the Department of Military Affairs.

- (2) The membership of the board shall consist of the following:
- (a) The commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~, or the commissioner's designee;
 - (b) The commissioner of the Department for Public Health, or the commissioner's designee;
 - (c) The commissioner of the Department of Education, or the commissioner's designee;
 - (d) The commissioner of the Department of Kentucky State Police, or the commissioner's designee;
 - (e) The Kentucky state fire marshal, or the fire marshal's designee;
 - (f) The executive director of the Division of Emergency Management, or the executive director's designee;
 - (g) The Attorney General, or the Attorney General's designee;
 - (h) One (1) representative of local community crisis response teams appointed by the Governor;
 - (i) Four (4) members appointed by the Governor to represent mental health disciplines;
 - (j) Two (2) members appointed by the Governor to represent emergency services disciplines;
 - (k) One (1) member who is a mental health professional licensed for independent clinical practice, to be appointed by the Governor. The licensed mental health professional member shall serve as clinical director for the board;
 - (l) One (1) member, appointed by the Governor, from a statewide chaplain's association involved in emergency services, who is trained in grief counseling and has experience in crisis response;
 - (m) One (1) member from the Kentucky Chapter of the American Red Cross; and
 - (n) The commissioner of the Department for Community Based Services or the commissioner's designee.
- (3) All board members appointed pursuant to subsection (2)(h) to (l) of this section shall be approved members of the existing community crisis response team.
- (4) All board members appointed pursuant to subsection (2)(h) to (l) of this section shall have demonstrated a commitment to the provision of community crisis response services.
- (5) The members of the board appointed by the Governor shall serve for two (2) years and may be reappointed for one (1) additional consecutive two (2) year term. All vacancies in appointed members' terms shall be filled by appointment of the Governor for the remainder of the unexpired term.
- (6) The board shall elect annually from its membership a chairperson and shall establish other officers and committees as needed to execute the duties of the board.
- (7) The board shall meet at least quarterly, and a majority of the members shall constitute a quorum for the transaction of the board's business.
- (8) Except for hired and appointed staff, no board member or team member shall receive compensation. However, board members and crisis response team members may receive reimbursement for expenses incurred in the course of providing crisis response services or executing the duties of the board, consistent with state policy governing the reimbursement of state employees for food, travel, and lodging. Except as provided for in KRS 36.260, nothing in the provisions of KRS 36.250 to 36.270 shall be construed to create liability of a private party for expenses incurred or reimbursed under this subsection.

➔Section 8. KRS 42.560 is amended to read as follows:

- (1) There is established in the Treasury of the Commonwealth a trust fund to be known as the "Energy Assistance Trust Fund" referred to in KRS 42.560 to 42.572 as the "trust fund."
- (2) The trust fund shall consist of any oil overcharge refunds which become available to the state as a result of litigation for alleged overcharges for crude oil or refined petroleum products sold during the period of time in which federal price controls on such products were in effect, any moneys as may be appropriated by the general fund, and any investment interest earned on the fund.
- (3) The fund shall be managed by the state Office of Financial Management within the Office of the Controller and all moneys in excess of the amount to be disbursed in a given fiscal year shall be invested to maximize returns. The principal and any interest earnings of the trust fund shall at no time lapse to the general fund.

- (4) ~~[The trust fund and all accumulated interest shall be disbursed over a period of time not exceeding ten (10) years from February 19, 1988. Interest accumulated during the 1987-88 fiscal year shall immediately be available for disbursement. Fifty thousand dollars (\$50,000) of the interest shall be allocated to the Legislative Research Commission for consultant costs for a study of energy conservation and weatherization programs as directed by the 1988 General Assembly. The remainder of]~~The accumulated interest shall be made available *as follows*: ~~[to the Cabinet for Health and Family Services with]~~
- (a) Fifty percent (50%) *to the Finance and Administration Cabinet to be* ~~[of the interest]~~ allocated to weatherization services to low-income households; and
 - (b) Fifty percent (50%) *to the Cabinet for Health and Family Services to be* ~~[of the interest]~~ allocated to low-income energy assistance services.

The funds to be available for expenditure in any fiscal year shall be appropriated by the General Assembly from the trust fund as provided in KRS 48.300.

➔Section 9. KRS 42.566 is amended to read as follows:

The funds appropriated by the General Assembly *from the energy assistance trust fund* shall be expended in a manner consistent with the judgments and settlements, as amended, which produced the oil overcharge refunds, as follows:

- (1) The sum of five hundred thousand dollars (\$500,000) or eight percent (8%) of the amount appropriated each fiscal year, whichever is greater, shall be distributed annually to the Energy and Environment Cabinet for expenditure in the Institutional Conservation Program established pursuant to Part G of Title III of the Energy Policy and Conservation Act, 42 U.S.C. secs. 6371 et seq. The source of these funds shall be deemed to be the trust funds produced by the Stripper Well litigation, In Re Department of Energy Stripper Well Exemption Litigation, D.C. Kan., M.D.L. No. 378, and the Diamond Shamrock litigation, Diamond Shamrock Refining Co. v. Standard Oil of Indiana, D.C. Ind., Civil Action No. C-84-1432, and interest accumulated thereon; *and* ~~[]~~
- (2) The balance of the trust funds appropriated for expenditure in any fiscal year shall be distributed ~~[to the Cabinet for Health and Family Services and allocated]~~ as follows:
 - (a) Forty percent (40%) *to the Finance and Administration* ~~[of the trust funds received by the]~~ Cabinet *to* ~~[in any fiscal year shall]~~ be allocated to the cabinet's program for weatherization of low-income households established pursuant to Part A of the Energy Conservation and Existing Buildings Act of 1976, 42 U.S.C. secs. 6861 et seq.; and
 - (b) Sixty percent (60%) *to* ~~[of the trust funds received by]~~ the Cabinet *for Health and Family Services to* ~~[in any fiscal year shall]~~ be allocated to the cabinet's program for energy crisis or prevention services for low-income households established pursuant to the Low-Income Home Energy Assistance Act of 1981, 42 U.S.C. secs. 8621 et seq.

➔Section 10. KRS 158.442 is amended to read as follows:

- (1) The General Assembly hereby authorizes the establishment of the Center for School Safety. The center's mission shall be to serve as the central point for data analysis; research; dissemination of information about successful school safety programs, research results, and new programs; and, in collaboration with the Department of Education and others, to provide technical assistance for safe schools.
- (2) To fulfill its mission, the Center for School Safety shall:
 - (a) Establish a clearinghouse for information and materials concerning school violence prevention;
 - (b) Provide program development and implementation expertise and technical support to schools, law enforcement agencies, and communities, which may include coordinating training for administrators, teachers, students, parents, and other community representatives;
 - (c) Analyze the data collected in compliance with KRS 158.444;
 - (d) Research and evaluate school safety programs so schools and communities are better able to address their specific needs;
 - (e) Administer a school safety grant program for local districts as directed by the General Assembly;

- (f) Promote the formation of interagency efforts to address discipline and safety issues within communities throughout the state in collaboration with other postsecondary education institutions and with local juvenile delinquency prevention councils;
 - (g) Prepare and disseminate information regarding best practices in creating safe and effective schools;
 - (h) Advise the Kentucky Board of Education on administrative policies and administrative regulations; and
 - (i) Provide an annual report by July 1 of each year to the Governor, the Kentucky Board of Education, and the Interim Joint Committee on Education regarding the status of school safety in Kentucky.
- (3) The Center for School Safety shall be governed by a board of directors appointed by the Governor. Members shall consist of:
- (a) The commissioner or a designee of the Department of Education;
 - (b) The commissioner or a designee of the Department of Juvenile Justice;
 - (c) The commissioner or a designee of the Department for **Behavioral Health, Developmental and Intellectual Disabilities** [~~Mental Health and Mental Retardation Services~~];
 - (d) The commissioner or a designee of the Department for Community Based Services;
 - (e) The secretary or a designee of the Education and Workforce Development Cabinet;
 - (f) A juvenile court judge;
 - (g) A local school district board of education member;
 - (h) A local school administrator;
 - (i) A school council parent representative;
 - (j) A teacher;
 - (k) A classified school employee; and
 - (l) A superintendent of schools who is a member of the Kentucky Association of School Administrators.

In appointing the board of education member, the school administrator, the school superintendent, the school council parent member, the teacher, and the classified employee, the Governor shall solicit recommendations from the following groups respectively: the Kentucky School Boards Association, the Kentucky Association of School Administrators, the Kentucky Association of School Councils, the Kentucky Education Association, and the Kentucky Education Support Personnel Association. The initial board shall be appointed by July 15, 1998. The board shall hold its first meeting no later than thirty (30) days after the appointment of the members.

➔Section 11. KRS 189A.050 is amended to read as follows:

- (1) All persons convicted of violation of KRS 189A.010(1)(a), (b), (c), (d), or (e) shall be sentenced to pay a service fee of three hundred seventy-five dollars (\$375), which shall be in addition to all other penalties authorized by law.
- (2) The fee shall be imposed in all cases but shall be subject to the provisions of KRS 534.020 relating to the method of imposition and KRS 534.060 as to remedies for nonpayment of the fee.
- (3) The first fifty dollars (\$50) of each service fee imposed by this section shall be paid into the general fund, and the remainder of the revenue collected from the service fee imposed by this section shall be utilized as follows:
 - (a) Twelve percent (12%) of the amount collected shall be transferred to the Department of Kentucky State Police forensic laboratory for the acquisition, maintenance, testing, and calibration of alcohol concentration testing instruments and the training of laboratory personnel to perform these tasks;
 - (b) Twenty percent (20%) of the service fee collected pursuant to this section shall be allocated to the Department for Public Advocacy;
 - (c) One percent (1%) shall be transferred to the Prosecutor's Advisory Council for training of prosecutors for the prosecution of persons charged with violations of this chapter and for obtaining expert witnesses in cases involving the prosecution of persons charged with violations of this chapter or any other offense in which driving under the influence is a factor in the commission of the offense charged;
 - (d) Sixteen percent (16%) of the amount collected shall be transferred as follows:

1. Fifty percent (50%) shall be credited to the traumatic brain injury trust fund established under KRS 211.476; and
 2. Fifty percent (50%) shall be credited to the Cabinet for Health and Family Services, Department for ***Aging and Independent Living***~~[Mental Health and Mental Retardation Services]~~, for the purposes of providing direct services to individuals with brain injuries that may include long-term supportive services and training and consultation to professionals working with individuals with brain injuries. As funding becomes available under this subparagraph, the cabinet may promulgate administrative regulations pursuant to KRS Chapter 13A to implement the services permitted by this subparagraph;
 - (e) Any amount specified by a specific statute shall be transferred as provided in that statute;
 - (f) Forty-six percent (46%) of the amount collected shall be transferred to be utilized to fund enforcement of this chapter and for the support of jails, recordkeeping, treatment, and educational programs authorized by this chapter and by the Department for Public Advocacy; and
 - (g) The remainder of the amount collected shall be transferred to the general fund.
- (4) The amounts specified in subsection (3)(a), (b), (c), and (d) of this section shall be placed in trust and agency accounts that shall not lapse.

➔Section 12. KRS 194.245 is amended to read as follows:

- (1) No later than August 1, 1990, the Cabinet for ***Health and Family Services***~~[Human Resources]~~ shall begin contracting to construct and operate, or lease and operate the following:
 - (a) A one hundred (100) bed inpatient mental health facility in eastern Kentucky;
 - (b) Twelve (12) child-care centers with a minimum of one (1) center in each of the ~~six (6)~~**(6)**~~{seven (7)}~~ Kentucky congressional districts;
 - (c) Four (4) eight (8) bed group homes for persons with mental retardation;
 - (d) Two (2) one hundred (100) bed personal care homes; and
 - (e) Twelve (12) senior citizens centers with a minimum of one (1) center in each of the ~~six (6)~~**(6)**~~{seven (7)}~~ Kentucky congressional districts.
- (2) (a) ~~[Effective August 1, 2000,]The Cabinet for Health and Family Services[, as the successor agency to the Cabinet for Human Resources with the responsibility for the operation of child-care centers as identified in subsection (1)(b) of this section,]~~ may transfer the ownership of all real property relating to any child-care center, with the approval of the Finance and Administration Cabinet, and all operational and administrative responsibility over any child-care center, and any contract, agreement, or lease that the Cabinet for Health and Family Services has assumed or executed for the operation of any child-care center to the city, county, or urban-county government in which the center is located.
 - (b) Any transfer made under this section shall provide for the continued operation of a center in accordance with the public purpose set forth in subsection (1) of this section.
 - (c) ***In the event the Cabinet for Health and Family Services cannot locate an entity to continue operations of a real property for the purpose specified in this subsection, it may, with approval of the Finance and Administration Cabinet, transfer property or designate the property as surplus with no stipulation for further use.***
- (3) (a) ~~[Effective August 1, 2000,]The Cabinet for Health and Family Services[, as the successor agency to the Cabinet for Human Resources with the responsibility for the operation of senior citizens centers as identified in subsection (1)(e) of this section,]~~ may transfer the ownership of all real property relating to any senior citizens center, with the approval of the Finance and Administration Cabinet, and all operational and administrative responsibility over any senior citizens center, and any contract, agreement, or lease that the Cabinet for Health and Family Services has assumed or executed for the operation of any senior citizens center, to the city, county, or urban-county government in which the center is located.
 - (b) Any transfer made under this section shall provide for the continued operation of a center in accordance with the public purpose set forth in subsection (1) of this section.

- (c) *In the event the Cabinet for Health and Family Services cannot locate an entity to continue operations of a real property for the purpose specified in this subsection, it may, with approval of the Finance and Administration Cabinet, transfer property or designate the property as surplus with no stipulation for further use.*

➔Section 13. KRS 194A.010 is amended to read as follows:

- (1) The cabinet is the primary state agency for operating the public health, Medicaid, certificate of need and licensure, and mental health and intellectual disability programs in the Commonwealth. The function of the cabinet is to improve the health of all Kentuckians, including the delivery of population, preventive, reparative, and containment health services in a safe and effective fashion, and to improve the functional capabilities and opportunities of Kentuckians with disabilities. The cabinet is to accomplish its function through direct and contract services for planning and through the state health plan and departmental plans for program operations, for program monitoring and standard setting, and for program evaluation and resource management.
- (2) The cabinet is the primary state agency responsible for leadership in protecting and promoting the well-being of Kentuckians through the delivery of quality human services. Recognizing that children are the Commonwealth's greatest natural resource and that individuals and their families are the most critical component of a strong society, the cabinet shall deliver social services to promote the safety and security of Kentuckians and preserve their dignity. The cabinet shall *administer child welfare programs that* promote collaboration and accountability among local, public, and private programs to improve the lives of families and children, including collaboration with the Council on Accreditation for Children and Family Services or its equivalent in developing strategies consistent with best practice standards for delivery of services. The cabinet also shall administer income-supplement programs that protect, develop, preserve, and maintain individuals, families, and children in the Commonwealth.

➔Section 14. KRS 194A.030 is amended to read as follows:

The cabinet consists of the following major organizational units, which are hereby created:

- (1) Office of the Secretary. Within the Office of the Secretary, there shall be an Office of *Communications and Administrative Review* ~~[Legislative and Public Affairs]~~, an Office of Legal Services, ~~and~~ an Office of Inspector General, *an Office of the Ombudsman, and the Governor's Office of Electronic Health Information*.
 - (a) The Office of *Communications and Administrative Review* ~~[Legislative and Public Affairs]~~ shall be responsible for the development and implementation of the major legislative and policy initiatives of the cabinet, ~~and~~ shall include oversight of administrative hearings ~~[legislative affairs]~~ and communications with internal and external audiences of the cabinet. The Office of *Communications and Administrative Review* ~~[Legislative and Public Affairs]~~ shall be headed by an executive director who shall be appointed by the secretary with the approval of the Governor under KRS 12.050.
 - (b) The Office of Legal Services shall provide legal advice and assistance to all units of the cabinet in any legal action in which it may be involved. The Office of Legal Services shall employ all attorneys of the cabinet who serve the cabinet in the capacity of attorney, giving legal advice and opinions concerning the operation of all programs in the cabinet. The Office of Legal Services shall be headed by a general counsel who shall be appointed by the secretary with the approval of the Governor under KRS 12.050 and 12.210. The general counsel shall be the chief legal advisor to the secretary and shall be directly responsible to the secretary. The Attorney General, on the request of the secretary, may designate the general counsel as an assistant attorney general under the provisions of KRS 15.105.
 - (c) The Office of Inspector General shall be responsible for:
 1. The conduct of audits and investigations for detecting the perpetration of fraud or abuse of any program by any client, or by any vendor of services with whom the cabinet has contracted; and the conduct of special investigations requested by the secretary, commissioners, or office heads of the cabinet into matters related to the cabinet or its programs;
 2. Licensing and regulatory functions as the secretary may delegate;
 3. Review of health facilities participating in transplant programs, as determined by the secretary, for the purpose of determining any violations of KRS 311.1911 to 311.1959, 311.1961, and 311.1963; and

4. The notification and forwarding of any information relevant to possible criminal violations to the appropriate prosecuting authority.

The Office of Inspector General shall be headed by an inspector general who shall be appointed by the secretary with the approval of the Governor. The inspector general shall be directly responsible to the secretary.

- (d) *The Office of the Ombudsman shall provide professional support in the evaluation of programs, including but not limited to quality improvement and information analysis and reporting, contract monitoring, program monitoring, and the development of quality service delivery, and a review and resolution of citizen complaints about programs or services of the cabinet when those complaints are unable to be resolved through normal administrative remedies. The Office of the Ombudsman shall place an emphasis on research and best practice and program accountability and shall monitor federal compliance. The Office of the Ombudsman shall be headed by an executive director who shall be appointed by the secretary with the approval of the Governor in accordance with KRS 12.050.*
- (e) *The Governor's Office of Electronic Health Information shall provide leadership in the redesign of the health care delivery system using electronic information technology as a means to improve patient care and reduce medical errors and duplicative services. The Governor's Office of Electronic Health Information shall be headed by an executive director who shall be appointed by the secretary with the approval of the Governor in accordance with KRS 12.050;*
- (2) Department for Medicaid Services. The Department for Medicaid Services shall serve as the single state agency in the Commonwealth to administer Title XIX of the Federal Social Security Act. The Department for Medicaid Services shall be headed by a commissioner for Medicaid services, who shall be appointed by the secretary with the approval of the Governor under KRS 12.050. The commissioner for Medicaid services shall be a person who by experience and training in administration and management is qualified to perform the duties of this office. The commissioner for Medicaid services shall exercise authority over the Department for Medicaid Services under the direction of the secretary and shall only fulfill those responsibilities as delegated by the secretary;
- (3) Department for Public Health. The Department for Public Health shall develop and operate all programs of the cabinet that provide health services and all programs for assessing the health status of the population for the promotion of health and the prevention of disease, injury, disability, and premature death. This shall include but not be limited to oversight of the Division of Women's ~~Physical and Mental~~ Health. The Department for Public Health shall be headed by a commissioner for public health who shall be appointed by the secretary with the approval of the Governor under KRS 12.050. The commissioner for public health shall be a duly licensed physician who by experience and training in administration and management is qualified to perform the duties of this office. The commissioner shall advise the head of each major organizational unit enumerated in this section on policies, plans, and programs relating to all matters of public health, including any actions necessary to safeguard the health of the citizens of the Commonwealth. The commissioner shall serve as chief medical officer of the Commonwealth. The commissioner for public health shall exercise authority over the Department for Public Health under the direction of the secretary and shall only fulfill those responsibilities as delegated by the secretary;
- (4) Department for *Behavioral Health, Developmental and Intellectual Disabilities* ~~[Mental Health and Mental Retardation Services]~~. The Department for *Behavioral Health, Developmental and Intellectual Disabilities* ~~[Mental Health and Mental Retardation Services]~~ shall develop and administer programs for the prevention of mental illness, *intellectual disabilities* ~~[mental retardation]~~, brain injury, developmental disabilities, and substance abuse disorders and shall develop and administer an array of services and support for the treatment, habilitation, and rehabilitation of persons who have a mental illness or emotional disability, or who have *intellectual disabilities* ~~[mental retardation]~~, brain injury, developmental disability, or a substance abuse disorder. The Department for *Behavioral Health, Developmental and Intellectual Disabilities* ~~[Mental Health and Mental Retardation Services]~~ shall be headed by a commissioner ~~[for mental health and mental retardation]~~ who shall be appointed by the secretary with the approval of the Governor under KRS 12.050. The commissioner for *behavioral health, developmental and intellectual disabilities* ~~[mental health and mental retardation]~~ shall be by training and experience in administration and management qualified to perform the duties of the office, ~~[The commissioner for mental health and mental retardation]~~ shall exercise authority over the department under the direction of the secretary, and shall only fulfill those responsibilities as delegated by the secretary;

- (5) Commission for Children with Special Health Care Needs. The duties, responsibilities, and authority set out in KRS 200.460 to 200.490 shall be performed by the commission. The commission shall advocate the rights of children with disabilities and, to the extent that funds are available, shall provide the services and facilities for children with disabilities as are deemed appropriate by the commission. The commission shall be composed of seven (7) members appointed by the Governor to serve a term of office of four (4) years. The commission may promulgate administrative regulations under KRS Chapter 13A as may be necessary to implement and administer its responsibilities. The duties, responsibilities, and authority of the Commission for Children with Special Health Care Needs shall be performed through the office of the executive director of the commission. The executive director shall be appointed by the Governor under KRS 12.040, and the commission may at any time recommend the removal of the executive director upon filing with the Governor a full written statement of its reasons for removal. The executive director shall report directly to the Commission for Children with Special Health Care Needs and serve as the commission's secretary;
- (6) Office of Health Policy. The Office of Health Policy shall lead efforts to coordinate health care policy, including Medicaid, **behavioral health, developmental and intellectual disabilities** ~~mental health and mental retardation~~ services, public health, certificate of need, **and** health insurance ~~and the state employee health insurance program~~. The duties, responsibilities, and authority pertaining to the certificate of need functions and the licensure appeal functions, as set out in KRS Chapter 216B, shall be performed by this office. The Office of Health Policy shall be headed by an executive director who shall be appointed by the secretary with the approval of the Governor pursuant to KRS 12.050;
- (7) Department for **Family Resource Centers and Volunteer** ~~Human Support~~ Services. The Department for **Family Resource Centers and Volunteer** ~~Human Support~~ Services shall streamline the various responsibilities associated with the human services programs for which the cabinet is responsible. This shall include, but not be limited to, oversight of the ~~Division of Child Abuse and Domestic Violence Services, the~~ Division of Family Resource and Youth Services Centers ~~,~~ and the Kentucky Commission on Community Volunteerism and Services. The Department for **Family Resource Centers and Volunteer** ~~Human Support~~ Services shall be headed by a commissioner ~~for human support services~~ who shall be appointed by the secretary with the approval of the Governor under KRS 12.050. The commissioner for **family resource centers and volunteer** ~~human support~~ services shall be by training and experience in administration and management qualified to perform the duties of the office, ~~The commissioner for human support services~~ shall exercise authority over the department under the direction of the secretary, and shall only fulfill those responsibilities as delegated by the secretary;
- ~~(8) Office of the Ombudsman. The Office of the Ombudsman shall provide professional support in the evaluation of programs, including but not limited to quality improvement and information analysis and reporting, including contract monitoring, program monitoring, and the development of quality service delivery, and a review and resolution of citizen complaints about programs or services of the cabinet when those complaints are unable to be resolved through normal administrative remedies. The Office of the Ombudsman shall place an emphasis on research and best practice and program accountability and shall monitor federal compliance. The Office of the Ombudsman shall be headed by an executive director who shall be appointed by the secretary with the approval of the Governor under KRS 12.050;~~
- ~~(9)~~ Office of **Administrative and Technology Services**. The Office of **Administrative and Technology Services** shall develop and maintain technology, technology infrastructure, and information management systems in support of all units of the cabinet. **The office shall have responsibility for properties and facilities owned, maintained, or managed by the cabinet.** The Office of **Administrative and Technology Services** shall be headed by **an executive director** ~~a chief information officer~~ who shall be appointed by the secretary with the approval of the Governor under KRS 12.050. The **executive director** ~~chief information officer~~ shall exercise authority over the Office of **Administrative and Technology Services** under the direction of the secretary and shall only fulfill those responsibilities as delegated by the secretary;
- ~~(9)~~~~(10)~~ Office of Human Resource Management. The Office of Human Resource Management shall coordinate, oversee, and execute all personnel, training, and management functions of the cabinet. The office shall focus on the oversight, development, and implementation of quality personnel services; curriculum development and delivery of instruction to staff; the administration, management, and oversight of training operations; health, safety, and compliance training; and equal employment opportunity compliance functions. The office shall be headed by an executive director appointed by the secretary with the approval of the Governor in accordance with KRS 12.050;
- ~~(10)~~~~(11)~~ **The Office of Policy and Budget shall provide central review and oversight of budget, contracts, legislation, policy, grant management, boards and commissions, and administrative regulations. The office**

shall provide coordination, assistance, and support to program departments and independent review and analysis on behalf of the secretary. The office shall be headed by an executive director appointed by the secretary with the approval of the Governor in accordance with KRS 12.050. ~~Office of Fiscal Services. The Office of Fiscal Services shall coordinate, oversee, and execute the accounting, treasury, and financial reporting functions of the cabinet. The office shall be headed by a chief financial officer appointed by the secretary with the approval of the Governor in accordance with KRS 12.050;~~

~~(12) Office of Contract Oversight. The Office of Contract Oversight shall coordinate, oversee, and execute the contracting and procurement processes of the cabinet and shall maintain these processes in compliance with all applicable laws, rules, regulations, and procedures. The office shall ensure that the cabinet executes its contracting and procurement processes within the highest ethical standards and with the utmost integrity. The office shall oversee existing contracts to assure that the cabinet receives those services for which it has contracted or receives funds in payment for services that it has provided by contract, and shall have responsibility for determining that the cabinet maximizes the value of dollars spent by the cabinet for commodities and services. The office shall be headed by an executive director appointed by the secretary with the approval of the Governor in accordance with KRS 12.050;~~

~~(11)~~~~(13)~~ Department for Community Based Services. The Department for Community Based Services shall administer and be responsible for child and adult protection, **violence prevention resources**, foster care and adoption, permanency, and services to enhance family self-sufficiency, including child care, social services, public assistance, and family ~~and child~~ support. The department shall be headed by a commissioner appointed by the secretary with the approval of the Governor in accordance with KRS 12.050;

~~(12)~~~~(14)~~ Department for **Income Support** ~~Disability Determination Services~~. The Department for **Income Support** ~~Disability Determination Services~~ shall **be responsible for child support enforcement and disability determination. The department shall** serve as the state unit as required by Title II and Title XVI of the Social Security Act, and shall have responsibility for determining eligibility for disability for those citizens of the Commonwealth who file applications for disability with the Social Security Administration. ~~The department shall also make determinations for citizens of the Commonwealth who make application for the Kentucky Transitional Assistance Program and determine medical exemptions for participants in the Kentucky Works Program.~~ The department shall be headed by a commissioner appointed by the secretary with the approval of the Governor in accordance with KRS 12.050; **and**

~~(13)~~~~(15)~~ Department for Aging and Independent Living. The Department for Aging and Independent Living shall serve as the state unit as designated by the Administration on Aging Services under the Older Americans Act and shall have responsibility for administration of the federal community support services, in-home services, meals, family and caregiver support services, elder rights and legal assistance, senior community services employment program, the state health insurance assistance program, state home and community based services including home care, Alzheimer's respite services and the personal care attendant program, certifications of adult day care and assisted living facilities, the state Council on Alzheimer's Disease and other related disorders, ~~and~~ the Institute on Aging, **and guardianship services**. The department shall also administer the Long-Term Care Ombudsman Program and the Medicaid Home and Community Based Waivers Consumer Directed Option (CDO) Program. The department shall serve as the information and assistance center for aging and disability services and administer multiple federal grants and other state initiatives. The department shall be headed by a commissioner appointed by the secretary with the approval of the Governor in accordance with KRS 12.050; ~~and~~

~~(16) The Governor's Office of Wellness and Physical Activity shall be responsible for establishing and implementing a health, wellness, and fitness program for Kentucky and to promote a healthy lifestyle for all citizens of the Commonwealth as defined in KRS 194A.085.~~

➔ Section 15. KRS 194A.095 is amended to read as follows:

- (1) There is created in the Cabinet for Health and Family Services a Division of Women's ~~Physical and Mental~~ Health for the purpose of:
- (a) Serving as a repository for data and information affecting women's physical and mental health issues;
 - (b) Analyzing and communicating trends in women's health issues and mental health;
 - (c) Recommending to the Cabinet for Health and Family Services and to any advisory committees created under KRS 216.2923, data elements affecting women's physical and mental health. The division shall advise and direct which data elements should be collected, analyzed, and reported in a timely manner under KRS 216.2920 to 216.2929;

- (d) Cooperating and collaborating with the Cabinet for Health and Family Services in receiving and disseminating through all forms of media including the Internet relevant aggregate data findings under KRS 216.2920 to 216.2929 which affect women; and
 - (e) Planning, developing, and administering a Women's Health Resource Center within the Cabinet for Health and Family Services to focus on targeted preventive care and comprehensive health education.
- (2) The division may accept gifts, grants, and bequests in support of its mission and duties specified in subsection (1) of this section. All money received shall be administered by the cabinet, which shall administer these funds through appropriate trust and agency accounts.

➔Section 16. KRS 194A.125 is amended to read as follows:

- (1) The Telehealth Board is created and placed for administrative purposes under the cabinet. This ten (10) member board shall consist of the:
- (a) Chancellor, or a designee, of the medical school at the University of Kentucky;
 - (b) Chancellor, or a designee, of the medical school at the University of Louisville;
 - (c) Commissioner, or a designee, of the Department for Public Health;
 - (d) Executive director, or a designee, of the Commonwealth Office of Technology;
 - (e) **Executive director**~~[Chief information officer]~~, or a designee, of the **Office of Administrative and Technology Services**, Cabinet for Health and Family Services; and
 - (f) Five (5) members at large, appointed by the Governor, who are health professionals or third parties as those terms are defined in KRS 205.510. To ensure representation of both groups, no more than three (3) health professionals or two (2) third parties shall be members of the board at the same time. These members shall serve a term of four (4) years, may serve no more than two (2) consecutive terms, and shall be reimbursed for their costs associated with attending board meetings.
- (2) The members shall elect a chair and hold bimonthly meetings or as often as necessary for the conduct of the board's business.
- (3) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to:
- (a) Establish telehealth training centers at the University of Kentucky, University of Louisville, the pediatric-affiliated hospitals at the University of Kentucky and the University of Louisville, and one (1) each in western Kentucky and eastern Kentucky, with the sites to be determined by the board;
 - (b) Develop a telehealth network, to coordinate with the training centers, of no more than twenty-five (25) rural sites, to be established based on the availability of funding and in accordance with criteria set by the board. In addition to these rural sites, the board may identify, for participation in the telehealth network, ten (10) local health departments, five (5) of which shall be administered by the University of Kentucky and five (5) of which shall be administered by the University of Louisville, and any other site that is operating as a telemedicine or telehealth site and that demonstrates its capability to follow the board's protocols and standards;
 - (c) Establish protocols and standards to be followed by the training centers and rural sites; and
 - (d) Maintain the central link for the network with the Kentucky information highway.
- (4) The board shall, following consultation with the Commonwealth Office of Technology, recommend the processes and procedures for the switching and running of the telehealth network.
- (5) The University of Kentucky and the University of Louisville shall report semiannually to the Interim Joint Committee on Health and Welfare on the following areas as specified by the board through an administrative regulation promulgated in accordance with KRS Chapter 13A.
- (a) Data on utilization, performance, and quality of care;
 - (b) Quality assurance measures, including monitoring systems;
 - (c) The economic impact on and benefits to participating local communities; and
 - (d) Other matters related to telehealth at the discretion of the board.

- (6) The board shall receive and dispense funds appropriated for its use by the General Assembly or obtained through any other gift or grant.

➔Section 17. KRS 194A.135 is amended to read as follows:

- (1) The ~~*Commonwealth*~~~~[Kentucky]~~ Council on Developmental Disabilities is created within the cabinet.
- (2) The ~~*Commonwealth*~~~~[Kentucky]~~ Council on Developmental Disabilities is established to comply with the requirements of the Developmental Disabilities Act of 1984 and any subsequent amendment to that act.
- (3) The members of the ~~*Commonwealth*~~~~[Kentucky]~~ Council on Developmental Disabilities shall be appointed by the Governor to serve as advocates for persons with developmental disabilities. The council shall be composed of twenty-six (26) members.
 - (a) Ten (10) members shall be representatives of: the principal state agencies administering funds provided under the Rehabilitation Act of 1973 as amended; the state agency that administers funds provided under the Individuals with Disabilities Education Act (IDEA); the state agency that administers funds provided under the Older Americans Act of 1965 as amended; the single state agency designated by the Governor for administration of Title XIX of the Social Security Act for persons with developmental disabilities; higher education training facilities, each university-affiliated program or satellite center in the Commonwealth; and the protection and advocacy system established under Public Law 101-496. These members shall represent the following:
 1. Office of Vocational Rehabilitation;
 2. Office for the Blind;
 3. Division of Exceptional Children, within the Department of Education;
 4. Department for Aging and Independent Living;
 5. Department for Medicaid Services;
 6. Department of Public Advocacy, Protection and Advocacy Division;
 7. University-affiliated programs;
 8. Local and nongovernmental agencies and private nonprofit groups concerned with services for persons with developmental disabilities;
 9. Department for *Behavioral Health, Developmental and Intellectual Disabilities*~~[Mental Health and Mental Retardation Services]~~; and
 10. Department for Public Health, Division of ~~*Maternal*~~~~[Adult]~~ and Child Health~~[Improvement]~~.
 - (b) At least sixty percent (60%) of the members of the council shall be composed of persons with developmental disabilities or the parents or guardians of persons, or immediate relatives or guardians of persons with mentally impairing developmental disabilities, who are not managing employees or persons with ownership or controlling interest in any other entity that receives funds or provides services under the Developmental Disabilities Act of 1984 as amended and who are not employees of a state agency that receives funds or provides services under this section. Of these members, five (5) members shall be persons with developmental disabilities, and five (5) members shall be parents or guardians of children with developmental disabilities or immediate relatives or guardians of adults with mentally impairing developmental disabilities who cannot advocate for themselves. Six (6) members shall be a combination of individuals in these two (2) groups, and at least one (1) of these members shall be an immediate relative or guardian of an institutionalized or previously institutionalized person with a developmental disability or an individual with a developmental disability who resides in an institution or who previously resided in an institution.
 - (c) Members not representing principal state agencies shall be appointed for a term of three (3) years. Members shall serve no more than two (2) consecutive three (3) year terms. Members shall serve until their successors are appointed or until they are removed for cause.
 - (d) The council shall elect its own chair, adopt bylaws, and operate in accordance with its bylaws. Members of the council who are not state employees shall be reimbursed for necessary and actual expenses. The cabinet shall provide personnel adequate to insure that the council has the capacity to fulfill its responsibilities. The council shall be headed by an executive director. If the executive director position

becomes vacant, the council shall be responsible for the recruitment and hiring of a new executive director.

- (4) The ~~Commonwealth of Kentucky~~ Council on Developmental Disabilities shall:
- (a) Develop, in consultation with the cabinet, and implement the state plan as required by Part B of the Developmental Disabilities Act of 1984, as amended, with a goal of development of a coordinated consumer and family centered focus and direction, including the specification of priority services required by that plan;
 - (b) Monitor, review, and evaluate, not less often than annually, the implementation and effectiveness of the state plan in meeting the plan's objectives;
 - (c) To the maximum extent feasible, review and comment on all state plans that relate to persons with developmental disabilities;
 - (d) Submit to the secretary of the cabinet, the commissioner of the Department for **Behavioral Health, Developmental and Intellectual Disabilities** ~~[Mental Health and Mental Retardation Services]~~, and the Secretary of the United States Department of Health and Human Services any periodic reports on its activities as required by the United States Department of Health and Human Services and keep records and afford access as the cabinet finds necessary to verify the reports;
 - (e) Serve as an advocate for individuals with developmental disabilities and conduct programs, projects, and activities that promote systematic change and capacity building;
 - (f) Examine, not less than once every five (5) years, the provision of and need for federal and state priority areas to address, on a statewide and comprehensive basis, urgent needs for services, supports, and other assistance for individuals with developmental disabilities and their families; and
 - (g) Prepare, approve, and implement a budget that includes amounts paid to the state under the Developmental Disabilities Act of 1984, as amended, to fund all programs, projects, and activities under that Act.
- (5) The ~~Commonwealth of Kentucky~~ Council on Developmental Disabilities shall appoint a subcommittee, which shall include members of the Kentucky Commission on Autism Spectrum Disorders, to monitor the implementation of the state plan as developed by the commission beginning October 1, 2006. The subcommittee shall prepare, and the council shall submit, the report as required under KRS 194A.622 (10).

➔Section 18. KRS 194A.146 is amended to read as follows:

- (1) There is hereby created the "Statewide Strategic Planning Committee for Children in Placement" which is administratively attached to the Department for Community Based Services. The committee shall be composed of the following:
 - (a) Members who shall serve by virtue of their positions: the secretary of the Cabinet for Health and Family Services or the secretary's designee, the commissioner of the Department for Public Health, the commissioner of the Department for **Behavioral Health, Developmental and Intellectual Disabilities** ~~[Mental Health and Mental Retardation Services]~~, the commissioner for the Department for Medicaid Services, the commissioner of the Department for Community Based Services, the commissioner of the Department of Juvenile Justice, the commissioner of the Department of Education, the executive director of the Administrative Office of the Courts, **the Senate co-chair of the Interim Joint Committee on Health and Welfare of the General Assembly, the House co-chair of the Interim Joint Committee on Health and Welfare of the General Assembly**, or their designees; and
 - (b) One (1) foster parent selected by the statewide organization for foster parents, one (1) District Judge selected by the Chief Justice of the Kentucky Supreme Court, one (1) parent of a child in placement at the time of appointment to be selected by the secretary of the Cabinet for Health and Family Services, one (1) youth in placement at the time of the appointment to be selected by the secretary of the Cabinet for Health and Family Services, ~~and~~ one (1) private child care provider selected by the statewide organization for private child care providers, **and one (1) private child-placing provider selected by the secretary of the Cabinet for Health and Family Services**. These members shall serve a term of two (2) years, and may be reappointed.
- (2) The Statewide Strategic Planning Committee for Children in Placement shall, by July 1, ~~2013~~~~[1999]~~, develop a statewide strategic plan for the coordination and delivery of care and services to children in placement and

their families. The plan shall be submitted to the Governor, the Chief Justice of the Supreme Court, and the Legislative Research Commission on or before July 1, ~~2013~~~~1999~~, and each July 1 thereafter.

- (3) The strategic plan shall, at a minimum, include:
 - (a) A mission statement;
 - (b) Measurable goals;
 - (c) Principles;
 - (d) Strategies and objectives; and
 - (e) Benchmarks.
- (4) The planning horizon shall be three (3) years. The plan shall be updated on an annual basis. Strategic plan updates shall include data and statistical information comparing plan benchmarks to actual services and care provided.
- (5) The Statewide Strategic Planning Committee for Children in Placement shall, in consultation with the commissioner and the statewide placement coordinator as provided for in KRS 199.801, establish a statewide facilities and services plan that identifies the location of existing facilities and services for children in placement, identifies unmet needs, and develops strategies to meet the needs. The planning horizon shall be ~~three (3)~~~~five (5)~~ years. The plan shall be updated on an annual basis. The plan shall be used to guide, direct, and, if necessary, restrict the development of new facilities and services, the expansion of existing facilities and services, and the geographic location of placement alternatives.
- (6) The Statewide Strategic Planning Committee for Children in Placement may, through the promulgation of administrative regulations, establish a process that results in the review and approval or denial of the development of new facilities and services, the expansion of existing facilities and services, and the geographic location of any facilities and services for children in placement in accordance with the statewide facilities and services plan. Any process established shall include adequate due process rights for individuals and entities seeking to develop new services, construct new facilities, or expand existing facilities, and shall require the involvement of local communities and other resource providers in those communities.
- (7) As a part of the statewide strategic plan, and in consultation with the Commonwealth Office of Technology, the Statewide Strategic Planning Committee for Children in Placement shall plan for the development or integration of information systems that will allow information to be shared across agencies and entities, so that relevant data will follow a child through the system regardless of the entity or agency that is responsible for the child. The data produced shall be used to establish and monitor the benchmarks required by subsection (3) of this section. The data system shall, at a minimum, produce the following information on a monthly basis:
 - (a) Number of placements per child;
 - (b) Reasons for placement disruptions;
 - (c) Length of time between removal and establishment of permanency;
 - (d) Reabuse or reoffense rates;
 - (e) Fatality rates;
 - (f) Injury and hospitalization rates;
 - (g) Health care provision rates;
 - (h) Educational achievement rates;
 - (i) Multiple placement rates;
 - (j) Sibling placement rates;
 - (k) Ethnicity matching rates;
 - (l) Family maintenance and preservation rate; and
 - (m) Adoption disruption rates.
- (8) *The Statewide Strategic Planning Committee for Children in Placement shall ensure that a study is conducted to evaluate the extent to which changes in the child welfare delivery model, to include contracting for a continuum of care and shared decision-making with private child-caring and child*

placing agencies, would enhance the effectiveness and outcomes for children served in the foster care system. The Statewide Strategic Planning Committee shall develop a report of its findings and recommendations which shall be included in the annual report due on or before July 1, 2013.

- (9) The Statewide Strategic Planning Committee for Children in Placement shall publish an annual report no later than December 1 of each year that includes, but is not limited to, the information outlined in subsection (7) of this section. ***The annual report shall be filed with the Governor and the Legislative Research Commission.***

➔Section 19. KRS 194A.540 is amended to read as follows:

The cabinet shall address child abuse, child neglect, domestic violence, rape, and sexual assault in a manner that includes but is not limited to:

- (1) ***Providing coordinative functions so that no services funded or provided by state government agencies are duplicative to ensure the greatest efficiency in the use of resources and funding, and to ensure that a consistent philosophy underlies all efforts undertaken by the administration in initiatives related to child abuse, child neglect, domestic violence, and rape or sexual assault;***
- (2) ***Providing training and consultation to programs provided or funded by the state which provide services to victims of child abuse, child neglect, domestic violence, rape or sexual assault, and other crimes;***
- (3) ***Working in conjunction with staff from the Justice and Public Safety Cabinet and other staff within the Cabinet for Health and Family Services, and with input from direct service providers throughout Kentucky, to develop standards of care for victim and offender services provided or funded by the state;***
- (4) ***Designing and implementing research programs which attend to the quality of victim-related services;***
- (5) ***Providing consultation on the development of budgets for the rape crisis, child abuse, child neglect, and domestic violence programs funded by the state;***
- (6) ***Providing recommendations to the Governor and to the secretaries of the Justice and Public Safety Cabinet and the Cabinet for Health and Family Services, related to the improvement and expansion of victim services provided or funded by those agencies;***
- (7) ***Undertaking new and progressive initiatives to improve and enhance the delivery of services to victims of child abuse, child neglect, domestic violence, and rape or sexual assault;***
- (8) ***Establishing that the commissioner of the Department for Community Based Services may, at the request of the Governor or any secretary, serve as a designee on boards, commissions, task forces, or other committees addressing child abuse, domestic violence, and rape or sexual assault;***
- (9)~~(1)~~ ***Establishing that*** the secretary for health and family services shall, in consultation with the applicable licensure boards, develop elder abuse, neglect, and exploitation-related and domestic violence-related training courses that are appropriate for the following professions:
 - (a) Mental health professionals licensed or certified under KRS Chapters 309, 319, and 335;
 - (b) Alcohol and drug counselors certified under KRS Chapter 309;
 - (c) Physicians who practice primary care, as defined in KRS 164.925, or who meet the definition of a psychiatrist under KRS 202A.011, and who are licensed under KRS Chapter 311;
 - (d) Nurses licensed under KRS Chapter 314;
 - (e) Paramedics certified under KRS Chapter 311;
 - (f) Emergency medical technicians certified under KRS Chapter 211; and
 - (g) Coroners as defined in KRS 72.405 and medical examiners as defined in KRS 72.240;~~(1)~~
- (10)~~(2)~~ ***Establishing that*** the courses ***identified in subsection (9) of this section*** shall include the dynamics of domestic violence and elder abuse, neglect, and exploitation; effects of domestic violence and elder abuse, neglect, and exploitation on adult and child victims; legal remedies for protection; lethality and risk issues; model protocols for addressing domestic violence and elder abuse, neglect, and exploitation; available community resources and victim services; and reporting requirements. The training shall be developed in consultation with legal, victim services, victim advocacy, and mental health professionals with an expertise in domestic violence and elder abuse, neglect, and exploitation; ~~and~~~~(1)~~

~~(11)(3)~~ **Establishing that** any health-care or mental health professional identified in subsection ~~(9)(1)~~ of this section shall successfully complete a three (3) hour training course that meets the requirements of subsection ~~(10)(2)~~ of this section. Health care or mental health professionals identified in subsection ~~(9)(1)~~ of this section who are granted licensure or certification after July 15, 1996, shall successfully complete the training within three (3) years of the date of initial licensure or certification.

➔Section 20. KRS 194A.622 is amended to read as follows:

- (1) There is hereby created the Kentucky Commission on Autism Spectrum Disorders, which shall consist of the following twenty-two (22) members who shall be initially appointed by July 1, 2005:
 - (a) The secretary of the Cabinet for Health and Family Services or his or her designee;
 - (b) The commissioner of the Department for Medicaid Services or his or her designee;
 - (c) The director of the Kentucky Early Intervention System, Department for Public Health, or his or her designee;
 - (d) The commissioner of the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~[Mental Health and Mental Retardation Services]~~ or his or her designee;
 - (e) The commissioner of the Department for Aging and Independent Living or his or her designee;
 - (f) The chair of the Council on Postsecondary Education or his or her designee;
 - (g) The director of the Division of Exceptional Children Services or his or her designee;
 - (h) The commissioner of the Department of Vocational Rehabilitation or his or her designee;
 - (i) The commissioner of the Department of Insurance or his or her designee;
 - (j) Two (2) nonvoting ex officio members from the House of Representatives, one (1) representing the majority party and one (1) representing the minority party, who shall be appointed by and serve at the pleasure of the Speaker of the House;
 - (k) Two (2) nonvoting ex officio members from the Senate, one (1) representing the majority party and one (1) representing the minority party, who shall be appointed by and serve at the pleasure of the President of the Senate;
 - (l) Four (4) professional ASD treatment providers, including at least one (1) mental health provider, one (1) physical health provider, and one (1) complex needs consultant from a special education cooperative, to be appointed by the Governor; and
 - (m) Five (5) parents, including three (3) who, at the time of their appointment to the commission, have a child with an ASD who is under eighteen (18) years of age and two (2) who, at the time of their appointment to the commission, have a child with an ASD who is eighteen (18) years of age or older, to be appointed by the Governor.
- (2) In making appointments to the commission, the Governor shall ensure broad representation of Kentucky's citizens who are concerned with the health and quality of life of individuals with an ASD, may appoint individuals who are also members of the **Commonwealth**~~[Kentucky]~~ Council on Developmental Disabilities, and shall consider candidates recommended by the Autism Spectrum Disorders Advisory Consortium of Kentucky.
- (3) Members shall serve without compensation but shall be reimbursed for their actual expenses incurred in the performance of commission duties in accordance with KRS 45.101 and administrative regulations promulgated thereunder. Members of the commission shall serve until the commission ceases to exist, a successor has been appointed, or until removed for good cause.
- (4) The Cabinet for Health and Family Services shall provide staff and administrative support for the commission.
- (5) The chair of the commission shall be designated by the Governor and may be a member in addition to those listed in subsection (1) of this section. The chair of the commission shall establish procedures for the commission's internal procedures.
- (6) The commission shall meet at least three (3) times per year. The commission shall also meet as often as necessary to accomplish its purpose upon the call of the chair, the request of four (4) or more members, or the request of the Governor.

- (7) The commission shall develop a comprehensive state plan for creating an integrated system of training, treatments, and services for individuals of all ages with an ASD. The commission shall utilize relevant data and research and consult with appropriate professionals, agencies, institutions, and organizations representing the private and public sectors, including the Kentucky Autism Training Center, to develop the state plan. The state plan shall include the following:
- (a) An assessment of the diverse needs for services and supports for individuals with an ASD;
 - (b) Identification of state, federal, private, and any other appropriate funding sources;
 - (c) Development of a comprehensive training plan, which shall include the Kentucky Autism Training Center, to meet training needs;
 - (d) An analysis of standards for provider training and qualifications, best practice standards for services, and the need for additional service providers;
 - (e) An evaluation of health benefit plans and insurance coverage for the treatment of ASD;
 - (f) A plan for the identification of individuals of all ages with an ASD and for the creation of a statewide ASD registry;
 - (g) An analysis of program and service eligibility criteria;
 - (h) An assessment of the need for coordinated, enhanced, and targeted special education and treatment programs for children with an ASD; and
 - (i) A timeline for implementing and monitoring the recommendations of the plan statewide. The timeline shall include input from the following:
 - 1. The Cabinet for Health and Family Services;
 - 2. The Department for Medicaid Services;
 - 3. The Department for Public Health;
 - 4. The Department for ***Behavioral Health, Developmental and Intellectual Disabilities*** [~~Mental Health and Mental Retardation Services~~];
 - 5. The Kentucky Early Intervention System;
 - 6. The Division of Exceptional Children Services;
 - 7. The Department of Vocational Rehabilitation;
 - 8. The Department of Insurance;
 - 9. The Department of Education;
 - 10. The Council on Postsecondary Education; and
 - 11. Other appropriate agencies, professionals, institutions, and organizations representing the public and private sectors, including the Kentucky Autism Training Center.
- (8) Based upon the comprehensive state plan for an integrated system of training, treatment, and services for individuals of all ages with an ASD, the commission shall make recommendations regarding legislation, administrative regulations, and policies to the Governor and the General Assembly on the following:
- (a) Needs for services and supports for individuals who have an ASD;
 - (b) Funding needs and sources, including state, federal, private, and any other appropriate funding sources;
 - (c) Training needs and a plan to implement a comprehensive training system, which shall include the Kentucky Autism Training Center;
 - (d) Standards for provider training and qualifications, best practice standards for services, and the need for additional providers;
 - (e) Goals for developing health benefit plans that provide insurance coverage for the treatment of ASD;
 - (f) A plan for the identification of individuals of all ages with an ASD and for the creation of a statewide ASD registry;
 - (g) Consistent program and service eligibility criteria;

- (h) The need for coordinated, enhanced, and targeted special education and treatment programs for individuals with an ASD; and
 - (i) Strategies and timelines for establishing an accountable, cost-efficient, and cooperative system of services that integrates and builds upon existing public and private agencies, programs, and resources.
- (9) The commission shall submit the comprehensive state plan and recommendations to the Governor, the ~~Commonwealth~~~~[Kentucky]~~ Council on Developmental Disabilities, and the Legislative Research Commission by October 1, 2006, at which time the commission shall cease to exist unless reauthorized by the General Assembly.
- (10) The ~~Commonwealth~~~~[Kentucky]~~ Council on Developmental Disabilities shall appoint a subcommittee, which shall include members of the commission, to monitor the implementation of the state plan as developed by the commission beginning October 1, 2006. The subcommittee shall prepare, and the council shall submit, a report to the Governor and Legislative Research Commission that assesses progress in the implementation of the state plan and that makes recommendations on the need for modifications to the state plan as developed by the Kentucky Commission on Autism Spectrum Disorders. The subcommittee shall prepare, and the council shall submit, the report as it deems appropriate, but no less than biennially, until October 1, 2015.

➔Section 21. KRS 194A.709 is amended to read as follows:

- (1) The department shall report to the Division of Health Care~~[Facilities and Services]~~ any alleged or actual cases of health services being delivered by the staff of an assisted-living community.
- (2) An assisted-living community shall have written policies on reporting and recordkeeping of alleged or actual cases of abuse, neglect, or exploitation of an adult under KRS 209.030. The only requisite components of a recordkeeping policy are the date and time of the report, the reporting method, and a brief summary of the alleged incident.
- (3) Any assisted-living community staff member who has reasonable cause to suspect that a client has suffered abuse, neglect, or exploitation shall report the abuse, neglect, or exploitation under KRS 209.030.

➔Section 22. KRS 200.505 is amended to read as follows:

There is hereby created a State Interagency Council for Services to Children with an Emotional Disability. The ~~chairperson~~~~[chairman]~~ of the council shall be designated by the Governor and shall establish procedures for the council's internal procedures.

- (1) This council shall be composed of the following:
 - (a) Members who shall serve by virtue of their positions: the commissioner of the Department of Education, the commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~, the commissioner of the Department for Community Based Services, the commissioner of the Department for Public Health, the commissioner of the Department for Medicaid Services, the commissioner of the Department of Juvenile Justice, the director of the Division of Family Resource and Youth Services Centers, ***the executive director of the Commission for Children with Special Health Care Needs***, and the general manager of the Division of Juvenile Services of the Administrative Offices of the Courts, or their designees;~~[and]~~
 - (b) The Governor shall appoint one (1) parent of a child with an emotional disability, who is a consumer of state-funded services for children with an emotional disability to serve as a member of the council, and one (1) parent who meets the same criteria to serve as the parent member's alternate to serve in the absence of the parent member. For each appointment to be made, the State Family Advisory Council shall submit to the Governor a list of two (2) names of parents who are qualified for appointment from which list the Governor shall make the appointment. Appointees shall serve a term of four (4) years. If the child of the parent member or alternate parent member ceases to be a consumer of state-funded services for children with an emotional disability during the term of appointment, the member shall be eligible to serve out the remainder of the term of appointment. The alternate parent member may attend and participate in all council meetings but shall vote only in the absence of the parent member. The parent member and alternate parent member shall receive no compensation in addition to that which they may already receive as service providers or state employees, but the parent member and alternate parent member shall be reimbursed for expenses incurred through the performance of their duties as council members;

- (c) *The chairperson of the council shall appoint one (1) youth between the ages of fourteen (14) and twenty-five (25), who has a mental health disorder or co-occurring disorder and is or has been a consumer of state-funded services for children with an emotional disability, to serve as a member of the council, and one (1) youth who meets the same criteria to serve as the youth member's alternate in the absence of the youth member. For each appointment to be made, the Statewide Youth Council of the Kentucky Partnership for Families and Children shall submit to the chairperson a list of four (4) names of youth who are qualified for appointment, from which list the chairperson shall make the appointment. Appointees shall serve a term of two (2) years, and the youth member and the youth member's alternate shall be eligible to serve out the remainder of their term of appointment regardless of age. The alternate youth member may attend and participate in all council meetings but shall vote only in the absence of the youth member. The youth member and alternate youth member shall receive no compensation in addition to that which they may already receive as service providers or state employees, but the youth member and alternate youth member shall be reimbursed for expenses incurred through the performance of their duties as council members; and*
- (d) *At the end of a term, a member shall continue to serve until a successor is appointed.*
- (2) The State Interagency Council for Services to Children with an Emotional Disability shall:
- (a) Consider issues and make recommendations annually to the Governor and the Legislative Research Commission regarding the provision of services for children with an emotional disability;
 - (b) Direct each regional interagency council to coordinate services to children with an emotional disability and identify factors contributing to a lack of coordination;
 - (c) Develop a form to be signed by the parent or other legal guardian of a child referred for services to any interagency council for children with an emotional disability. The form shall enable the agencies involved with the child to share information about the child as necessary to identify and provide services for the child;
 - (d) Review service and treatment plans for children for whom reviews are requested, and provide any advice and assistance that the state council determines to be necessary to meet the needs of children with an emotional disability referred by regional councils;
 - (e) Assess the effectiveness of regional councils in meeting the service needs of children with an emotional disability;
 - (f) Establish a uniform grievance procedure for the state, to be implemented by each regional interagency council. Appeals may be initiated by the child, parent, guardian, person exercising custodial control or supervision, or other authorized representative about matters relating to the interagency service plan for the child or the denial of services by the regional interagency council. Upon appeal, an administrative hearing shall be conducted in accordance with KRS Chapter 13B;
 - (g) Meet at least monthly and maintain records of meetings, except that records that identify individual children shall only be disclosed as provided by law;
 - (h) Adopt interagency agreements as necessary for coordinating services to children with an emotional disability by the agencies represented in the state council;
 - (i) Develop services to meet the needs of children with an emotional disability; and
 - (j) Promote services to prevent the emotional disability of a child.
- (3) The State Interagency Council for Services to Children with an Emotional Disability may promulgate administrative regulations necessary to comply with the requirements of KRS 200.501 to 200.509.

➔Section 23. KRS 200.658 is amended to read as follows:

- (1) There is hereby created the Kentucky Early Intervention System Interagency Coordinating Council to be comprised of twenty-five (25) members to be appointed by the Governor to serve a term of three (3) years. The members of the council shall be geographically and culturally representative of the population of the Commonwealth and conform to the requirements of federal law and regulations. For administrative purposes, the council shall be attached to the Early Childhood Development Authority. Pursuant to federal law and regulations, the membership shall be as follows:
- (a) At least five (5) members shall be the parents, including minority parents, of a child with a disability who is twelve (12) years of age or less, with at least one (1) being the parent of a child six (6) years of

- age or less. Each parent shall have knowledge of or experience with programs for infants and toddlers with disabilities;
- (b) At least five (5) members shall be public or private providers of early intervention services to infants and toddlers with disabilities;
 - (c) At least one (1) member shall be a member of the Kentucky General Assembly;
 - (d) At least one (1) member shall be representative of an entity responsible for personnel preparation and may include personnel from an institution of higher education or preservice training organization;
 - (e) At least one (1) member shall be the commissioner or individual serving in a position of equivalent authority, or the designee, from the Department for Public Health;
 - (f) At least one (1) member shall be the commissioner or individual serving in a position of equivalent authority, or the designee, from the Department for Medicaid Services;
 - (g) At least one (1) member shall be the commissioner or individual serving in a position of equivalent authority, or the designee, from the Department for **Behavioral Health, Developmental and Intellectual Disabilities** ~~(Mental Health and Mental Retardation Services)~~;
 - (h) At least one (1) member shall be the commissioner or individual serving in a position of equivalent authority, or the designee, from the Department for Community Based Services;
 - (i) At least one (1) member shall be the commissioner or designee of the Department of Education;
 - (j) At least one (1) member shall be the commissioner or designee of the Department of Insurance;
 - (k) At least one (1) member shall be a representative of the Commission for Children with Special Health Care Needs;
 - (l) At least one (1) member shall be a representative for the Head Start program; and
 - (m) At least one (1) member shall be a representative of the Education of Homeless Children and Youth program.
- (2) In matters concerning the Kentucky Early Intervention System, the council shall advise and assist the cabinet in areas, including but not limited to the following:
- (a) Development and implementation of the statewide system and the administrative regulations promulgated pursuant to KRS 200.650 to 200.676;
 - (b) Achieving the full participation, coordination, and cooperation of all appropriate entities in the state, including, but not limited to, individuals, departments, and agencies, through the promotion of interagency agreements;
 - (c) Establishing a process to seek information from service providers, service coordinators, parents, and others concerning the identification of service delivery problems and the resolution of those problems;
 - (d) Resolution of disputes, to the extent deemed appropriate by the cabinet;
 - (e) Provision of appropriate services for children from birth to three (3) years of age;
 - (f) Identifying sources of fiscal and other support services for early intervention programs;
 - (g) Preparing applications to Part C of the Federal Individuals with Disabilities Education Act (IDEA) and any amendments to the applications;
 - (h) Transitioning of infants and toddlers with disabilities and their families from the early intervention system to appropriate services provided under Part B of the Federal Individuals with Disabilities Education Act (IDEA) operated by the state Department of Education; and
 - (i) Developing performance measures to assess the outcomes for children receiving services.
- (3) The council shall prepare no later than December 30 of each year an annual report on the progress toward and any barriers to full implementation of the Kentucky Early Intervention System for infants and toddlers with disabilities and their families. The report shall include recommendations concerning the Kentucky Early Intervention System, including recommendations of ways to improve quality and cost effectiveness, and shall be submitted to the Governor, Legislative Research Commission, and the Secretary of the United States Department of Education.

- (4) No member of the council shall cast a vote on any matter which would provide direct financial benefit to that member or otherwise give the appearance of the existence of a conflict of interest.

➔Section 24. KRS 202A.271 is amended to read as follows:

Each public or private hospital, other than a state-operated or contracted mental hospital or institution, which provides services under KRS 202A.008, 202A.011, 202A.028, 202A.041, 202A.051, 202A.071, 202A.081, 202A.101, 202A.141, 202A.241, 202A.251, 202A.261, 202A.271, 202B.170, 202B.200, 387.540, 504.085, 600.020, 645.020, 645.120, and 645.280 shall be paid for the services at the same rates the hospital negotiates with the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~{Mental Health and Mental Retardation Services}~~ or the regional community mental health and mental retardation program.

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

- (1) *As used in this section, "IMPACT Plus Program" means the program of community-based behavioral health services provided to an eligible IMPACT Plus recipient through an agreement between the Department for Medicaid Services and the Department for Public Health as the state agency for the federal Title V, Maternal and Child Health Services Block Grant, 42 U.S.C. secs. 701-710.*
- (2) *Before the Cabinet for Health and Family Services performs a program audit, evaluation, or review of an IMPACT Plus Program provider, the cabinet shall provide the provider with a copy of the criteria to be used in the audit, evaluation, or review. A copy of the findings, including a list of any deficiencies, shall be sent to the provider within sixty (60) calendar days from the first day the audit, evaluation, or review starts.*

➔Section 26. KRS 205.470 is amended to read as follows:

- (1) As used in this section, "aging caregiver" means an individual age sixty (60) or older who provides care for an individual with an intellectual disability or other developmental disability.
- (2) If state, federal, or other funds are available, the Kentucky Department for **Aging and Independent Living**~~{Mental Health and Mental Retardation Services}~~ shall, in cooperation with the Department for **Behavioral Health, Development and Intellectual Disabilities**~~{Aging and Independent Living}~~ and the Department for Medicaid Services, establish a centralized resource and referral center designed as a one-stop, seamless system to provide aging caregivers with information and assistance with choices and planning for long-term supports for individuals with an intellectual disability or developmental disability.
- (3) The center created in subsection (2) of this section shall provide but not be limited to the following services:
- (a) Comprehensive information on available programs and services, including but not limited to:
1. Residential services;
 2. Employment training;
 3. Supported employment;
 4. Behavioral support;
 5. Respite services;
 6. Adult day health or adult day social services;
 7. Support coordination;
 8. Home or environmental modifications;
 9. Community living services, including an attendant, and assistance with homemaking, shopping, and personal care;
 10. Support groups in the community;
 11. Psychiatric services;
 12. Consumer-directed options;
 13. Attorneys or legal services to assist with will preparation; and
 14. The impact of inheritance on government benefits and options, including establishing a special needs trust;
- (b) Printed material and Internet-based information related to:

1. Options for future planning;
 2. Financial and estate planning;
 3. Wills and trusts; and
 4. Advance directives and funeral and burial arrangements; and
- (c) Referral to community resources.
- (4) The center created in subsection (2) of this section shall operate a toll-free number at least during regular business hours and shall publish information required in paragraph (a) of subsection (3) of this section and a description of services provided by the center on a cabinet Web site.
 - (5) The center created in subsection (2) of this section shall make the information listed in subsection (3) of this section available to the support broker and any representative of an individual who is participating in a Medicaid consumer-directed option.
 - (6) The center shall use electronic information technology to track services provided and to follow-up with individuals served and provide additional information or referrals as needed.
 - (7) The department may contract with a private entity to provide the services required under subsections (2) and (3) of this section.
 - (8) The cabinet may provide services identified in subsection (3) of this section to individuals of any age who are caregivers of individuals with *an intellectual disability* ~~mental retardation~~ or developmental disability.
 - (9) Prior to January 1, 2008, the department shall submit a report to the Interim Joint Committee on Health and Welfare that includes but is not limited to the following information:
 - (a) The number of individuals who contacted the center;
 - (b) A description of the categories of questions asked by individuals calling the center; and
 - (c) A summary of the services provided, including the community resources to which individuals were referred.

➔Section 27. KRS 205.564 is amended to read as follows:

- (1) The Pharmacy and Therapeutics Advisory Committee is established and attached to the Department for Medicaid Services for administrative purposes.
- (2) The committee shall have fifteen (15) members, as follows:
 - (a) Thirteen (13) voting members who shall be physicians currently participating in the Medicaid program who may legally prescribe a broad range of scheduled and nonscheduled drugs, as categorized by the U.S. Drug Enforcement Administration, or pharmacists who dispense prescriptions to Medicaid recipients, as follows:
 1. Three (3) licensed, practicing family practice physicians;
 2. Two (2) licensed, practicing physicians who are pediatricians;
 3. One (1) licensed, practicing physician who is an obstetrician/gynecologist or gynecologist;
 4. One (1) licensed, practicing internal medicine physician who is a primary care provider;
 5. One (1) licensed, practicing physician from any medical specialty;
 6. Two (2) licensed, practicing physicians who are psychiatrists, one (1) who is a practicing psychiatrist in a community mental health center and one (1) from either the School of Medicine, University of Louisville, or the College of Medicine, University of Kentucky; and
 7. Three (3) licensed, practicing pharmacists; and
 - (b) Two (2) nonvoting members, as follows:
 1. The medical director of the department; and
 2. A representative of the department's pharmacy program, as designated by the commissioner.
- (3) One (1) voting committee member shall be appointed, and may be reappointed, by the Governor from a list of three (3) nominees received from the President of the Senate, and one (1) voting committee member shall be

appointed, and may be reappointed, by the Governor from a list of three (3) nominees received from the Speaker of the House of Representatives. The remaining eleven (11) voting committee members shall be appointed, and may be reappointed, by the Governor from a list of nominees submitted by the department. Terms of the voting committee members shall be three (3) years with no members serving more than two (2) consecutive terms *except that a member may continue to serve his or her term until a successor is appointed.*

- (4) The Pharmacy and Therapeutics Advisory Committee shall:
 - (a) Act in an advisory capacity to the Governor, the secretary of the Cabinet for Health and Family Services, and the Medicaid commissioner on the development and administration of an outpatient drug formulary;
 - (b) Perform drug reviews and make recommendations to the *commissioner*~~{secretary}~~ regarding specific drugs or drug classes to be placed on prior authorization or otherwise restricted, as determined through a process established by the cabinet;
 - (c) Provide for an appeals process to be utilized by a person or entity that disagrees with recommendations of the committee;
 - (d) Establish bylaws or rules for the conduct of committee meetings; and
 - (e) Function in accordance with the Kentucky Open Meetings Law and the Kentucky Open Records Law.
- (5) Voting members of the committee shall elect a chair and vice chair by majority vote. A quorum shall consist of eight (8) voting members of the committee.
- (6) The committee shall meet every other month for a total of at least six (6) times per *calendar* year or upon the call of the chair, *the commissioner*, the secretary of the Cabinet for Health and Family Services, or the Governor. The Department for Medicaid Services shall post the agenda on its Web site no later than fourteen (14) days prior to the date of a regularly scheduled meeting and no later than seventy-two (72) hours prior to the date of a specially called meeting. Options, including any recommendations, by the department for drug review or drug review placement shall be posted on the department's Web site no later than seven (7) days prior to the date of the next regularly scheduled meeting and as soon as practicable prior to the date of the next specially called meeting.
- (7) Members of the committee shall receive no compensation for service, but shall receive necessary and actual travel expenses associated with attending meetings.
- (8) Any recommendation of the committee to the *commissioner*~~{secretary of the Cabinet for Health and Family Services}~~ shall be posted to the Web site of the Department for Medicaid Services within seven (7) days of the date of the meeting at which the recommendation was made.
- (9) A recommendation of the committee shall be submitted to the *commissioner*~~{secretary}~~ for a final determination. If the *commissioner*~~{secretary}~~ does not accept the recommendation of the committee, the *commissioner*~~{secretary}~~ shall present the basis for the final determination at the next scheduled meeting of the committee. The *commissioner*~~{secretary}~~ shall act on the committee's recommendation within thirty (30) days of the date that the recommendation was posted on the Web site.
- (10) Any interested party may request and may be permitted to make a presentation to the board on any item under consideration by the board. The Cabinet for Health and Family Services shall, by administrative regulation promulgated under KRS Chapter 13A, establish requirements for any presentation made to the board.
- (11) The *commissioner's*~~{secretary's}~~ final determination shall be posted on the Web site of the Department for Medicaid Services.
- (12) Any appeal from a decision of the *commissioner*~~{secretary}~~ shall be made in accordance with KRS Chapter 13B, except that the time for filing an appeal shall be within thirty (30) days of the date of the posting of the *commissioner's*~~{secretary's}~~ final determination on the Web site of the Department for Medicaid Services.
- (13) The Cabinet for Health and Family Services shall promulgate an administrative regulation in accordance with KRS Chapter 13A to implement the provisions of this section.

➔Section 28. KRS 205.590 is amended to read as follows:

- (1) The following technical advisory committees shall be established for the purpose of acting in an advisory capacity to the council with respect to the administration of the medical assistance program and in performing the function of peer review:

- (a) A Technical Advisory Committee on Physician Services consisting of five (5) physicians appointed by the council of the Kentucky State Medical Association;
- (b) A Technical Advisory Committee on Hospital Care consisting of five (5) hospital administrators appointed by the board of trustees of the Kentucky Hospital Association;
- (c) A Technical Advisory Committee on Dental Care consisting of five (5) dentists appointed by the Kentucky Dental Association;
- (d) A Technical Advisory Committee on Nursing Service consisting of five (5) nurses appointed by the board of directors of the Kentucky State Association of Registered Nurses;
- ~~(e) A Technical Advisory Committee on Drugs consisting of five (5) pharmacists appointed by the Kentucky Pharmacists Association;~~
- ~~(f) A Technical Advisory Committee on Nursing Home Care consisting of six (6) members of which five (5) members shall be appointed by the Kentucky Association of Health Care Facilities, and one (1) member shall be appointed by the Kentucky Association of Nonprofit Homes and Services for the Aging, Inc.;~~
- ~~(g) A Technical Advisory Committee on Optometric Care consisting of five (5) members appointed by the Kentucky Optometric Association;~~
- ~~(h) A Technical Advisory Committee on Podiatric Care consisting of five (5) podiatrists appointed by the Kentucky Podiatry Association;~~
- ~~(i) A Technical Advisory Committee on Primary Care consisting of five (5) primary care providers, two (2) of whom shall represent licensed health maintenance organizations, appointed by the Governor, until such time as an association of primary care providers is established, whereafter the association shall appoint the members;~~
- ~~(j) A Technical Advisory Committee on Home Health Care consisting of five (5) members appointed by the board of directors of the Kentucky Home Health Association;~~
- ~~(k) A Technical Advisory Committee on Consumer Rights and Client Needs consisting of five (5) members, with one (1) member to be appointed by each of the following organizations: the Kentucky Combined Committee on Aging, the Kentucky Legal Services Corporation, the Kentucky Association for Retarded Citizens, the Department of Public Advocacy, and the National Association of Social Workers-Kentucky Chapter;~~
- ~~(l) A Technical Advisory Committee on Behavioral Health consisting of six (6) members, with one (1) member to be appointed by each of the following organizations: the Kentucky Mental Health Coalition, the Kentucky Association of Regional Mental Health and Mental Retardation Programs, the National Alliance on Mental Illness (NAMI) Kentucky, a statewide mental health consumer organization, the People Advocating Recovery (PAR), and the Kentucky Brain Injury Alliance;~~
- ~~(m) A Technical Advisory Committee on Children's Health consisting of ten (10) members, with one (1) member to be appointed by each of the following organizations: the Kentucky Chapter of the American Academy of Pediatrics, the Kentucky PTA, the Kentucky Psychological Association, the Kentucky School Nurses Association, the Kentucky Association for Early Childhood Education, the Family Resource and Youth Services Coalition of Kentucky, the Kentucky Youth Advocates, the Kentucky Association of Hospice and Palliative Care, a parent of a child enrolled in Medicaid or the Kentucky Children's Health Insurance Program appointed by the Kentucky Head Start Association, and a pediatric dentist appointed by the Kentucky Dental Association;~~
- ~~(n) A Technical Advisory Committee on Intellectual and Developmental Disabilities consisting of nine (9) members, one (1) of whom shall be a consumer who participates in a nonresidential community Medicaid waiver program, one (1) of whom shall be a consumer who participates in a residential community Medicaid waiver program, one (1) of whom shall be a consumer representative of a family member who participates in a community Medicaid waiver program, and one (1) of whom shall be a consumer representative of a family member who resides in an ICF/MR facility that accepts Medicaid payments, all of whom shall be appointed by the Governor; one (1) member shall be appointed by the Arc of Kentucky; one (1) member shall be appointed by the ~~Commonwealth of Kentucky~~ Council on Developmental Disabilities; one (1) member shall be appointed by the Kentucky Association of Homes and Services for the Aging; and two (2) members shall be appointed by the Kentucky Association of~~

Private Providers, one (1) of whom shall be a nonprofit provider and one (1) of whom shall be a for-profit provider; and

(n) ~~(e)~~ A Technical Advisory Committee on Therapy Services consisting of six (6) members, two (2) of whom shall be occupational therapists and shall be appointed by the Kentucky Occupational Therapists Association, two (2) of whom shall be physical therapists and shall be appointed by the Kentucky Physical Therapy Association, and two (2) of whom shall be speech therapists and shall be appointed by the Kentucky Speech-Language-Hearing Association.

- (2) The members of the technical advisory committees shall serve until their successors are appointed and qualified.
- (3) Each appointive member of a committee shall serve without compensation but shall be entitled to reimbursement for actual and necessary expenses in carrying out his duties with reimbursement for expenses being made in accordance with state regulations relating to travel reimbursement.

➔Section 29. KRS 205.6336 is amended to read as follows:

- (1) The secretary of the Finance and Administration Cabinet, after consultation with the secretary for the Cabinet for Health and Family Services, shall on a quarterly basis, certify to the Interim Committee on Appropriations and Revenue the general fund savings realized from the procedures required by KRS 205.6310 to 205.6332 and any other procedures adopted by the Cabinet for Health and Family Services to control the cost of health care.
- (2) The certification shall indicate the following:
 - (a) The means by which savings were achieved, including a description of the discrete procedure used to achieve the savings; and
 - (b) The amount saved as a result of the specific procedure, including an explanation as to the calculations and assumptions used in determining the amount.
- (3) The amount certified by the secretary under this section shall be transferred to a trust account to be utilized by the secretary of the Cabinet for Health and Family Services to provide health-care coverage for additional categories of citizens, but the funds in the trust account shall not be spent until appropriated by the General Assembly. The funds in the trust account shall not lapse. The secretary shall give priority in utilizing any appropriated trust account funds to matching available federal funds in the Medicaid program.
- (4) Savings in the general fund appropriation for the Medicaid program shall be determined as follows:
 - (a) To the extent that the average cost per month per eligible actually experienced by the Medicaid program is less than the average cost per month per eligible reflected in the enacted budget, the savings attributable to that difference shall be deemed to be eligible for certification under this section.
 - (b) To the extent that the number of eligibles actually participating in the Medicaid program is less than the number reflected in the enacted budget, the savings attributable to that difference shall be deemed not eligible for certification under this section.
- (5) Savings in the general fund appropriation to the Department for **Behavioral Health, Developmental and Intellectual Disabilities** ~~[Mental Health and Mental Retardation Services]~~ shall be determined by certifying the amount of Medicaid payments received by the department and the entities it funds that would not have been received under the eligibility requirements for the Medicaid program in effect for the 1993-1994 fiscal year.
- (6) Savings in the general fund appropriation to the Department for Public Health shall be determined by certifying the amount of Medicaid payments received by the department and the entities it funds that would not have been received under the eligibility requirements for the Medicaid program in effect for the 1993-1994 fiscal year.
- (7) Savings in the general fund appropriation to the Department for Community Based Services shall be determined by certifying the amount of Medicaid payments received by the department and the entities it funds that would not have been received under the eligibility requirements for the Medicaid program in effect for the 1993-1994 fiscal year.
- (8) Only those savings that can be certified as being recurring shall be transferred to the trust fund.

➔Section 30. KRS 205.712 is amended to read as follows:

- (1) The ***Department for Income***~~[Division of Child]~~ Support, ***Child Support Enforcement***, is established in the Cabinet for Health and Family Services.
- (2) The duties of the ***Department for Income***~~[Division of Child]~~ Support, ***Child Support Enforcement***, or its designee, shall include:
- (a) Serve as state agency authorized to administer Part D of Title IV of the Social Security Act, 42 U.S.C. secs. 651 to 669;
 - (b) Serve as the information agency as provided in the Uniform Interstate Family Support Act, KRS Chapter 407;
 - (c) Serve as collector of all court-ordered or administratively ordered child support payments pursuant to Part D of Title IV of the Social Security Act;
 - (d) Serve as the agent for enforcement of international child support obligations, and respond to requests from foreign reciprocating countries;
 - (e) Establish and enforce an obligation upon receipt of a completed, notarized voluntary acknowledgment-of-paternity form;
 - (f) Enforce Kentucky child support laws, including collection of court-ordered or administratively ordered child support arrearages and prosecution of persons who fail to pay child support;
 - (g) Publicize the availability of services and encourage the use of these services for establishing paternity and child support;
 - (h) Pay the cost of genetic testing to establish paternity, subject to recoupment from the alleged father, when paternity is administratively or judicially determined; and obtain additional testing when an original test is contested, upon request and advance payment by the contestant;
 - (i) Establish child support obligations and seek modification of judicially or administratively established child support obligations in accordance with the child support guidelines of the Commonwealth of Kentucky as provided under KRS 403.212;
 - (j) Administratively establish child support orders which shall have the same force and effect of law;
 - (k) Issue an administrative subpoena to secure public and private records of utility and cable companies and asset and liability information from financial institutions for the establishment, modification, or enforcement of a child support obligation;
 - (l) Impose a penalty for failure to comply with an administrative subpoena;
 - (m) Provide notices, copies of proceedings, and determinations of support amounts to any parties or individuals who are applying for or receiving Title IV-D services, or who are parties to cases in which Title IV-D services are being provided;
 - (n) Issue interstate administrative subpoenas to any individual or entity for financial or other information or documents which are needed to establish, modify, or enforce a child support obligation pursuant to Part D of Title IV of the Social Security Act, 42 U.S.C. secs. 651 et seq. An administrative subpoena lawfully issued in another state to an individual or entity residing in this state shall be honored and enforced in the Circuit Court where the individual or entity resides; and
 - (o) May promulgate administrative regulations to implement this section and adopt forms or implement other requirements of federal law relating to interstate administrative subpoenas.
- (3) Effective September 30, 1999, the cabinet shall establish a system to receive and process all child support payments. The system shall include existing computer systems to record the payments. The automated system shall include a state case registry that contains records with respect to each case in which services are being provided by the cabinet and each child support order established or modified in the state on or after October 1, 1998.
- (4) The cabinet shall establish and operate a state disbursement unit for the collection, disbursement, and recording of payments under support orders for all Title IV-D cases and for all cases initially issued in the state on or after January 1, 1994, in which a wage withholding has been court-ordered or administratively ordered, pursuant to Part D of Title IV of the Social Security Act. Establishment of the state unit may include the designation and continuation of existing local collection units to aid efficient and effective collection, disbursement, and recording of child support payments.

- (5) After the establishment of the disbursement unit child support collection system, the cabinet or its designee shall serve as collector of all court-ordered or administratively ordered child support payments pursuant to Part D of Title IV of the Social Security Act.
- (6) Where establishment of paternity and enforcement and collection of child support is by law the responsibility of local officials, the cabinet shall refer cases to the appropriate official for such action. The cabinet may enter into cooperative arrangements with appropriate courts and law enforcement officials to assist the cabinet in administering the program of child support recovery, including the entering into of financial arrangements with such courts and officials as provided for under the provisions of federal law and regulations. The local county attorney shall be considered the designee of the cabinet for purposes of administering the program of child support recovery within a county, subject to the option of the county attorney to decline such designation. Nothing in this section shall prevent the secretary from taking such action, with prior written notice, as appropriate if the terms and conditions of the cooperative agreement are not met. When a cooperative agreement with a contracting official is canceled for good cause, the cabinet may not offer that cooperative agreement to that official during the official's tenure.
- (7) Where the local county attorney, friend of the court, domestic relations agent, or other designee of the cabinet has been contracted for the purpose of administering child support enforcement pursuant to Title IV-D of the Social Security Act, the contracting official shall be deemed to be representing the cabinet and as such does not have an attorney-client relationship with the applicant who has requested services pursuant to Title IV-D of the Social Security Act nor with any dependent on behalf of the individuals for whom services are sought.
- (8) The cabinet shall determine the name of each obligor who owes an arrearage of at least two thousand five hundred dollars (\$2,500). After notification to the obligor owing an arrearage amount of two thousand five hundred dollars (\$2,500), the cabinet shall transmit to the United States secretary of health and human services the certified names of the individuals and supporting documentation for the denial, revocation, or limitation of the obligor's passport. The cabinet shall notify the identified obligor of the determination and the consequences and provide an opportunity to contest the determination.
- (9) The cabinet shall determine the name of an obligor owing an arrearage and shall indefinitely deny, suspend, or revoke a license or certification that has been issued if the person has a child support arrearage that equals or exceeds the amount that would be owed after six (6) months of nonpayment or fails, after receiving appropriate notice, to comply with subpoenas or warrants relating to paternity or child support proceedings as provided by 42 U.S.C. sec. 666(a)(16).
- (10) The cabinet shall forward the name of the individual to a board of licensure or board of certification for the notification of the denial, revocation, or suspension of a driver's license, professional license or certification, occupational license or certification, recreational license, or sporting license.
- (11) The denial or suspension shall remain in effect until the child support arrearage has been eliminated or payments on the child support arrearage are being made in accordance with a court or administrative order, the person complies with the subpoena or warrant relating to paternity or child support proceedings, or the appeal of the denial or suspension is upheld and the license is reinstated.
- (12) Except for cases administered by the cabinet under 42 U.S.C. secs. 651 et seq. which shall be afforded the appeal process set forth by KRS 405.450(3), an individual who has a license or certification denied, revoked, or suspended shall have the right to appeal to the licensing or certifying board.
- (13) A dispute hearing shall be conducted by the cabinet in accordance with KRS 405.450. The only basis for a dispute hearing shall be a mistake in fact.
- (14) The cabinet shall in its discretion enter into agreements with financial institutions doing business in the Commonwealth to develop and operate, in coordination with the financial institutions, a data match system *as required by KRS 205.772 to 205.778*~~]. The financial institution shall be required to provide identifying information for each obligated parent who maintains an account at the institution and owes an arrearage, and who shall be identified by the cabinet. Assets held by the institutions on behalf of any obligated parent who is subject to a child support lien pursuant to KRS 205.745 shall be encumbered or surrendered in response to a notice of lien or levy issued by the cabinet. The cabinet may pay a reasonable fee to a financial institution for conducting the data match, not to exceed the actual cost. The financial institution shall not be liable for encumbering or surrendering any assets held by the financial institution in response to a notice of lien or levy issued by the cabinet or for any other action taken in good faith to comply with the requirements of this subsection~~].

- (15) The cabinet may issue both intrastate and interstate administrative subpoenas to any individual or entity for financial or other information or documents that are needed to establish, modify, or enforce a child support obligation pursuant to Title IV-D of the Social Security Act, 42 U.S.C. secs. 651 et seq. An administrative subpoena lawfully issued in another state to an individual or entity in this state shall be honored and enforced in the Circuit Court of the county in which the individual or entity resides.
- (16) The Cabinet for Health and Family Services shall forward to the Office of the Attorney General a list of names of delinquent obligors and, in cooperation with the Office of the Attorney General, shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement KRS 15.055.
- (17) The cabinet shall compare a quarterly report provided by the Finance and Administration Cabinet of all tort claims made against the state by individuals with the child support database to match individuals who have a child support arrearage and may receive a settlement from the state.
- (18) The cabinet shall prepare and distribute to the cabinet's designee for the administration of the child support program information on child support collections and enforcement. The information shall include a description of how child support obligations are:
- Established;
 - Modified;
 - Enforced;
 - Collected; and
 - Distributed.
- (19) The cabinet's designee for the administration of the child support program shall distribute, when appropriate, the following:
- Information on child support collections and enforcement; and
 - Job listings posted by employment services.

➔Section 31. KRS 205.778 is amended to read as follows:

- When the cabinet determines that the name, record address, and either Social Security number or taxpayer identification number of an account with a financial institution matches the name, record address, and either the Social Security number or taxpayer identification number of a ~~noncustodial~~ parent who owes past-due support ***in an amount equal to or greater than one (1) month's obligation***, a lien or levy shall, subject to the provision of subsection (3) of this section, arise against the assets in the account at the time of receipt of the notice by the financial institution at which the account is maintained. The cabinet shall provide a notice of the match, the lien or levy arising therefrom, and the action to be taken to ~~surrender~~~~block~~ or encumber the account with the lien or levy for child support payment to the individual identified and the financial institution holding the account. The financial institution shall have no obligation to hold, encumber, or surrender assets in any account based on a match until ***receipt of the notice from the cabinet***~~it is served with a notice of lien or order to withhold and deliver~~.
- The cabinet shall provide notice to the individual subject to a child support lien or levy on assets in an account held by a financial institution ~~by sending them a notice of the lien or levy to withhold and deliver~~ within two (2) business days of the date that notice is sent to the financial institution.
- A financial institution ordered to ~~surrender~~~~block~~ or encumber an account shall be entitled to collect its normally scheduled account activity fees to maintain the account during the period of time the account is ~~seized~~~~blocked~~ or encumbered.
- Any levy issued on an identified account by the Cabinet for Health and Family Services for past-due child support shall have first priority over any other lien or levy issued by the Department of Revenue or any other agency, corporation, or association.

➔Section 32. KRS 205.792 is amended to read as follows:

In addition to the procedures for judicial determination, and enforcement of support obligations described in KRS 205.710 through 205.800, the cabinet may employ administrative process, as described in KRS ~~405.405 to 405.520~~~~405.400 to 405.991~~ to determine and enforce support obligations when paternity is not in question.

➔Section 33. KRS 207.200 is amended to read as follows:

- (1) The Kentucky Department of Workplace Standards is authorized to enforce the employment provisions of KRS 207.130 to 207.240 in conjunction with the State Attorney General's office and the state and local courts.
- (2) Any individual with a disability requesting the intervention of the Kentucky Department of Workplace Standards under this section shall, within one hundred and eighty (180) days of the alleged incident, submit with his request a signed, sworn statement specifying and describing the disability or disabilities which affect him. This statement may be used by the commissioner of workplace standards or his representative to determine if the individual does, or does not, have a "physical disability" as defined in KRS 207.130(2). If the commissioner of workplace standards or his representative determines that the aggrieved individual does have a disability which falls under the definition in KRS 207.130(2), the Department of Workplace Standards shall provide a copy of the aggrieved individual's signed statement to the employer for his inspection.
- (3) In the event the employer wishes to challenge the validity of the statement, he shall so notify the commissioner of workplace standards, who shall in turn notify the aggrieved individual. If the aggrieved individual wishes the Department of Workplace Standards to continue its involvement with the case, he shall be required to submit to the commissioner of workplace standards, within thirty (30) days of such notice, a signed, sworn statement from a licensed physician of his choice, or from one of the state or federal agencies serving individuals with disabilities:
 - (a) Specifying and describing the disability or disabilities affecting the individual; and
 - (b) Indicating any specific type of employment for which such disability should be considered a bona fide or necessary reason for limitation or exclusion.
- (4) (a) The state agencies which may be consulted under subsection (3) of this section may include, but are not limited to, the following:
 1. Department of Education, Office of Vocational Rehabilitation Services;
 2. Cabinet for Health and Family Services, Department for Public Health;
 3. Cabinet for Health and Family Services, Department for *Income Support* [~~Disability Determination Services~~].
- (b) The commissioner of workplace standards, in conjunction with the agencies designated in this subsection, is authorized to adopt appropriate regulations governing the issuance and setting the standards of determinations of ability or disability;
- (c) The agencies designated in this subsection, and any other state agency which serves individuals with disabilities and which the commissioner of workplace standards deems proper, shall cooperate to the fullest with the Department of Workplace Standards in issuing a statement of disability and limitations as specified in subsection (3) of this section within twenty (20) days of the date the individual with a disability presents himself before such agency for examination.
- (5) (a) For the purposes of KRS 207.130 to 207.240, the commissioner of workplace standards, or his authorized representative, shall have the power to enter the place of employment of any employer, labor organization, or employment agency to inspect and copy employment records, to compare character of work and operations on which persons employed by him are engaged, to question such persons, and to obtain such other information as is reasonably necessary to make a preliminary determination that the aggrieved individual is, or is not, fully capable of carrying out the duties of the job which he or she had been denied;
- (b) In the event that a preliminary determination is made that the aggrieved individual is not fully capable of carrying out the duties of the job which he or she had been denied, the aggrieved individual and the employer shall both be so advised;
- (c) The aggrieved individual, within ten (10) days of receiving such notification, may file with the Department of Workplace Standards an application for reconsideration of the determination. Upon such application, the commissioner of workplace standards or his representative shall make a new determination within ten (10) days whether the aggrieved individual is, or is not, fully capable of carrying out the duties of the job which he or she had been denied. If the determination is again made that the aggrieved individual is not fully capable of carrying out these duties, the aggrieved individual and the employer shall both be so advised;
- (d) In the event that a preliminary determination has been made that the aggrieved individual is fully capable of carrying out the duties of the job which he or she had been denied, the employer, labor

organization, or employment agency shall be so advised and encouraged to make an immediate offer to the aggrieved individual of the position which he or she had been denied. In the event the position has already been filled, the employer, labor organization, or employment agency shall be encouraged to make an offer to the aggrieved individual of the next available position for which he or she is qualified.

➔Section 34. KRS 209.005 is amended to read as follows:

- (1) The Cabinet for Health and Family Services shall create an Elder Abuse Committee to develop a model protocol on elder abuse and neglect in the Commonwealth, that shall be comprised of various agency representatives that include but are not limited to:
 - (a) The Department for Community Based Services;
 - (b) The Department for Public Health;
 - (c) The Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation]~~;
 - (d) The Department for Aging and Independent Living;
 - (e) The ***Office of Inspector General's*** Division of Health Care~~[Facilities and Services]~~;
 - (f) The Office of the Ombudsman;
 - (g) Area Agencies on Aging;
 - (h) Local and state law enforcement official; and
 - (i) Prosecutors.
- (2) The committee shall address issues of prevention, intervention, investigation, and agency coordination of services on a state and local level through interaction with local groups or entities that either directly or indirectly provide services to the elder population, including but not limited to:
 - (a) Senior citizen centers;
 - (b) Local governmental human service groups;
 - (c) The Sanders-Brown Center on Aging at the University of Kentucky;
 - (d) Long-Term Care Ombudsmen; and
 - (e) Other organizations or associations dedicated to serving elder citizens and their families in the Commonwealth.
- (3) The committee shall:
 - (a) Recommend a model protocol for the joint multidisciplinary investigation of reports of suspected abuse, neglect, or exploitation of the elderly;
 - (b) Recommend practices to assure timely reporting of referrals of abuse, neglect, or exploitation required under KRS 209.030(12);
 - (c) Explore the need for a comprehensive statewide resource directory of services for the elderly;
 - (d) Enhance existing public awareness campaigns for elder abuse and neglect; and
 - (e) Provide forums for the exchange of information to educate the elder population and their families on the rights of elders.
- (4) The committee shall produce an annual report of their activities, products, and recommendations for public policy to the Governor and the Legislative Research Commission.

➔Section 35. KRS 210.031 is amended to read as follows:

- (1) The cabinet shall establish an advisory committee of sixteen (16) members to advise the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~ of the need for particular services for persons who are deaf or hard-of-hearing.
 - (a) At least eight (8) members shall be deaf or hard-of-hearing and shall be appointed by the secretary. Four (4) deaf or hard-of-hearing members, representing one (1) of each of the following organizations,

shall be appointed from a list of at least two (2) nominees submitted from each of the following organizations:

1. The Kentucky Association of the Deaf;
2. The A.G. Bell Association;
3. The Kentucky School for the Deaf Alumni Association; and
4. Self Help for the Hard of Hearing.

The remaining four (4) deaf or hard-of-hearing members shall be appointed by the secretary from a list of at least eight (8) nominees submitted by the Kentucky Commission on the Deaf and Hard of Hearing.

- (b) One (1) member shall be a family member of a deaf or hard-of-hearing consumer of mental health services and shall be appointed by the secretary from a list of nominees accepted from any source.
 - (c) The head of each of the following entities shall appoint one (1) member to the advisory committee:
 1. The Cabinet for Health and Family Services, Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~;
 2. The Education and Workforce Development Cabinet, Office of Vocational Rehabilitation;
 3. The Cabinet for Health and Family Services, Department for Aging and Independent Living;
 4. The Education and Workforce Development Cabinet, Commission on the Deaf and Hard of Hearing;
 5. The Kentucky Registry of Interpreters for the Deaf; and
 6. A Kentucky School for the Deaf staff person involved in education.
 - (d) The remaining member shall be a representative of a regional mental health/mental retardation board, appointed by the commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~ from a list composed of two (2) names submitted by each regional mental health/mental retardation board.
- (2) Of the members defined in subsection (1)(a) and (b) of this section, three (3) shall be appointed for a one (1) year term, three (3) shall be appointed for a two (2) year term, and three (3) shall be appointed for a three (3) year term; thereafter, they shall be appointed for three (3) year terms. The members defined under subsection (1)(c) and (d) of this section shall serve with no fixed term of office.
 - (3) The members defined under subsection (1)(a) and (b) of this section shall serve without compensation but shall be reimbursed for actual and necessary expenses; the members defined under subsection (1)(c) and (d) of this section shall serve without compensation or reimbursement of any kind.
 - (4) The Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~ shall make available personnel to serve as staff to the advisory committee.
 - (5) The advisory committee shall meet quarterly at a location determined by the committee chair.
 - (6) (a) The advisory committee shall prepare a biennial report which:
 1. Describes the accommodations and the mental health, mental retardation, development disability, and substance abuse services made accessible to deaf and hard-of-hearing persons;
 2. Reports the number of deaf or hard-of-hearing persons served;
 3. Identifies additional service needs for the deaf and hard-of-hearing; and
 4. Identifies a plan to address unmet service needs.
 - (b) The report shall be submitted to the secretary, the commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~, and the Interim Joint Committee on Health and Welfare by July 1 of every odd-numbered year.

➔Section 36. KRS 210.090 is amended to read as follows:

Neither the commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation]~~ of the Cabinet for Health and Family Services nor his deputy nor any superintendent or director of an institution of the Department for ***Behavioral Health, Developmental and***

Intellectual Disabilities~~[Mental Health and Mental Retardation]~~ shall be permitted to engage in any partisan political activity.

➔ Section 37. KRS 210.365 is amended to read as follows:

- (1) As used in this section:
 - (a) "Crisis intervention team (CIT) training" means a forty (40) hour training curriculum based on the Memphis Police Department Crisis Intervention Team model of best practices for law enforcement intervention with persons who may have a mental illness, substance abuse disorder, mental retardation, developmental disability, or dual diagnosis that meets the requirements of subsections (2) to (5) of this section and is approved by the Kentucky Law Enforcement Council;
 - (b) "Department" means the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~;
 - (c) "Prisoner" has the same meaning as set out in KRS 441.005; and
 - (d) "Qualified mental health professional" has the same meaning as set out in KRS 202A.011.
- (2) The department shall, in collaboration with the Justice and Public Safety Cabinet, the regional community mental health-mental retardation boards, and representatives of the Kentucky statewide affiliate of the National Alliance on Mental Illness, coordinate the development of CIT training designed to train law enforcement officers to:
 - (a) Effectively respond to persons who may have a mental illness, substance abuse disorder, mental retardation, developmental disability, or dual diagnosis;
 - (b) Reduce injuries to officers and citizens;
 - (c) Reduce inappropriate incarceration;
 - (d) Reduce liability; and
 - (e) Improve risk management practices for law enforcement agencies.
- (3) The CIT training shall include but not be limited to:
 - (a) An introduction to crisis intervention teams;
 - (b) Identification and recognition of the different types of mental illnesses, substance abuse disorders, mental retardation, developmental disabilities, and dual diagnoses;
 - (c) Interviewing and assessing a person who may have a mental illness, substance abuse disorder, mental retardation, a developmental disability, or dual diagnosis;
 - (d) Identification and common effects of psychotropic medications;
 - (e) Suicide prevention techniques;
 - (f) Community resources and options for treatment;
 - (g) Voluntary and involuntary processes for hospitalization of a person with a mental illness, substance abuse disorder, mental retardation, developmental disability, or dual diagnosis; and
 - (h) Hostage or other negotiations with a person with a mental illness, mental retardation, substance abuse disorder, developmental disability, or dual diagnosis.
- (4) The curriculum shall be presented by a team composed of, at a minimum:
 - (a) A law enforcement training instructor who has completed a forty (40) hour CIT training course and a CIT training instructor's course which has been approved by the Kentucky Law Enforcement Council, and at least forty (40) hours of direct experience working with a CIT;
 - (b) A representative from the local community mental health-mental retardation board serving the region where CIT training is conducted;
 - (c) A consumer of mental health services; and
 - (d) A representative of the Kentucky statewide affiliate of the National Alliance on Mental Illness.

- (5)
 - (a) The department shall submit the CIT training curriculum and the names of available instructors approved by the department to conduct or assist in the delivery of CIT training to the Kentucky Law Enforcement Council no later than July 1, 2007.
 - (b) The Kentucky Law Enforcement Council shall notify the department of approval or disapproval of the CIT training curriculum and trainers within thirty (30) days of submission of the curriculum and the names of instructors.
 - (c) The Kentucky Law Enforcement Council may waive instructor requirements for non-law enforcement trainers whose names are submitted by the department.
 - (d) If the curriculum or trainers are not approved, the department shall have an opportunity to revise and resubmit the curriculum and to submit additional names of instructors if necessary.
- (6) If the curriculum is approved, the Kentucky Law Enforcement Council shall:
 - (a) Notify the Department of Kentucky State Police and all law enforcement agencies employing peace officers certified under KRS 15.380 to 15.404 of the availability of the CIT training; and
 - (b) Notify all instructors and entities approved for law enforcement training under KRS 15.330 of the availability of the CIT training.
- (7) Any law enforcement training entity approved by the Kentucky Law Enforcement Council may use the CIT training model and curriculum in law enforcement in-service training as specified by subsection (1) of this section that is consistent with the Memphis CIT national model for best practices.
- (8) No later than one (1) year after June 26, 2007, the department shall submit to the Kentucky Law Enforcement Council a CIT training instructors' curriculum and the names of available instructors approved by the department to conduct or assist in the delivery of CIT training instructors' training. Additional instructors may be submitted on a schedule determined by the Kentucky Law Enforcement Council.
- (9) All CIT-trained law enforcement officers shall report to his or her agency on forms provided with the CIT curriculum on encounters with persons with mental illness, substance abuse disorders, mental retardation, developmental disabilities, and dual diagnoses. The law enforcement agency shall aggregate reports received and submit nonidentifying information to the department on a monthly basis. Except for information pertaining to the number of law enforcement agencies participating in CIT training, the reports to the department shall include the information specified in subsection (10) of this section.
- (10) The department shall aggregate all reports from law enforcement agencies under subsection (9) of this section and submit nonidentifying statewide information to the Justice and Public Safety Cabinet, the Criminal Justice Council, the Cabinet for Health and Family Services, and the Interim Joint Committee on Health and Welfare by December 1, 2008, and annually thereafter. The report shall include but not be limited to:
 - (a) The number of law enforcement officers trained per agency;
 - (b) Law enforcement responses to persons with mental illness, substance abuse disorders, mental retardation, developmental disabilities, and dual diagnoses;
 - (c) Incidents of harm to the law enforcement officer or to the citizen;
 - (d) The number of times physical force was required and the type of physical force used; and
 - (e) The outcome of the encounters that may include but not be limited to incarceration or hospitalization.
- (11) To implement the requirements of subsections (2) to (5) and (8) to (10) of this section, the department may use public or private funds as available and may develop a contract with a nonprofit entity that is a Kentucky statewide mental health advocacy organization that has a minimum of five (5) years of experience in implementation of the CIT training program in Kentucky.
- (12) The Cabinet for Health and Family Services shall create a telephonic behavioral health jail triage system to screen prisoners for mental health risk issues, including suicide risk. The triage system shall be designed to give the facility receiving and housing the prisoner an assessment of his or her mental health risk, with the assessment corresponding to recommended protocols for housing, supervision, and care which are designed to mitigate the mental health risks identified by the system. The triage system shall consist of:
 - (a) A screening instrument which the personnel of a facility receiving a prisoner shall utilize to assess inmates for mental health, suicide, mental retardation, and acquired brain injury risk factors; and

- (b) A continuously available toll-free telephonic triage hotline staffed by a qualified mental health professional which the screening personnel may utilize if the screening instrument indicates an increased mental health risk for the assessed prisoner.
- (13) In creating and maintaining the telephonic behavioral health jail triage system, the cabinet shall consult with:
 - (a) The Department of Corrections;
 - (b) The Kentucky Jailers Association;
 - (c) The Kentucky Commission on Services and Supports for Individuals with Mental Illness, Alcohol and Other Drug Abuse Disorders, and Dual Diagnoses; and
 - (d) The regional community mental health and mental retardation services programs created under KRS 210.370 to 210.460.
- (14) The cabinet may delegate all or a portion of the operational responsibility for the triage system to the regional community mental health and mental retardation services programs created under KRS 210.370 to 210.460 if the regional program agrees and the cabinet remains responsible for the costs of delegated functions.
- (15) The cabinet shall design into the implemented triage system the ability to screen and assess prisoners who communicate other than in English or who communicate other than through voice.
- (16) The cost of operating the telephonic behavioral health jail triage system shall be borne by the cabinet.
- (17) Records generated under this section shall be treated in the same manner and with the same degree of confidentiality as other medical records of the prisoner.
- (18) Unless the prisoner is provided with an attorney during the screening and assessment, any statement made by the prisoner in the course of the screening or assessment shall not be admissible in a criminal trial of the prisoner, unless the trial is for a crime committed during the screening and assessment.
- (19) The cabinet may, after consultation with those entities set out in subsection (13) of this section, promulgate administrative regulations for the operation of the telephonic behavioral health jail triage system and the establishment of its recommended protocols for prisoner housing, supervision, and care.

➔Section 38. KRS 210.502 is amended to read as follows:

- (1) There is created the Kentucky Commission on Services and Supports for Individuals with Mental Illness, Alcohol and Other Drug Abuse Disorders, and Dual Diagnoses. The commission shall consist of:
 - (a) The secretary of the Cabinet for Health and Family Services;
 - (b) The secretary of the Justice and Public Safety Cabinet;
 - (c) The commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~;
 - (d) The commissioner of the Department for Medicaid Services;
 - (e) The commissioner of the Department of Corrections;
 - (f) The commissioner of the Department of Juvenile Justice;
 - (g) The commissioner of the Department of Education;
 - (h) The executive director of the Office of Vocational Rehabilitation;
 - (i) The director of the Protection and Advocacy Division of the Department for Public Advocacy;
 - (j) The director of the Division of Family Resource and Youth Services Centers;
 - (k) The commissioner of the Department for Aging and Independent Living of the Cabinet for Health and Family Services;
 - (l) The executive director of the Office of Drug Control Policy;
 - (m) The director of the Administrative Office of the Courts;
 - (n) The chief executive officer of the Kentucky Housing Corporation;
 - (o) The executive director of the Office of Transportation Delivery of the Transportation Cabinet;

- (p) The commissioner of the Department of Public Health;
 - (q) Three (3) members of the House of Representatives who are members of the Health and Welfare Committee or the Appropriations and Revenue Committee, appointed by the Speaker of the House;
 - (r) Three (3) members of the Senate who are members of the Health and Welfare Committee or the Appropriations and Revenue Committee, appointed by the Senate President;
 - (s) A chairperson and one (1) alternate who is a chairperson of a regional planning council appointed by the secretary of the Cabinet for Health and Family Services from a list of five (5) chairpersons submitted by the Kentucky Association of Regional Mental Health/Mental Retardation Programs;
 - (t) A consumer and one (1) alternate who is a consumer of mental health or substance abuse services, who is over age eighteen (18), appointed by the secretary of the Cabinet for Health and Family Services from a list of up to three (3) consumers submitted by any consumer advocacy organization operating within Kentucky or submitted by any regional planning council established under KRS 210.506; and
 - (u) An adult family member and one (1) alternate who is an adult family member of a consumer of mental health or substance abuse services appointed by the secretary of the Cabinet for Health and Family Services from a list of up to three (3) persons submitted by any family advocacy organization operating within Kentucky or submitted by any regional planning council established under KRS 210.506.
- (2) The secretary of the Cabinet for Health and Family Services and one (1) member of the General Assembly appointed to the commission shall serve as co-chairs of the commission.
 - (3) Members designated in subsection (1)(a) to (r) of this section shall serve during their terms of office.
 - (4) Members and alternates designated in subsection (1)(s) to (u) of this section shall serve a term of two (2) years and may be reappointed for one (1) additional term. These members may be reimbursed for travel expenses in accordance with administrative regulations governing reimbursement for travel for state employees.

➔Section 39. KRS 210.504 is amended to read as follows:

- (1) The commission created in KRS 210.502 shall meet as often as necessary to accomplish its purpose but shall meet at least quarterly or upon the call of either co-chair, the request of four (4) or more members, or the request of the Governor.
- (2) The commission shall receive, integrate, and report the findings and recommendations of the regional planning councils established under KRS 210.506. The regional planning councils shall provide additional information or study particular issues upon request of the commission.
- (3) The commission:
 - (a) May establish work groups to develop statewide recommendations from information and recommendations received from the regional planning councils;
 - (b) May establish work groups to address issues referred to the commission; and
 - (c) Shall ensure that the regional planning councils have an opportunity to receive, review, and comment on any recommendation or product issued by a work group established under this subsection before the commission takes any formal action on a recommendation or product of a work group.
- (4) The commission shall serve in an advisory capacity to accomplish the following:
 - (a) Based on information provided under subsection (2) of this section:
 - 1. Assess the needs statewide of individuals with mental illness, alcohol and other drug abuse disorders, and dual diagnoses;
 - 2. Assess the capabilities of the existing statewide treatment delivery system including gaps in services and the adequacy of a safety net system; and
 - 3. Assess the coordination and collaboration of efforts between public and private facilities and entities, including but not limited to the Council on Postsecondary Education when assessing workforce issues, and the roles of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~Mental Health and Mental Retardation~~ and the regional community mental health centers, state hospitals, and other providers;

- (b) Identify funding needs and related fiscal impact, including Medicaid reimbursement, limitations under government programs and private insurance, and adequacy of indigent care;
 - (c) Recommend comprehensive and integrated programs for providing mental health and substance abuse services and preventive education to children and youth, utilizing schools and community resources;
 - (d) Develop recommendations to decrease the incidence of repeated arrests, incarceration, and multiple hospitalizations of individuals with mental illness, alcohol and other drug abuse disorders, and dual diagnoses; and
 - (e) Recommend an effective quality assurance and consumer satisfaction monitoring program that includes recommendations as to the appropriate role of persons with mental illness, alcohol and other drug abuse disorders, and dual diagnoses, family members, providers, and advocates in quality assurance efforts.
- (5) The commission shall develop a comprehensive state plan that provides a template for decision-making regarding program development, funding, and the use of state resources for delivery of the most effective continuum of services in integrated statewide settings appropriate to the needs of the individual with mental illness, alcohol and other drug abuse disorders, and dual diagnoses. The state plan shall also include strategies for increasing public awareness and reducing the stigma associated with mental illness and substance abuse disorders.
 - (6) The state plan shall advise the Governor and the General Assembly concerning the needs statewide of individuals with mental illness, alcohol and other drug disorders, and dual diagnoses and whether the recommendations should be implemented by administrative regulations or proposed legislation for the General Assembly.
 - (7) The commission shall develop a two (2) year work plan, beginning in 2003, that specifies goals and strategies relating to services and supports for individuals with mental illness and alcohol and other drug disorders and dual diagnoses and efforts to reduce the stigma associated with mental illness and substance abuse disorders.
 - (8) The commission shall review the plan and shall submit annual updates no later than October 1 to the Governor and the Legislative Research Commission.

➔Section 40. KRS 210.575 is amended to read as follows:

- (1) There is created the Kentucky Commission on Services and Supports for Individuals with an Intellectual Disability and Other Developmental Disabilities. The commission shall consist of:
 - (a) The secretary of the Cabinet for Health and Family Services;
 - (b) The commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~;
 - (c) The commissioner of the Department for Medicaid Services;
 - (d) The executive director of the Office of Vocational Rehabilitation;
 - (e) The director of the University Affiliated Program at the Interdisciplinary Human Development Institute of the University of Kentucky;
 - (f) The director of the ***Commonwealth***~~[Kentucky]~~ Council on Developmental Disabilities;
 - (g) Two (2) members of the House of Representatives, appointed by the Speaker of the House;
 - (h) Two (2) members of the Senate, appointed by the Senate President; and
 - (i) Public members, appointed by the Governor as follows:
 - 1. Five (5) family members, at least one (1) of whom shall be a member of a family with a child with an intellectual disability or other developmental disabilities, and one (1) of whom shall be a member of a family with an adult with an intellectual disability or other developmental disabilities. Of these five (5) family members, at least two (2) shall be members of a family with an individual with an intellectual disability or other developmental disabilities residing in the home of the family member or in a community-based setting, and at least two (2) shall be members of a family with an individual with an intellectual disability or other mental disabilities residing in an institutional residential facility that provides service to individuals with an intellectual disability or other developmental disabilities;
 - 2. Three (3) persons with an intellectual disability or other developmental disabilities;

3. Two (2) business leaders;
4. Three (3) direct service providers representing the Kentucky Association of Regional Programs and the Kentucky Association of Residential Resources; and
5. One (1) representative of a statewide advocacy group.

The six (6) appointments made under subparagraphs 1. and 2. of this paragraph shall be chosen to reflect representation from each of Kentucky's six (6) congressional districts.

- (2) The secretary of the Cabinet for Health and Family Services shall serve as chair of the commission.
- (3) Members defined in subsection (1)(a) to (h) of this section shall serve during their terms of office. All public members appointed by the Governor shall serve a four (4) year term and may be reappointed for one (1) additional four (4) year term.
- (4) All public members of the commission shall receive twenty-five dollars (\$25) per day for attending each meeting. All commission members shall be reimbursed for necessary travel and other expenses actually incurred in the discharge of duties of the commission.

➔Section 41. KRS 210.770 is amended to read as follows:

As used in KRS 210.770 to 210.795, unless the context otherwise requires:

- (1) "Mental impairment" includes mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities;
- (2) "Person with a disability" means someone with a physical or mental impairment and includes individuals who have a record or history of an impairment, or are regarded as having a physical or mental impairment that substantially limits one (1) or more major life activities;
- (3) "Physical impairment" means any physiological disorder or corrective, cosmetic disfigurement, or an anatomical loss affecting one (1) or more of the following body systems: neurological, musculo-skeletal, special sense organs, respiratory including speech organs, cardiovascular, reproductive, digestive, genito-urinary, hemic and lymphatic, skin, and endocrine;
- (4) "Substantial limitation of a major life activity" includes limiting such things as walking, talking, seeing, hearing, caring for oneself, or working;
- (5) "Hart-Supported Living Program" means grants which provide a broad category of highly flexible, individualized services which, when combined with natural unpaid or other eligible paid supports, provide the necessary assistance to do the following:
 - (a) Provide the support necessary to enable a person who is disabled to live in a home of the person's choice which is typical of those living arrangements in which persons without disabilities reside;
 - (b) Encourage the individual's integrated participation in the community with persons who are members of the general citizenry;
 - (c) Promote the individual's rights and autonomy;
 - (d) Enhance the individual's skills and competences in living in the community; and
 - (e) Enable the individual's acceptance in the community by promoting home ownership or leasing arrangements in the name of the individual or the individual's family or guardian;
- (6) "Hart-Supported Living Program" does not include any services that support the following arrangements:
 - (a) Segregated living models such as any housing situation which physically or socially isolates people with disabilities from general citizens of the community;
 - (b) Segregated programs or activities which physically or socially isolate people with disabilities from general citizens of the community;
 - (c) Congregate living models such as any housing situation which groups individuals with disabilities as an enclave within an integrated setting;
 - (d) Any model where the individual, as an adult, does not have maximum control of the home environment commensurate with the individual's disabilities; and
 - (e) Any single living unit where more than three (3) people with disabilities live;

- (7) "~~Hart~~-Supported Living Council" means a supported living council appointed by the Governor and recognized by the commissioner of the Department for *Aging and Independent Living*~~[Mental Health and Mental Retardation Services]~~; and
- (8) "Supported living services" include but are not limited to:
- (a) Supported living community resource developers;
 - (b) Homemaker services;
 - (c) Personal care services;
 - (d) In-home training and home management assistance;
 - (e) Start-up grants;
 - (f) Transportation;
 - (g) Home modifications;
 - (h) Adaptive and therapeutic equipment; and
 - (i) Facilitation by an independent and trained facilitator to develop and implement individualized life planning.

➔Section 42. KRS 210.775 is amended to read as follows:

- (1) There is hereby created the ~~Hart~~-~~State~~-Supported Living Council for services to persons with a disability and their families.
- (2)
 - (a) The ~~Hart~~-~~State~~-Supported Living Council shall be composed of eleven (11) members. The commissioner of the Department for *Aging and Independent Living*~~[Mental Health and Mental Retardation Services]~~ and the executive director of the Kentucky Housing Corporation or their designees shall be ex officio members.
 - (b) Nine (9) of the members shall be volunteers and shall be appointed by the Governor from a list of nominees in the following manner:
 1. Three (3) of the appointed members shall represent family members of persons with a disability;
 2. Two (2) of the appointed members shall be persons with a disability;
 3. One (1) of the appointed members shall represent professionals and providers of services to persons with a disability;
 4. One (1) of the appointed members shall represent advocates for persons with a disability; and
 5. Two (2) of the appointed members shall represent the community at large.
- (3) The appointed members may serve on the council for three (3) years from the date of appointment. Members may be reappointed for one (1) additional consecutive three (3) year term. The Governor shall fill any vacancy occurring in the council in the manner prescribed in subsection (2) of this section.
- (4) The Department for *Aging and Independent Living*~~[Mental Health and Mental Retardation Services]~~ shall provide staff assistance to the ~~Hart~~-~~State~~-Supported Living Council.
- (5) The chairman of the ~~Hart~~-~~State~~-Supported Living Council shall be elected from among the members. A majority of the members shall constitute a quorum.
- (6) The ~~Hart~~-~~State~~-Supported Living Council shall meet as often as necessary but no less frequently than every other month.

➔Section 43. KRS 210.780 is amended to read as follows:

- (1) The ~~Hart~~-~~State~~-Supported Living Council shall be responsible for making recommendations to the Department for *Aging and Independent Living*~~[Mental Health and Mental Retardation Services]~~ for:
 - (a) A budget and priorities for fund allocations for supported living services for persons with disabilities within the Commonwealth;
 - (b) Standards for quality assurance for persons with a disability who receive supported living services in accordance with KRS 210.770 to 210.795; and

- (c) The procedure for annual review and approval of and funding recommendations for individual plans for Hart-Supported Living Program grants submitted by any person with a disability, and for the amendment of individual plans during a fiscal year.
- (2) The ~~Hart-State~~ Supported Living Council shall be responsible for:
 - (a) Disseminating information about Hart-Supported Living Program grants available under KRS 210.770 to 210.795;
 - (b) Hearing grievances and providing due process for consumers and providers of supported living services;
 - (c) Monitoring the overall effectiveness and quality of the program; and
 - (d) Developing recommendations for improvements.
- (3) The ~~Hart-State~~ Supported Living Council may recommend necessary administrative regulations under KRS Chapter 13A to carry out the purposes of KRS 210.770 to 210.795.

➔Section 44. KRS 210.795 is amended to read as follows:

- (1) The Department for *Aging and Independent Living*, ~~[Mental Health and Mental Retardation Services]~~ in cooperation with the ~~Hart-State~~ Supported Living Council, shall establish standards for the administration of the Hart-Supported Living Program. The purpose of these standards is to ensure that a person with a disability receives supported living services in a manner that empowers the person to exercise choice and enhances the quality of that person's life. These standards shall promote the following:
 - (a) Choice over how, when, and by whom supports are provided and over where and with whom a person with a disability lives;
 - (b) Responsibility of the person with a disability and his or her representative for managing grants and the provision of supports under the grant;
 - (c) Freedom to live a meaningful life and to participate in activities in the community with members of the general citizenry;
 - (d) Enhancement of health and safety;
 - (e) Flexibility of services that change as the person's needs change without the individual having to move elsewhere for services;
 - (f) Use of generic options and natural supports;
 - (g) Well-planned and proactive opportunities to determine the kinds and amounts of support desired, with the meaningful participation of the individual, the individual's family or guardian where appropriate, friends, and professionals; and
 - (h) Home ownership or leasing with the home belonging to the person with a disability, that person's family, or to a landlord to whom rent is paid.
- (2) The individual supported living plan shall be developed by the person with a disability and that person's family or guardian where appropriate, and, as appropriate, the proposed or current provider.
- (3) The Department for *Aging and Independent Living*, ~~[Mental Health and Mental Retardation]~~ in concert with the ~~Hart-State~~ Supported Living Council, shall promulgate administrative regulations under KRS Chapter 13A, if necessary, to establish the methods of awarding Hart-Supported Living Program grants for individual supported living plans and monitoring the quality of service delivery, and to provide for administrative appeal of decisions. Administrative hearings conducted on appeals shall be conducted in accordance with KRS Chapter 13B.

➔Section 45. KRS 211.494 is amended to read as follows:

- (1) A comprehensive statewide trauma care program shall be established within the Department for Public Health. The statewide trauma care program shall consist of, at a minimum, a statewide trauma care director and a state trauma registrar funded through available federal funds or, to the extent that funds are available, by the trauma care system fund established in KRS 211.496. The department may contract with outside entities to perform these functions.
- (2) The statewide trauma care system shall address, at a minimum, the following goals:

- (a) To reduce or prevent death and disability from trauma without regard to the patient's insurance coverage or ability to pay for services;
 - (b) To provide optimal care for trauma victims by utilization of best practices protocols and guidelines;
 - (c) To minimize the economic impact of lost wages and productivity for trauma patients; and
 - (d) To contain costs of trauma care.
- (3) (a) The Department for Public Health shall establish an advisory committee to assist in the development, implementation, and continuation of its duties.
- (b) The advisory committee shall *consist of eighteen (18) members as follows:*
1. *Sixteen (16) of the members shall* be appointed by the secretary of the Cabinet for Health and Family Services and shall be composed of representatives from the following agencies and organizations:
 - a.~~{1}~~ The Department for Public Health;
 - b.~~{2}~~ The Kentucky Board of Medical Licensure;
 - c.~~{3}~~ The Kentucky Board of Nursing;
 - d.~~{4}~~ The Kentucky Board of Emergency Medical Services;
 - e.~~{5}~~ The Kentucky Medical Association;
 - f.~~{6}~~ The Kentucky Hospital Association;
 - g.~~{7}~~ The Kentucky Committee on Trauma of the American College of Surgeons;
 - h.~~{8}~~ One (1) representative from each verified Level I trauma center;
 - i.~~{9}~~ One (1) hospital representative from a Level II verified trauma center, one (1) hospital representative from a Level III verified trauma center, and one (1) hospital representative from a Level IV verified trauma center. The Kentucky Hospital Association shall submit recommendations to the secretary for each of the three (3) members appointed under this *subdivision*~~{subparagraph}~~;
 - j.~~{10}~~ The Kentucky Chapter of the American College of Emergency Physicians;
 - k.~~{11}~~ The Kentucky Chapter of the Emergency Nurses Association;
 - l.~~{12}~~ The Kentucky Transportation Cabinet; and
 - m.~~{13}~~ Two (2) members at large, one (1) of whom shall be a health care consumer; *and*
 2. *Two (2) members shall be appointed by the Governor as follows:*
 - a. *One (1) representative with extensive experience in injury prevention programs; and*
 - b. *One (1) representative with pediatric trauma experience.*
- (c) Members of the advisory committee shall serve for a period of four (4) years and shall serve until a successor is appointed, except that initial terms shall be staggered and one-third (1/3) of the members shall be appointed to four (4) year terms, one-third (1/3) of the members shall be appointed to three (3) year terms, and one-third (1/3) of the members shall be appointed for two (2) year terms.
 - (d) The advisory committee shall meet at least on a quarterly basis. The committee shall elect a chair, a vice chair, and a secretary from among its members and adopt rules of governance at the first meeting in each fiscal year. The first meeting of the advisory committee shall occur before September 30, 2008.
 - (e) Appointed members shall serve without compensation but may receive reimbursement for actual and necessary expenses relating to the duties of the advisory committee in accordance with state regulations relating to travel reimbursement.
 - (f) Expenses associated with the advisory committee shall be paid by the trauma care system fund established in KRS 211.496, to the extent funds are available.
- (4) The statewide trauma care director and the advisory committee shall develop and implement a statewide trauma care system, integrated with the public health system for injury prevention, that recognizes levels of

care for the appropriate delivery of a full range of medical services to all trauma patients in the Commonwealth. The statewide trauma care system shall include but is not limited to:

- (a) Development and implementation of trauma prevention and education initiatives;
 - (b) Facilitation of appropriate education and continuing education about trauma care and procedures for physicians, nurses, and emergency medical services personnel;
 - (c) Development and statewide distribution of guidelines and protocols for the care and treatment of trauma victims that include the needs of special populations and are fully integrated with all available resources, including but not limited to emergency medical services, physicians, nurses, and hospitals;
 - (d) Voluntary hospital trauma center verification through the American College of Surgeons or the Department for Public Health;
 - (e) Local and regional triage and transport protocols for use by the Kentucky Board of Emergency Medical Services, emergency medical services providers, and emergency rooms; and
 - (f) Continuing quality assurance and peer review programs.
- (5) The Department for Public Health or the statewide trauma care director and the advisory committee established in this section shall coordinate activities related to the care of trauma patients with other state agencies and boards that are directly or indirectly involved with care of injured persons. Upon request of the Department for Public Health or the statewide trauma care director, other state agencies and boards shall assist and facilitate the development and implementation of a statewide trauma care system.
 - (6) Data obtained through a trauma registry or other data collected pursuant to KRS 211.490 to 211.496 shall be confidential and for use solely by the Department for Public Health, the statewide trauma care director, the advisory committee, and persons or public or private entities that participate in data collection for the trauma registry. Personal identifying information that is collected for use in the trauma registry shall not be subject to discovery or introduction into evidence in any civil action.
 - (7) The statewide trauma care director shall report by December 1 of each year to the Interim Joint Committee on Health and Welfare on the status of the development and implementation of the statewide trauma system.
 - (8) The Department for Public Health may promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section.

➔Section 46. KRS 211.902 is amended to read as follows:

- (1) Every physician, nurse, hospital administrator, director of a clinical laboratory, or public health officer who receives information of the existence of any person found or suspected to have a two and three-tenths (2.3) micrograms per deciliter of whole blood level of lead in his or her blood shall report the information to the cabinet *within seven (7) days* and to the local or district health officer in approved electronic format as prescribed by administrative regulations promulgated by the cabinet in accordance with KRS Chapter 13A. The contents of the report shall include but not be limited to the following information:
 - (a) The full name and address of the person tested;
 - (b) The date of birth of such person;
 - (c) The type of specimen and the results of the appropriate laboratory tests made on such person; and
 - (d) Any other information about such person deemed necessary by the cabinet to carry out the provisions of this section.

Any physician, nurse, hospital administrator, director of clinical laboratory, public health officer, or allied health professional making such a report in good faith shall be immune from any civil or criminal liability that otherwise might be incurred from the making of such report.

- ~~(2) Every director of a clinical or research laboratory who has any blood lead test result shall, within seven (7) calendar days of receipt thereof, report the information to the cabinet in approved electronic format. The cabinet shall promulgate administrative regulations in accordance with KRS Chapter 13A to prescribe the format and content of the electronic report.~~
- ~~(3)~~ Notwithstanding the requirements of *subsection*~~subsections~~ (1) ~~and (2)~~ of this section, a clinical or research laboratory shall not be fined or otherwise disciplined for failure to report required information to the cabinet if the information was not provided by the medical professional obtaining the blood sample.

~~(3)~~~~(4)~~ The secretary shall maintain comprehensive records of all reports submitted pursuant to KRS 211.900 to 211.905 and 211.994. Records shall be analyzed and geographically indexed by county annually in order to determine the location of areas with a high incidence of elevated blood lead levels reported. The records and analysis shall be public record and provided annually by October 1 to the Governor, the General Assembly, the Legislative Research Commission, and the Lead Poisoning Prevention Advisory Committee; provided, however, that the name of any individual shall not be made public unless the secretary determines that such inclusion is necessary to protect the health and well-being of the affected individual.

~~(4)~~~~(5)~~ When an elevated blood lead level is reported to the cabinet, it shall inform such local boards of health, local health departments, and other persons and health organizations as deemed necessary.

➔Section 47. KRS 213.141 is amended to read as follows:

- (1) Except as provided in subsection (2) of this section, the cabinet shall prescribe by regulation a fee not to exceed five dollars (\$5), to be paid for certified copies of certificates or records, or for a search of the files or records when no copy is made, or for copies or information provided for research, statistical, or administrative purposes.
- (2) The cabinet shall prescribe by administrative regulation pursuant to KRS Chapter 13A a fee not to exceed ten dollars (\$10) to be paid for a certified copy of a record of a birth:
 - (a) Three dollars (\$3) of which shall be used by the Cabinet for Health and Family Services for the sole purpose of contracting for the operation of private, not-for-profit, self-help, education, and support groups for parents who want to prevent or cease physical, sexual, or mental abuse of children; and
 - (b) One dollar (\$1) of which shall be used by the Division of ~~Maternal-Adult~~ and Child Health ~~Improvement~~ to pay for therapeutic food, formulas, supplements, or low-protein modified foods for all inborn errors of metabolism and genetic conditions if:
 1. The therapeutic food, formulas, supplements, or low-protein modified food products are medically indicated for the therapeutic treatment of inborn errors of metabolism or genetic conditions and are administered under the direction of a physician; and
 2. The affected person's therapeutic food, formulas, supplements or low-protein foods are not covered under any public or private health benefit plan.
- (3) Fees collected under this section by the state registrar shall be used to help defray the cost of administering the system of vital statistics.
- (4)
 - (a) No fee or compensation shall be allowed or paid for furnishing certificates of birth or death required in support of any claim against the government for compensation, insurance, back pay, or other allowances or benefits for any person who has at any time served as a member of the Army, Navy, Marine Corps, or Air Force of the United States.
 - (b) No fee or compensation shall be allowed or paid for furnishing a certificate of birth to a member of the Kentucky National Guard who has received deployment orders during the sixty (60) days prior to the furnishing of the certificate.
- (5) The cabinet shall notify the State Board of Elections monthly of the name, address, birthdate, sex, race, and Social Security number of residents of the Commonwealth who died during the previous month. This data shall include only those persons who were over the age of eighteen (18) years at the date of death. No fee or compensation shall be allowed for furnishing these lists.

➔Section 48. KRS 214.554 is amended to read as follows:

- (1) There is established within the department a Breast Cancer Screening Program for the purposes of:
 - (a) Reducing morbidity and mortality from breast cancer in women through early detection and treatment; and
 - (b) Making breast cancer screening services of high quality and reasonable cost available to women of all income levels throughout the Commonwealth and to women whose economic circumstances or geographic location limits access to breast cancer screening facilities.
- (2) Services provided under the Breast Cancer Screening Program may be undertaken by private contract for services or operated by the department and may include the purchase, maintenance, and staffing of a truck, a van, or any other vehicle suitably equipped to perform breast cancer screening. The program may also provide

referral services for the benefit of women for whom further examination or treatment is indicated by the breast cancer screening.

- (3) The department may adopt a schedule of income-based fees to be charged for the breast cancer screening. The schedule shall be determined to make screening available to the largest possible number of women throughout the Commonwealth. The department shall, where practical, collect any available insurance proceeds or other reimbursement payable on behalf of any recipient of a breast cancer screening under KRS 214.552 to 214.556 and may adjust the schedule of fees to reflect insurance contributions. All fees collected shall be credited to the fund.
- (4) The department may accept any grant or award of funds from the federal government or private sources for carrying out the provisions of KRS 214.552 to 214.556.
- (5) For the purpose of developing and monitoring the implementation of guidelines for access to and the quality of the services of the Breast Cancer Screening Program, there is hereby created a Breast Cancer Advisory Committee to the commissioner of the Department for Public Health which shall include the directors of the James Graham Brown Cancer Center and the Lucille Parker Markey Cancer Center, the director of the Kentucky Cancer Registry, the director of the Division of Women's ~~Physical and Mental~~ Health, one (1) radiologist with preference given to one who has been fellowship-trained in breast diagnostics and who shall be appointed by the Governor, one (1) representative of the Kentucky Office of Rural Health appointed by the Governor, one (1) representative of the Kentucky Commission on Women appointed by the Governor, and at least three (3) women who have had breast cancer and who shall be appointed by the Governor.
- (6) The commissioner of the Department for Public Health, in consultation with the Breast Cancer Advisory Committee, shall annually, but no later than November 1 of each year, make a report to the Governor, the Legislative Research Commission, and the Interim Joint Committees on Appropriations and Revenue and on Health and Welfare on the:
 - (a) Implementation and outcome from the Breast Cancer Screening Program including, by geographic region, numbers of persons screened, numbers of cancers detected, referrals for treatment, and reductions in breast cancer morbidity and mortality;
 - (b) Development of quality assurance guidelines, including timetables, for breast cancer screening under this section, and monitoring of the manner and effect of implementation of those guidelines; and
 - (c) Funds appropriated, received, and spent for breast cancer control by fiscal year.

➔Section 49. KRS 214.640 is amended to read as follows:

- (1) The Cabinet for Health and Family Services may create, to the extent permitted by available staffing and funding, an HIV and AIDS **Planning and** Advisory Council to consist of no more than thirty (30) members, for the purpose of advising the cabinet on the formulation of HIV and AIDS policy. Membership on the committee shall be drawn from the following:
 - (a) The commissioner of the Department for Public Health;
 - (b) The commissioner of the Department for Medicaid Services;
 - (c) Representatives of other state agencies or boards that provide services to clients of HIV or AIDS services or that provide education to professionals who come into contact with HIV or AIDS clients, as designated by the Governor;
 - (d) Physicians representing different geographic regions of the state;
 - (e) HIV or AIDS clients; and
 - (f) Representatives of community-based organizations from different geographic regions of the state.

To the extent possible, membership of the council shall reflect the epidemiology of the HIV/AIDS epidemic.

- (2) The members designated under paragraphs (a) to (c) of subsection (1) of this section shall serve for the duration of service in their offices, subject to removal for cause by the Governor. These members shall not be paid for attending council meetings but may receive reimbursement of expenses.
- (3) The members serving under paragraphs (d) to (f) of subsection (1) of this section shall be appointed by the cabinet from lists submitted by the appropriate licensing entities of the profession involved, by the cabinet, and by community-based organizations. These members shall serve for a term of four (4) years and may be reappointed, but the members shall not serve for more than two (2) consecutive terms.

- (4) The chair of the council shall be elected from the membership serving under paragraphs (d) to (f) of subsection (1) of this section.
- (5) The functions of the council shall include but shall not be limited to:
- (a) Reporting its findings to the cabinet and monitoring the responsiveness of the cabinet to insure that the council's recommendations are being followed;
 - (b) Exploring the feasibility, design, cost, and necessary funding for centers of excellence to deliver comprehensive, coordinated medical and related care to all people with HIV or AIDS in the Commonwealth based on national clinical guidelines and practice standards. Coordinated medical care shall include but not be limited to access to:
 - 1. AIDS primary care;
 - 2. Drug therapy;
 - 3. Specialists' care, including psychiatric and other mental health providers;
 - 4. Case management services;
 - 5. Dental care;
 - 6. Chemical dependency treatment; and
 - 7. Basic needs, including but not limited to housing and food;
 - (c) Assessing resources and gaps in services provided for persons with HIV or AIDS;
 - (d) Subdividing into necessary subcommittees. One (1) subcommittee may be formed that will consist solely of persons living with HIV or AIDS. This subcommittee shall make those recommendations as it deems necessary to the council, including recommendations on effective peer-based prevention programs; and
 - (e) Reporting its findings and recommendations to the General Assembly and the Interim Joint Committee on Health and Welfare by September 1, 2001, and by September 1 of each year thereafter.

➔Section 50. KRS 216.265 is amended to read as follows:

- (1) The Kentucky e-Health Network Board is created and is attached to the Cabinet for Health and Family Services for administrative and technical support purposes.
- (2) The board shall consist of the following voting members:
- (a) President, or a designee, of the University of Kentucky, who shall serve as co-chair of the board;
 - (b) President, or a designee, of the University of Louisville, who shall serve as co-chair of the board;
 - (c) Commissioner, or a designee, of the Department for Public Health;
 - (d) Commissioner, or a designee, of the Department for Medicaid Services;
 - (e) Executive director, or a designee, of the Commonwealth Office of Technology; and
 - (f) Nine (9) at-large members appointed by the Governor as follows:
 - 1. One (1) member engaged in the business of large-scale e-strategy and computer information technology;
 - 2. One (1) member engaged in the business of health insurance who is employed by a company that has its headquarters in Kentucky;
 - 3. Two (2) members from a list of four (4) individuals recommended by the Kentucky Hospital Association, one (1) representing rural hospitals, and one (1) representing urban hospitals;
 - 4. Two (2) physicians actively engaged in the practice of medicine in the Commonwealth from a list of four (4) physicians recommended by the Kentucky Medical Association, or self-nominated;
 - 5. One (1) member from a company with at least one thousand (1,000) employees selected from a list of four (4) individuals submitted by the Associated Industries of Kentucky;
 - 6. One (1) member with experience as a physician practice manager; and

7. One (1) member at large.
- (3) The board shall consist of the following ex officio members who may vote, but shall not be counted toward a quorum:
 - (a) Commissioner, or a designee, of the Department of Commercialization and Innovation;
 - (b) President, or a designee, of the Council on Postsecondary Education;
 - (c) Secretary, or a designee, of the Cabinet for Health and Family Services;
 - (d) Commissioner, or a designee, of the Department of Insurance;
 - (e) Two (2) members of the Senate who are members of the Interim Joint Committee on Health and Welfare or the Interim Joint Committee on Banking and Insurance, appointed by the President of the Senate; and
 - (f) Two (2) members of the House of Representatives who are members of the Interim Joint Committee on Health and Welfare or the Interim Joint Committee on Banking and Insurance, appointed by the Speaker of the House.
- (4) Members of the board shall serve a term of four (4) years and may serve two (2) consecutive terms.
- (5) At the end of a term, a member of the board shall continue to serve until a successor is appointed. A member who is appointed after a term has begun shall serve the rest of the term and until a successor is appointed. A member of the board who serves two (2) consecutive full four (4) year terms shall not be reappointed for four (4) years after completion of those terms. Members designated in subsection (2)(a) to (e) of this section and members designated in subsection (3) of this section shall serve on the board only while holding their respective titles.
- (6) A majority of the full membership of the board shall constitute a quorum.
- (7) The board may employ staff or contract with consultants necessary for the performance of the duties of the board, subject to the appropriation of funds.
- (8) No member of the board shall be subject to any personal liability or accountability for any loss sustained or damage suffered on account of any action or inaction of the board.
- (9) Members of the board and all committees, except the advisory group created in KRS 216.267(2), shall be entitled to reimbursement for actual and necessary expenses when carrying out official duties of the board in accordance with state administrative regulations relating to travel reimbursements. The board shall meet at least monthly.
- (10) The board may appoint committees or subcommittees with the charge of investigating and making recommendations to the board on specific aspects of the Ke-HN, including but not limited to evidence-based clinical decision support, security of protected information, electronic data interchange, and clinical practice software packages, including the feasibility of developing a software purchasing alliance to decrease the cost of software and tax incentives to encourage members of the network to purchase software deemed by the board to meet the standards of KRS 216.267. The board may appoint the following committees:
 - (a) Clinical Decision Support Committee;
 - (b) Privacy and Security of Protected Health Information Committee;
 - (c) Electronic Data Interchange Committee; and
 - (d) Clinical Software Review Committee.
- (11) The members of committees or subcommittees appointed by the board do not need to be members of the board. The chairs of committees or subcommittees shall be appointed by the board. The frequency of committee or subcommittee meetings shall be established by the board.
- (12) The Clinical Decision Support Committee membership shall include at least the following members:
 - (a) One (1) physician with expertise in health informatics;
 - (b) Two (2) physicians actively engaged in the practice of medicine in this Commonwealth from a list of four (4) physicians recommended by the Kentucky Medical Association, or self-nominated;
 - (c) One (1) representative of a rural hospital and one (1) representative of an urban hospital;

- (d) One (1) pharmacist;
 - (e) One (1) representative engaged in the business of health-care information technology;
 - (f) Two (2) members with experience as physician practice managers, one (1) from a single-physician practice and one (1) from a multiphysician practice; and
 - (g) One (1) member engaged in the business of health insurance who is recommended by the Kentucky Association of Health Plans, Incorporated.
- (13) The Privacy and Security of Protected Health Information Committee shall include at least the following members:
- (a) One (1) physician actively engaged in the practice of medicine in this Commonwealth;
 - (b) Two (2) members with expertise in HIPAA regulations;
 - (c) Two (2) members engaged in the business of large-scale e-strategy and computer information technology;
 - (d) One (1) member who serves as a computer information officer within the health-care industry;
 - (e) Two (2) members with experience as physician practice managers, one (1) from a single-physician practice and one (1) from a multiphysician practice;
 - (f) One (1) member engaged in the business of health insurance who is recommended by the Kentucky Association of Health Plans, Incorporated; and
 - (g) One (1) representative of a hospital.
- (14) The Electronic Data Interchange Committee shall include at least the following members:
- (a) Two (2) members engaged in the business of large-scale e-strategy and computer information technology;
 - (b) Two (2) members engaged in the business of health insurance who are recommended by the Kentucky Association of Health Plans, Incorporated;
 - (c) **Executive director**~~[Chief information officer]~~, or a designee, of the Office of **Administrative and Technology Services** within the Cabinet for Health and Family Services;
 - (d) Two (2) members with experience as physician practice managers, one (1) from a single-physician practice and one (1) from a multiphysician practice; and
 - (e) One (1) representative of a hospital.
- (15) The Clinical Software Review Committee shall include at least the following members:
- (a) One (1) member from a company that develops computer software for physician practices;
 - (b) One (1) member engaged in the business of large-scale e-strategy and computer information technology;
 - (c) Three (3) physicians, with one (1) having experience in electronic information technology;
 - (d) Two (2) members with experience as physician practice managers, one (1) from a single-physician practice and one (1) from a multiphysician practice;
 - (e) One (1) member engaged in the business of health insurance who is recommended by the Kentucky Association of Health Plans, Incorporated or employed by a company which has its headquarters in Kentucky; and
 - (f) One (1) representative of a hospital.
- (16) The Governor of the Commonwealth of Kentucky may reorganize the Kentucky e-Health Network Board to include the Kentucky Telehealth Board and to reorganize the Telehealth Board under the Cabinet for Health and Family Services. If the Governor deems it appropriate, the reorganization shall create a new Telehealth Committee of the Ke-HN board with the membership and responsibilities as described under KRS 194A.125 and shall be subject to confirmation by the General Assembly under the requirements of KRS 12.028.

➔Section 51. KRS 216.2923 is amended to read as follows:

- (1) For the purposes of carrying out the provisions of KRS 216.2920 to 216.2929, the secretary may:
- (a) Appoint temporary volunteer advisory committees, which may include individuals and representatives of interested public or private entities or organizations;
 - (b) Apply for and accept any funds, property, or services from any person or government agency;
 - (c) Make agreements with a grantor of funds or services, including an agreement to make any study allowed or required under KRS 216.2920 to 216.2929; and
 - (d) Contract with a qualified, independent third party for any service necessary to carry out the provisions of KRS 216.2920 to 216.2929; however, unless permission is granted specifically by the secretary a third party hired by the secretary shall not release, publish, or otherwise use any information to which the third party has access under its contract.
- (2) For the purposes of carrying out the provisions of KRS 216.2920 to 216.2929, the secretary shall:
- (a) Publish and make available information that relates to the health-care financing and delivery system, information on charges for health-care services and the quality and outcomes of health-care services, the cost of workers' compensation health benefits, motor vehicle health insurance benefits, and health insurance premiums and benefits that is in the public interest;
 - (b) Periodically participate in or conduct analyses and studies that relate to:
 1. Health-care costs;
 2. Health-care quality and outcomes;
 3. Health-care providers and health services; and
 4. Health insurance costs;
 - (c) Promulgate administrative regulations pursuant to KRS Chapter 13A that relate to its meetings, minutes, and transactions related to KRS 216.2920 to 216.2929;
 - (d) Prepare annually a budget proposal that includes the estimated income and proposed expenditures for the administration and operation of KRS 216.2920 to 216.2929; and
 - (e) No later than thirty (30) days after July 15, 2005, appoint and convene a permanent cabinet advisory committee. The committee shall advise the secretary on the collection, analysis, and distribution of consumer-oriented information related to the health-care system, the cost of treatment and procedures, outcomes and quality indicators, and policies and regulations to implement the electronic collection and transmission of patient information (e-health) and other cost-saving patient record systems. At a minimum, the committee shall be composed of the following:
 1. Commissioner of the Department for Public Health;
 2. Commissioner of the Department for *Behavioral Health, Developmental and Intellectual Disabilities*~~[Mental Health and Mental Retardation Services]~~;
 3. Commissioner of the Department for Medicaid Services;
 4. Commissioner of the Department of Insurance;
 5. Physician representatives;
 6. Hospital representatives;
 7. Health insurer representatives;
 8. Consumers; and
 9. Nonphysician health-care providers.
 - (f) The cabinet advisory committee shall utilize the Health Services Data Advisory Committee as a subcommittee, which shall include a member of the Division of Women's ~~Physical and Mental~~ Health, to define quality outcome measurements and to advise the cabinet on technical matters, including a review of administrative regulations promulgated pursuant to KRS Chapter 13A, proper interpretation of the data, and the most cost-efficient manner in which it should be published and disseminated to the public, state and local leaders in health policy, health facilities, and health-care providers. The Health Services Data Advisory Committee shall review and make recommendations to the cabinet advisory

committee regarding exploration of technical matters related to data from other health-care providers and shall make recommendations on methods for risk-adjusting any data prepared and published by the cabinet.

- (3) The cabinet may promulgate administrative regulations pursuant to KRS Chapter 13A that impose civil fines not to exceed five hundred dollars (\$500) for each violation for knowingly failing to file a report as required under KRS 216.2920 to 216.2929. The amount of any fine imposed shall not be included in the allowed costs of a facility for Medicare or Medicaid reimbursement.

➔Section 52. KRS 216.533 is amended to read as follows:

- (1) A long-term care facility owned, managed, or operated by the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~ shall request an in-state criminal background information check from the Justice and Public Safety Cabinet or Administrative Office of the Courts for each applicant recommended for employment. Out-of-state criminal background information checks shall be obtained for any applicant recommended for employment who has resided or been employed outside of the Commonwealth.
- (2) No facility specified in subsection (1) of this section shall knowingly employ any person who has been convicted of a felony offense under:
- (a) KRS Chapter 209;
 - (b) KRS Chapter 218A;
 - (c) KRS 507.020, 507.030, and 507.040;
 - (d) KRS Chapter 509;
 - (e) KRS Chapter 510;
 - (f) KRS Chapter 511;
 - (g) KRS Chapter 513;
 - (h) KRS 514.030;
 - (i) KRS Chapter 530;
 - (j) KRS Chapter 531;
 - (k) KRS 508.010, 508.020, 508.030, and 508.032;
 - (l) A criminal statute of the United States or another state similar to paragraphs (a) to (k) of this subsection; or
 - (m) A violation of the uniform code of military justice or military regulation similar to paragraphs (a) to (k) of this subsection which has caused the person to be discharged from the Armed Forces of the United States.
- (3) A person who has received a pardon for an offense specified in subsection (2) or has had the record of such an offense expunged may be employed.
- (4) Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation]~~ facilities specified in subsection (1) of this section shall be exempt from the provisions of KRS 216.789(1).

➔Section 53. KRS 216.583 is amended to read as follows:

The Long-Term Care Coordinating Council shall be composed of the following members from within the cabinet: the commissioner of the Department for Public Health; the commissioner of the Department for ***Behavioral Health, Developmental and Intellectual Disabilities***~~[Mental Health and Mental Retardation Services]~~; the inspector general; the director of the Division of Health Care~~[Facilities and Services]~~; the commissioner of the Department for Aging and Independent Living; the commissioner of the Department for Medicaid Services; the general counsel; and the long-term care ombudsman.

➔Section 54. KRS 216.793 is amended to read as follows:

- (1) Each application form provided by the employer, or each application form provided by a facility either contracted or operated by the Department for ***Behavioral Health, Developmental and Intellectual***

~~Disabilities~~[Mental Health and Mental Retardation Services] of the Cabinet for Health and Family Services, to the applicant for initial employment in an assisted-living community nursing facility, or nursing pool providing staff to a nursing facility, or in a position funded by the Department for Community Based Services of the Cabinet for Health and Family Services or the Department for Aging and Independent Living of the Cabinet for Health and Family Services and which involves providing direct services to senior citizens shall conspicuously state the following: "FOR THIS TYPE OF EMPLOYMENT STATE LAW REQUIRES A CRIMINAL RECORD CHECK AS A CONDITION OF EMPLOYMENT."

- (2) Any request for criminal records of an applicant as provided under subsection (1) of this section shall be on a form or through a process approved by the Justice and Public Safety Cabinet or the Administrative Office of the Courts. The Justice and Public Safety Cabinet or the Administrative Office of the Courts may charge a fee to be paid by the applicant or state agency in an amount no greater than the actual cost of processing the request.

➔Section 55. KRS 216A.010 is amended to read as follows:

As used in this chapter:

- (1) **"Board" means the Kentucky Board of Licensure for Long-term Care Administrators established in Section 57 of this Act;**~~[The term "nursing home" means a place devoted primarily to the maintenance and operation of facilities for the treatment and care of persons who suffer from illness, disease, deformity or injury not requiring the intensive care normally provided in a hospital, but who do require care in excess of room, board and laundry and who need medical and nursing care.~~
- ~~(2) The term "nursing home administrator" means any individual responsible for planning, organizing, directing, and controlling the operation of a nursing home, or who in fact performs such functions, whether or not such functions are shared by one or more other persons.~~
- ~~(3) The term "board" means the Kentucky Board of Licensure for Nursing Home Administrators.]~~
- (2) **"Cabinet" means the Cabinet for Health and Family Services;**
- (3) **"Long-term care administrator" means any individual responsible for planning, organizing, directing, and controlling the operation of a licensed long-term care facility, or who in fact performs those functions, whether or not those functions are shared by one (1) or more other persons;**
- (4) **"Long-term care facility" means a health care facility which is defined by the cabinet to be an intermediate care facility, skilled-nursing facility, nursing facility in accordance with Pub. L. No. 100-203, nursing home, or intermediate care facility for the mentally retarded and developmentally disabled; and**
- (5) **"Resident" means any person who is admitted to a long-term care facility.**

➔Section 56. KRS 216A.020 is amended to read as follows:

This chapter may be cited as the "Kentucky **Long-term Care**~~[Nursing Home]~~ Administrators Licensure Act of 2012~~[1970]."~~

➔Section 57. KRS 216A.030 is amended to read as follows:

No **licensed long-term care facility**~~[nursing home]~~ shall operate except under the supervision of a **long-term care**~~[nursing home]~~ administrator, **unless approved by the board through administrative regulation**, and no person shall be a **long-term care**~~[nursing home]~~ administrator unless he **or she** is the holder of a **long-term care**~~[nursing home]~~ administrator's license issued pursuant to this chapter.

➔Section 58. KRS 216A.040 is amended to read as follows:

There shall be a Kentucky Board of Licensure for **Long-term Care**~~[Nursing Home]~~ Administrators located within the **Public Protection**~~[Finance and Administration]~~ Cabinet for administrative and budgetary purposes. The board shall be composed of ten (10) members. The secretary of the Cabinet for Health and Family Services, **or his or her designee**, shall be an ex officio member of the board. The other members of the board shall be appointed by the Governor. One (1) member shall be a practicing hospital administrator, to be appointed from a list of two (2) names submitted by the Kentucky Hospital Association. One (1) member shall be a practicing medical physician, to be appointed from a list of two (2) names submitted by the Kentucky State Medical Association. One (1) member shall be an educator in the field of allied health services. One (1) member shall be a citizen at large who is not associated with or financially interested in the practice or business regulated. One (1) member shall be a practicing **long-term care**~~[nursing home]~~ administrator appointed from a list of two (2) names submitted by **LeadingAge Kentucky**~~[the Kentucky Association of Nonprofit Homes and Services for the Aging, Inc.]~~. The other four (4) members shall be

practicing *long-term care*~~[nursing home]~~ administrators appointed from a list of two (2) names for each vacancy submitted by the Kentucky Association of Health Care Facilities and duly licensed under this chapter. ***No person who has been disciplined in the previous five (5) years by the board, or by another state's board of licensure governing the same profession, shall be appointed to the board***~~[, except that such members of the initial board shall be required only to possess the qualifications and be eligible for licensure as required in this chapter].~~

➔Section 59. KRS 216A.050 is amended to read as follows:

The ~~appointive members of the board shall hold office for terms of four (4) years and until successors are appointed and qualified except that the terms of office of the eight (8) members first appointed shall be as follows: two (2) members shall be appointed for one (1) year, two (2) members shall be appointed for two (2) years, two (2) members shall be appointed for three (3) years and two (2) members shall be appointed for four (4) years and the respective terms of the first members shall be designated by the Governor at the time of their appointment. Thereafter, the~~ term of office of each member shall be four (4) years or until a successor is appointed and qualified. No appointive member shall serve more than two (2) full consecutive terms.

➔Section 60. KRS 216A.060 is amended to read as follows:

- (1) The board shall elect annually from its membership a ***chair and vice chair***~~[chairman and vice chairman]~~. The board shall hold ***three (3)***~~[two (2)]~~ or more meetings each year. At any meeting a majority ***of the appointed members with unexpired terms*** shall constitute a quorum. The board may procure specialized consultation through the formation of such technical advisory committees as it may deem necessary in the execution of its responsibilities.
- (2) Members of the board shall receive per diem compensation to be established by ***administrative regulation***~~[the secretary of the Finance and Administration Cabinet]~~. This compensation shall not exceed ***one hundred twenty***~~[fifty]~~ dollars (***\$120***)~~[\$50]~~ per day. Members shall be reimbursed for actual and necessary expenses.

➔Section 61. KRS 216A.070 is amended to read as follows:

- (1) The board shall:
 - (a) Develop, impose, and enforce standards which must be met by individuals in order to receive a license as a *long-term care*~~[nursing home]~~ administrator, which standards shall be designed to ***ensure***~~[insure]~~ that *long-term care*~~[nursing home]~~ administrators will be individuals who are of good character and are otherwise suitable, and who, by training or experience in the field of institutional administration, are qualified to serve as nursing home administrators;
 - (b) Develop and apply appropriate techniques, including examinations and investigations, for determining whether an individual meets the standards;
 - (c) Issue licenses to individuals determined, after application of appropriate techniques, to meet established standards~~[, and revoke or suspend, after hearing, licenses previously issued by the board in any case where the individual holding any such license is determined substantially to have failed to conform to the requirements of the standards];~~
 - (d) Establish and carry out procedures designed to ***ensure***~~[insure]~~ that individuals licensed as *long-term care*~~[nursing home]~~ administrators will, during any period that they serve as such, comply with the requirements of the standards;
 - (e) Receive, investigate, and take appropriate action with respect to any charge or complaint filed with the board to the effect that any individual licensed as a nursing home administrator has failed to comply with the requirements of the standards; and
 - (f) ***Apply commensurate disciplinary action, following a hearing pursuant to KRS Chapter 13B, including permanent license revocation, suspension, or placement of probationary conditions on the licensee, issuance of a fine not to exceed two thousand dollars (\$2,000) per violation, or admonishing the licensee***~~[Conduct a continuing study and investigation of nursing homes and administrators of nursing homes within the state with a view to the improvement of the standards imposed for the licensing of such administrators and of procedures and methods for the enforcement of such standards with respect to administrators of nursing homes who have been licensed as such].~~
- (2) The board or any committee or member thereof or any hearing officer designated by the board, acting in an official capacity, shall have the authority to conduct administrative hearings in accordance with KRS Chapter 13B concerning all matters within the jurisdiction of the board.

- (3) The board shall also have the authority to promulgate administrative regulations necessary for the proper performance of its duties, and to take other actions necessary to enable the state to meet the requirements set forth in Section 1908 of the Social Security Act, the federal rules and regulations promulgated thereunder, and other pertinent federal authority or amendment thereto.
- (4) The board may, when emergency conditions warrant, as determined by the board, authorize the issuance of a temporary permit to an individual to practice the art of *long-term care*~~[nursing home]~~ administration if it finds the authorization will not endanger the health and safety of the occupants of the *licensed long-term care facility*~~[nursing home]~~. A temporary permit shall be valid for a period determined by the board not to exceed six (6) months and shall not be renewed. The fee for a temporary permit shall be determined by regulations of the board.

➔Section 62. KRS 216A.080 is amended to read as follows:

- (1) No person shall be eligible to practice *long-term care*~~[nursing home]~~ administration in this state unless:
- (a) He *or she* shall make written application to the board on such forms as are provided therefor;
- (b) ~~He is at least twenty one (21) years of age;~~
- ~~(c) He *or she* is a citizen of the United States or has declared his *or her* intent to become a citizen of the United States;~~
- (c)~~(d)~~ He *or she* provides proof satisfactory to the board that he *or she* is of good moral character and is otherwise suitable;
- (d)~~(e)~~ He *or she* has passed an examination *approved*~~[administered]~~ by the board *by promulgation of an administrative regulation*; and
- (e)~~(f)~~ He *or she* meets such other requirements as may be established by the board *by promulgation of an administrative regulation, so long as the*~~[provided that such]~~ requirements are uniform and are applied to all other applicants for a license.
- (2) When an applicant ~~has~~~~[shall have]~~ met the requirements as provided herein, the board shall issue ~~the~~~~[to such]~~ applicant a license to practice *long-term care*~~[nursing home]~~ administration in this state.

➔Section 63. KRS 216A.090 is amended to read as follows:

Every holder of a *long-term care*~~[nursing home]~~ administrator's license shall renew his *or her* license biennially by making application to the board *either online via Internet access or* on forms provided therefor. The board may refuse to renew any license for failure to comply with the provisions of this chapter or the *administrative*~~[rules and]~~ regulations promulgated under this chapter, including continuing education requirements.

➔Section 64. KRS 216A.130 is amended to read as follows:

- (1) The board, in its discretion, and otherwise subject to the provisions of this chapter and the *administrative*~~[rules and]~~ regulations of the board promulgated thereunder prescribing the qualifications for a *long-term care*~~[nursing home]~~ administrator license, may issue~~[such]~~ a license to a *long-term care*~~[nursing home]~~ administrator possessing a license issued by the proper authorities of any other state, upon payment of a fee set by the board, and upon submission of evidence satisfactory to the board:
- (a)~~(1)~~ That ~~the~~~~[such]~~ other state maintained a system and standard of qualifications and examinations for a *long-term care*~~[nursing home]~~ administrator license which were substantially equivalent to those required in this state at the time ~~the~~~~[such]~~ other license was issued by ~~the~~~~[such]~~ other state; and
- (b)~~(2)~~ That *the license was issued by the other state at least two (2) years prior to application for endorsement*~~[such other state gives similar recognition and indorsement to nursing home administrator licenses of this state].~~
- (2) *The board, in its discretion, may refuse to issue a license to a long-term care administrator possessing a license issued by the proper authorities of any other state if the applicant for endorsement has been disciplined by the other state's board in the past five (5) years.*

➔Section 65. KRS 216A.150 is amended to read as follows:

It shall be a misdemeanor for any person to:

- (1) Sell or fraudulently obtain or furnish any license or aid or abet therein;~~[, or]~~

- (2) Practice as a *long-term care*~~[nursing home]~~ administrator, under cover of any license illegally or fraudulently obtained or unlawfully issued;~~[, or]~~
- (3) Practice as a *long-term care*~~[nursing home]~~ administrator or use in connection with his or her name any designation tending to imply that he or she is a *long-term care*~~[nursing home]~~ administrator unless duly licensed to so practice under the provisions of this chapter;~~[,]~~ or
- (4) Practice as a *long-term care*~~[nursing home]~~ administrator during the time his or her license issued under the provisions of this chapter shall be suspended or revoked;~~[, or]~~
- ~~(5) Otherwise violate any of the provisions of this chapter or the rules and regulations of the board].~~

➔Section 66. KRS 216A.990 is amended to read as follows:

Misdemeanors shall be punishable by a fine of not~~[less than ten dollars (\$10) nor]~~ more than one hundred dollars (\$100). Each day of violation shall constitute a separate offense.

➔Section 67. KRS 222.005 is amended to read as follows:

As used in this chapter, unless the context otherwise requires:

- (1) "Administrator" means the person or the designee of the person, in charge of the operation of an alcohol and other drug abuse prevention, intervention, or treatment program;
- (2) "Agency" means a legal entity operating hospital-based or nonhospital-based alcohol and other drug abuse prevention, intervention, or treatment programs;
- (3) "Alcohol and other drug abuse" means a dysfunctional use of alcohol or other drugs or both, characterized by one (1) or more of the following patterns of use:
 - (a) The continued use despite knowledge of having a persistent or recurrent social, legal, occupational, psychological, or physical problem that is caused or exacerbated by use of alcohol or other drugs or both;
 - (b) Use in situations which are potentially physically hazardous;
 - (c) Loss of control over the use of alcohol or other drugs or both; and
 - (d) Use of alcohol or other drugs or both is accompanied by symptoms of physiological dependence, including pronounced withdrawal syndrome and tolerance of body tissues to alcohol or other drugs or both;
- (4) "Cabinet" means the Cabinet for Health and Family Services;
- (5) "Director" means the director of the Division of *Behavioral*~~[Mental] Health~~~~[and Substance Abuse Services]~~ of the Department for *Behavioral Health, Developmental and Intellectual Disabilities*~~[Mental Health and Mental Retardation Services]~~;
- (6) "Hospital" means an establishment with organized medical staff and permanent facilities with inpatient beds which provide medical services, including physician services and continuous nursing services for the diagnosis and treatment of patients who have a variety of medical conditions, both surgical and nonsurgical;
- (7) "Intoxication" means being under the influence of alcohol or other drugs, or both, which significantly impairs a person's ability to function;
- (8) "Juvenile" means any person who is under the age of eighteen (18);
- (9) "Narcotic treatment program" means a substance abuse program using approved controlled substances and offering a range of treatment procedures and services for the rehabilitation of persons dependent on opium, morphine, heroin, or any derivative or synthetic drug of that group;
- (10) "Other drugs" means controlled substances as defined in KRS Chapter 218A and volatile substances as defined in KRS 217.900;
- (11) "Patient" means any person admitted to a hospital or a licensed alcohol and other drug abuse treatment program;
- (12) "Program" means a set of services rendered directly to the public that is organized around a common goal of either preventing, intervening, or treating alcohol and other drug abuse problems;
- (13) "Secretary" means the secretary of the Cabinet for Health and Family Services;

- (14) "Treatment" means services and programs for the care and rehabilitation of intoxicated persons and persons suffering from alcohol and other drug abuse. "Treatment" includes those services provided by the cabinet in KRS 222.211 and, in KRS 222.430 to 222.437, it specifically includes the services described in KRS 222.211(1)(c) and (d); and
- (15) "Qualified health professional" has the same meaning as qualified mental health professional in KRS 202A.011, except that it also includes an alcohol and drug counselor certified under KRS Chapter 309.

➔Section 68. KRS 403.700 is amended to read as follows:

- (1) The Council on Domestic Violence and Sexual Assault is created and established for the purpose of planning and direction of legal, protection, and support services related to domestic violence and sexual assault, and to increase the awareness of all Kentuckians regarding the prevalence and impact of these crimes.
- (2) Members of the council shall include:
- (a) The Attorney General or a designee;
 - (b) The secretary of the Cabinet for Health and Family Services or a designee;
 - (c) The secretary of the Justice and Public Safety Cabinet or a designee;
 - (d) The public advocate or a designee;
 - (e) The ~~commissioner~~~~executive director~~ of the *Department for Community Based Services or a designee*~~Division of Child Abuse and Domestic Violence Services~~;
 - (f) The executive director of the Office of Legislative and Intergovernmental Services of the Justice and Public Safety Cabinet;
 - (g) The executive director of the Commission on Women;
 - (h) At the direction of the Chief Justice of the Supreme Court, the director of the Administrative Office of the Courts;
 - (i) One (1) Circuit Court Judge, one (1) family court judge, and one (1) District Court Judge, who shall be appointed by the Chief Justice of the Supreme Court;
 - (j) The executive director of the Kentucky Domestic Violence Association;
 - (k) The president of the Kentucky Domestic Violence Association or a designee;
 - (l) The executive director of the Kentucky Association of Sexual Assault Programs;
 - (m) The president of the Kentucky Association of Sexual Assault Programs or a designee;
 - (n) Two (2) members of the Senate who shall be appointed by the President of the Senate;
 - (o) Three (3) members of the House of Representatives who shall be appointed by the Speaker of the House; and
 - (p) The following members, who shall be appointed by the secretary *of the Cabinet* for Health and Family Services. To be eligible for appointment under this paragraph, a person shall have an understanding of, and demonstrated commitment to, addressing crimes involved in domestic or sexual violence:
 1. One (1) county attorney;
 2. One (1) Commonwealth's attorney;
 3. One (1) Circuit Court Clerk;
 4. One (1) sheriff;
 5. One (1) peace officer;
 6. Two (2) representatives of local domestic violence coordinating councils or sexual assault response teams;
 7. One (1) advocate for adult victims of domestic or sexual violence;
 8. One (1) advocate for child witnesses of domestic or sexual violence;
 9. One (1) physician;

10. One (1) sexual assault nurse examiner;
 11. One (1) mental health professional with demonstrated expertise in treating offenders;
 12. One (1) employee of the Department for Community Based Services who provides direct services to victims of domestic violence;
 13. One (1) person employed as a probation or parole officer; and
 14. Two (2) citizen at-large members.
- (3) The secretary of *the Cabinet for Health and Family Services* shall appoint two (2) co-chairs and two (2) vice chairs of the council. One (1) of the vice chairs shall be a council member who is a criminal justice professional. The co-chairs and vice chairs shall serve for a term of one (1) year after which they may be reappointed by the secretary.
 - (4) Council members shall serve at the pleasure of the appointing authority but shall not serve longer than four (4) years without reappointment. Members shall not serve longer than two (2) consecutive four (4) year terms.
 - (5) The council shall establish an executive committee, the membership of which shall be named by the co-chairs of the council.
 - (6) The duties and responsibilities of the council shall include but not be limited to the following:
 - (a) Promoting coordination among agencies and officials responsible for addressing domestic violence and sexual assault;
 - (b) Determining the availability of services for victims, children who witness domestic violence or sexual assault, and offenders;
 - (c) Facilitating the development of local domestic violence councils and sexual assault response teams that shall include publication of model protocols, training, and technical assistance;
 - (d) Promoting community awareness and the prevention of domestic and sexual violence;
 - (e) Providing assistance to the Attorney General, the Administrative Office of the Courts, the Justice and Public Safety Cabinet, and the Cabinet for Health and Family Services in the development of training curricula, treatment programs, and model policies related to domestic violence and sexual assault;
 - (f) Reviewing and analyzing data and information relating to domestic violence and sexual assault from existing sources including but not limited to the Department of Kentucky State Police, the Cabinet for Health and Family Services, the Department of Corrections, and the Administrative Office of the Courts;
 - (g) Recommending to the appropriate entity changes in state programs, legislation, administrative regulations, policies, budgets, and treatment and service standards relating to domestic violence and sexual assault; and
 - (h) Preparing a biennial report to be submitted no later than July 1 of every odd-numbered year to the Governor, the Legislative Research Commission, and the Chief Justice of the Supreme Court.
 - (7) The council shall establish any committees necessary to carry out its duties.
 - (8) The council shall be attached to the *Department for Community Based* ~~Division of Child Abuse and Domestic Violence~~ Services for administrative purposes. Members of the council shall be eligible to receive actual and reasonable travel expenses.
 - (9) The secretary of the Justice and Public Safety Cabinet and the secretary of the Cabinet for Health and Family Services shall provide the necessary staff to assist the council in carrying out its duties and responsibilities.
- ➔Section 69. KRS 403.707 is amended to read as follows:
- (1) The Council on Domestic Violence and Sexual Assault shall create a Sexual Assault Response Team Advisory Committee.
 - (2) The Sexual Assault Response Team Advisory Committee shall be co-chaired by the executive director of the Kentucky Association of Sexual Assault Programs and the commissioner of the Department of Kentucky State Police or the commissioner's designee.
 - (3) The membership of the Sexual Assault Response Team Advisory Committee shall consist of the following:

- (a) The executive director of the Kentucky Board of Nursing or the executive director's designee;
 - (b) The executive director of the Kentucky Nurses Association or the executive director's designee;
 - (c) The executive director of the Kentucky Hospital Association or the executive director's designee;
 - (d) The director of the Department of Kentucky State Police Crime Lab;
 - (e) The chief medical examiner or the chief medical examiner's designee;
 - (f) The ~~commissioner~~~~executive director~~ of the **Department for Community Based Services**~~Division of Child Abuse and Domestic Violence Services~~ or the ~~commissioner's~~~~executive director's~~ designee;
 - (g) The director of the Victims' Advocacy Division of the Office of the Attorney General or the director's designee;
 - (h) A sexual assault nurse examiner serving on the Governor's Council on Domestic Violence and Sexual Assault;
 - (i) A representative from a sexual assault response team serving on the Council on Domestic Violence and Sexual Assault;
 - (j) A physician appointed by the co-chairs of the Council on Domestic Violence and Sexual Assault; and
 - (k) A Commonwealth's attorney or an assistant Commonwealth's attorney appointed by the co-chairs of the Council on Domestic Violence and Sexual Assault.
- (4) Members appointed under subsection (3)(h) to (k) of this section shall serve at the pleasure of the appointing authority and shall not serve longer than four (4) years without reappointment.
- (5) The Sexual Assault Response Team Advisory Committee shall:
- (a) Serve in an advisory capacity to the Kentucky Board of Nursing in accomplishing the duties set forth under KRS 314.142;
 - (b) Serve in an advisory capacity to the Justice and Public Safety Cabinet in the development of the statewide sexual assault protocol required under KRS 216B.400(4);
 - (c) Develop a model protocol for the operation of sexual assault response teams which shall include the roles of sexual assault nurse examiners, physicians, law enforcement, prosecutors, and victim advocates;
 - (d) Provide information and recommendations concerning the activities of the agency or organization represented by each individual committee member as related to sexual assault issues and programs within the purview of the agency or organization; and
 - (e) Recommend to the Council on Domestic Violence and Sexual Assault any changes in statute, administrative regulation, training, policy, and budget to promote a multidisciplinary response to sexual assault.

➔Section 70. KRS 405.411 is amended to read as follows:

- (1) The Cabinet for Health and Family Services' designee under KRS 205.712(6) for the administration of child support may compile a list of the names of persons under its jurisdiction who have a child support arrearage that equals or exceeds six (6) months without payment, or fails, after receiving appropriate notice, to comply with subpoenas or warrants relating to paternity or child support proceedings as provided by 42 U.S.C. sec. 666(a)(16). The cabinet may furnish this list to the newspaper of general circulation in that county for publication.
- (2) The **Department for Income**~~Division of Child~~ Support, **Child Support Enforcement**, in the Cabinet for Health and Family Services shall determine uniform standards for publication. The cabinet is authorized to promulgate the necessary administrative regulations under KRS Chapter 13A to implement the provisions of this section.
- (3) For purposes of this section, "newspaper of general circulation" means a publication bearing a title or name, regularly issued at least as frequently as once a week for a definite price, having a second-class mailing privilege, being not less than four (4) pages, published continuously during the immediately preceding one (1) year period, which is published for the dissemination of news of general interest, and is circulated generally in the political subdivision in which it is published and in which notice is to be given. In any county where a

publication fully complying with this definition does not exist, the Cabinet for Health and Family Services may publish this list in the publication utilized by the Circuit Court Clerk of the county for publication of other legal notices in the county. A newspaper that is not engaged in the distribution of news of general interest to the public, but that is primarily engaged in the distribution of news of interest to a particular group of citizens, is not a newspaper of general circulation.

➔Section 71. KRS 405.435 is amended to read as follows:

- (1) An employer or labor organization in the Commonwealth of Kentucky shall provide information to the Cabinet for Health and Family Services when that employer or labor organization hires an employee who resides or works in the Commonwealth, or rehires or permits the return to work of an employee who has been laid off, furloughed, separated, granted a leave without pay, or terminated from employment, unless the reporting could endanger the safety of the employee or compromise an ongoing investigation or intelligence mission as determined by the secretary of health and family services.
- (2) The employer shall provide the information within twenty (20) days of the hiring or return to work of the employee. The information shall include:
 - (a) The employee's name, address, and Social Security number;~~and~~
 - (b) The employer's name, address, and, if the employer has been assigned one, federal and state employer identification numbers; *and*
 - (c) *The date services for remuneration were first performed by the employee.*
- (3) An employer shall report the required information by submitting a copy of the employee's W-4 form or, at the option of the employer, an equivalent form provided by the Cabinet for Health and Family Services as prescribed by administrative regulation promulgated by the Cabinet for Health and Family Services in accordance with KRS Chapter 13A.
- (4) The Cabinet for Health and Family Services shall enter all new hire information into the database of the cabinet within five (5) business days.
- (5) The Cabinet for Health and Family Services may promulgate administrative regulations in accordance with KRS Chapter 13A if the Cabinet for Health and Family Services determines exceptions are needed to reduce unnecessary or burdensome reporting or are needed to facilitate cost-effective operation of the cabinet under this section.
- (6) The Cabinet for Health and Family Services shall use the information collected pursuant to this section for the location of noncustodial parents, establishment, modification, and enforcement of child support and any other matter related to paternity or child support.
- (7) If the employer fails to report as required by this section, the Cabinet for Health and Family Services shall give the employer written notice of the provisions of this section, including the penalty for failure to report.
- (8) If the employer has not filed a report within twenty (20) days from the date that the written notice is sent to him, the Cabinet for Health and Family Services shall send a second written notice.
- (9) If the employer fails to file a W-4 or equivalent form within twenty (20) days from the date that the second written notice is sent, or supplies a false or incomplete report, and the failure is a result of a conspiracy between the employee and the employer to prevent the proper information from being filed within twenty (20) days from the date that the second written notice is sent, the Cabinet for Health and Family Services shall send the employer by certified mail, return receipt request, notice of an administrative fine. The fine shall be two hundred fifty dollars (\$250) per calendar month per person for any violation occurring after the second notice has been given, and continuing until a W-4 or equivalent form is received by the Cabinet for Health and Family Services. No fine shall be imposed for any period of less than one (1) full calendar month.
- (10) The employer shall have ten (10) days after receipt of the administrative fine notice to request a hearing before the Cabinet for Health and Family Services on whether the administrative fine was properly assessed. If a timely request for a hearing is received, the Cabinet for Health and Family Services shall schedule and conduct a hearing in accordance with administrative regulations promulgated by the cabinet in accordance with KRS Chapter 13A.

➔Section 72. KRS 405.465 is amended to read as follows:

- (1) This section shall apply only to those child support, medical support, maintenance, and medical support insurance orders that are established, modified, or enforced by the Cabinet for Health and Family Services or those court orders obtained in administering Part D, Title IV of the Federal Social Security Act.
- (2) All child support orders and medical support insurance orders being established, modified, or enforced by the Cabinet for Health and Family Services, or those orders obtained pursuant to the administration of Part D, Title IV of the Federal Social Security Act, shall provide for income withholding which shall begin immediately.
- (3) The court shall order either or both parents who are obligated to pay child support, medical support, or maintenance under this section to assign to the Cabinet for Health and Family Services that portion of salary or wages of the parent due and to be due in the future as will be sufficient to pay the child support amount ordered by the court.
- (4) The order shall be binding upon the employer or any subsequent employer upon the service by certified mail of a copy of the order upon the employer and until further order of the court. The employer may deduct the sum of one dollar (\$1) for each payment made pursuant to the order.
- (5) The employer shall notify the cabinet when an employee, for whom a wage withholding is in effect, terminates employment and provide the terminated employee's last known address and the name and address of the terminated employee's new employer, if known.
- (6) (a) An employer with twenty (20) or more employees shall notify in writing the cabinet, or its designee administering the support order, of any lump-sum payment of any kind of one hundred fifty dollars (\$150) or more to be made to an employee under a wage withholding order. An employer with twenty (20) or more employees shall notify in writing the cabinet or its designee no later than forty-five (45) days before the lump-sum payment is to be made or, if the employee's right to the lump-sum payment is determined less than forty-five (45) days before it is to be made, the date on which that determination is made. After notification, the employer shall hold each lump-sum payment of one hundred fifty dollars (\$150) or more for thirty (30) days after the date on which it would otherwise be paid to the employee and, on order of the court, pay all or a specified amount of the lump-sum payment to the **Department for Income**~~Division of Child~~ Support, **Child Support Enforcement**. The employer may deduct the sum of one dollar (\$1) for each payment.
- (b) As used in this subsection, "lump-sum payment of any kind" means a lump-sum payment of earnings as defined in KRS 427.005.
- (7) Any assignment made pursuant to court order shall have priority as against any attachment, execution, or other assignment, unless otherwise ordered by the court.
- (8) No assignment under this section by an employee shall constitute grounds for dismissal of the obligor, refusal to employ, or taking disciplinary action against any obligor subject to withholding required by this section.

➔Section 73. KRS 407.5102 is amended to read as follows:

The Circuit Court, District Court, and family courts shall be the state tribunals for judicial proceedings, and the Cabinet for Health and Family Services and the **Department for Income**~~Division of Child~~ Support, **Child Support Enforcement**, shall be the state tribunals for administrative proceedings.

➔Section 74. KRS 431.650 is amended to read as follows:

- (1) The Kentucky Multidisciplinary Commission on Child Sexual Abuse is hereby created.
- (2) The commission shall be composed of the following members:
 - (a) The commissioner of the Department for Community Based Services or a designee;
 - (b) The commissioner of the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~Mental Health and Mental Retardation Services~~ or a designee;
 - (c) One (1) social service worker who is employed by the Department for Community Based Services to provide child protective services, who shall be appointed by the secretary of the Cabinet for Health and Family Services;
 - (d) One (1) therapist who provides services to sexually abused children, who shall be appointed by the secretary of the Cabinet for Health and Family Services;
 - (e) The commissioner of the Department of Kentucky State Police or a designee;

- (f) One (1) law enforcement officer who is a detective with specialized training in conducting child sexual abuse investigations, who shall be appointed by the secretary of the Justice and Public Safety Cabinet;
 - (g) One (1) employee of the Administrative Office of the Courts appointed by the Chief Justice of the Supreme Court of Kentucky;
 - (h) Two (2) employees of the Attorney General's Office who shall be appointed by the Attorney General;
 - (i) One (1) Commonwealth's attorney who shall be appointed by the Attorney General;
 - (j) The commissioner of the Department of Education or a designee;
 - (k) One (1) school counselor, school psychologist, or school social worker who shall be appointed by the commissioner of the Department of Education;
 - ~~(l) The executive director of the Division of Child Abuse and Domestic Violence Services or a designee;~~
 - ~~(m)~~ One (1) representative of a children's advocacy center who shall be appointed by the Governor;
 - ~~(n)~~ One (1) physician appointed by the Governor; and
 - ~~(o)~~ One (1) former victim of a sexual offense or one (1) parent of a child sexual abuse victim who shall be appointed by the Attorney General.
- (3) Appointees shall serve at the pleasure of the appointing authority but shall not serve longer than four (4) years without reappointment.
- (4) The commission shall elect a chairperson annually from its membership.

➔Section 75. KRS 439.267 is amended to read as follows:

- (1) Subject to the provisions of KRS Chapter 439 and Chapters 500 to 534, any District Court, or any Circuit Court with respect to a defendant convicted in Circuit Court of a misdemeanor, may, upon motion of the defendant made not earlier than thirty (30) days after the defendant has been delivered to the keeper of the institution to which he has been sentenced, suspend the further execution of the sentence and place the defendant on probation upon terms as the court determines.
- (2) The court shall consider any motion filed in accordance with subsection (1) of this section within sixty (60) days of the filing date of that motion, and shall enter its ruling within ten (10) days after considering the motion. The defendant may, in the discretion of the trial court, have the right to a hearing on any motion he may file, or have filed for him, that would suspend further execution of sentence. Any court order granting or denying a motion to suspend further execution of sentence is not reviewable.
- (3) The authority granted in this section shall be exercised by the judge who imposed sentence on the defendant, unless he is unable to act and it appears that his inability to act should continue beyond the expiration of the term of the court. In this case, the judge who imposed sentence shall assign a judge to dispose of a motion filed under this section, or as prescribed by the rules and practices concerning the responsibility for disposition of criminal matters.
- (4) If the defendant has been convicted of a misdemeanor offense under KRS Chapter 510, or criminal attempt to commit any of these offenses under KRS 506.010, prior to considering the motion to suspend the sentence, the court may, for a misdemeanor offense specified herein, and shall, for any felony offense specified in this subsection order an evaluation of the defendant to be conducted by the sex offender treatment program operated or approved by the Department of Corrections or the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~[Mental Health and Mental Retardation Services]~~. The evaluation shall provide to the court a recommendation related to the risk of a repeat offense by the defendant and the defendant's amenability to treatment, and shall be considered by the court in determining whether to suspend the sentence. If the court suspends the sentence and places the defendant on probation, the provisions of KRS 532.045(3) to (7) shall apply.

➔Section 76. KRS 439.510 is amended to read as follows:

All information obtained in the discharge of official duty by any probation or parole officer shall be privileged and shall not be received as evidence in any court. Such information shall not be disclosed directly or indirectly to any person other than the court, board, cabinet, or others entitled under KRS 439.250 to 439.560 to receive such information, unless otherwise ordered by such court, board or cabinet. Information shall be made available to sex offender treatment programs operated or approved by the Department of Corrections or the Department for **Behavioral Health, Developmental and Intellectual Disabilities**~~[Mental Health and Mental Retardation Services]~~

who request the information in the course of conducting an evaluation or treatment pursuant to KRS 439.265(6), 532.045(3), or 532.050(4).

➔Section 77. KRS 335.010 is amended to read as follows:

- (1) It is the purpose and policy of the Commonwealth of Kentucky to protect the public from being misled by incompetent and unauthorized persons, and from unprofessional conduct on the part of qualified social workers by providing regulatory authority over persons who hold themselves out to the public as social workers.
- (2) The purpose of KRS 335.010 to 335.160 and KRS 335.990 is to promote high standards of professional performance for those engaged in the profession of social work by regulating the title, and by setting standards of qualification, training, and experience for those who seek to engage in the practice of social work.
- (3) Nothing contained in KRS 335.010 to 335.160 and KRS 335.990 shall be applicable to employees of the State Department of Education or local boards of education who meet the certification requirements in the area of social work as established, or which may be established, by the Kentucky Board of Education. Nor shall anything in KRS 335.010 to 335.160 and KRS 335.990 be construed to apply to, limit, or restrict the regulation of the title, setting of standards, qualifications, training, or experience of those who seek to engage in the practice of social work and who have been, or will be, certified by the Kentucky Board of Education for the position for which they have been employed.
- (4) Nothing contained in KRS 335.010 to 335.160 and KRS 335.990 shall require persons employed by the Commonwealth of Kentucky, the director or administrative head of a social service agency or division of a city, county or urban-county government, or applicants for such employment to be licensed.
- (5)
 - (a) Nothing contained in KRS 335.010 to 335.160 and KRS 335.990 shall require persons employed by *an organization that is exempt from federal income taxation under Section 501(c)(3) of the Internal Revenue Code, and provides evidence of its tax-exempt status,* ~~church-related or church-operated or affiliated agencies, children's homes, neighborhood centers, or other philanthropic and nonprofit field service offices~~ to be licensed.
 - (b) The provisions of KRS 335.010 to 335.160 and KRS 335.990 shall not be construed to apply to, limit, or restrict the regulation of the title, setting of standards, qualifications, training, and experience of those engaged as employees of *a tax-exempt organization* ~~[such entities]~~ in the practice of social work ~~or applied social counseling~~.
 - (c) *The exemption provided in this subsection shall not apply to the practice of clinical social work, which shall be undertaken only by a certified social worker licensed pursuant to KRS 335.080 or a licensed clinical social worker licensed pursuant to KRS 335.100.*
- (6) Nothing contained in KRS 335.010 to 335.160 and 335.990 shall prohibit volunteer health practitioners from providing services under KRS 39A.350 to 39A.366.
- (7) *Beginning on the effective date of this Act and continuing through December 31, 2016, there shall exist an amnesty period during which no disciplinary action, administrative fees, or fines shall be imposed by the board for unlicensed practice against an individual who is currently serving or who formerly served as an employee of a tax-exempt organization specified in subsection (5) of this section.*

➔Section 78. KRS 335.050 is amended to read as follows:

- (1) There is hereby created the Kentucky Board of Social Work, consisting of seven (7) members appointed by the Governor. One (1) member shall be a certified social worker under the provisions of KRS 335.010 to 335.160 and 335.990. One (1) member shall be a licensed social worker under the provisions of KRS 335.010 to 335.160 and 335.990. One (1) member shall be a licensed clinical social worker licensed under the provisions of KRS 335.010 to 335.160 and 335.990. Three (3) members shall be persons licensed by the board at any level, at the discretion of the Governor. One (1) member shall be a citizen at large who is not associated with or financially interested in the practice or business regulated. With the exception of the citizen at large, each member shall be appointed from a list of names of qualified persons submitted by any interested parties. The Governor may request the submission of additional names.
- (2) Members of the board shall be appointed for terms of four (4) years, except appointments to fill vacancies caused by a reason other than the expiration of a member's term. *A member shall not serve more than two (2) consecutive full terms. A member currently serving on the board who has served more than two (2) consecutive full terms shall be replaced by the Governor in a timely manner.* Upon recommendation of the

board, made after notice and hearing, the Governor may remove any member of the board for incompetence, neglect of duty, or malfeasance in office.

- (3) All vacancies shall be filled by the Governor.
- (4) The board shall organize upon appointment and qualification of its members, and shall elect annually from its membership a chairman, vice chairman, and a secretary. The board shall meet as frequently as it deems necessary, but not less than two (2) times each year, at such times and places as the board designates. Additional meetings may be held upon call of the chairman or upon the written request of *two (2)*~~three (3)~~ members of the board. Four (4) members of the board shall constitute a quorum.

➔Section 79. KRS 335.070 is amended to read as follows:

- (1) (a) The board shall administer and enforce the provisions of KRS 335.010 to 335.160 and KRS 335.990, and shall evaluate *applications* and *issue licenses to qualified applicants within forty-five (45) days of submission of the complete application packet and receipt of the official passing score report and the licensure fee*~~approve the qualifications of applicants for licensure~~.
- (b) *Within fifteen (15) days of accepting an applicant's payment and application packet, the board shall:*
 1. *Notify the applicant that the application packet is complete, approve the applicant to sit for the national examination, and issue a temporary permit to engage in the practice of social work; or*
 2. *Notify the applicant that the application packet is incomplete and, when all omitted application items are received, notify the applicant of receipt of the complete application packet, approve the applicant to sit for the national examination, and issue a temporary permit to engage in the practice of social work.*
- (c) *The board shall evaluate the complete application packet and, within forty-five (45) days, notify a qualified applicant of the issuance of the permanent license pursuant to KRS 335.080, 335.090, or 335.100.*
- (d) *If the board deems an applicant unqualified, the license may be denied and the temporary permit to practice social work may be revoked.*
- (e) *In order to be issued a temporary permit, an applicant shall have submitted:*
 1. *A complete application packet as provided in this subsection, with the exception of a passing score on the required examination; and*
 2. *If applying for licensure as a certified social worker or as a licensed clinical social worker, a letter from a licensed clinical social worker, or equivalent, who will supervise the applicant while under temporary permit in accordance with administrative regulations.*
- (2) The board may issue subpoenas, examine witnesses, pay appropriate witness fees, administer oaths, and investigate allegations of practices violating the provision of KRS 335.010 to 335.160 and KRS 335.990.
- (3) The board may promulgate administrative regulations pursuant to KRS Chapter 13A to carry out the provisions of KRS 335.010 to 335.160 and KRS 335.990.
- (4) The board may conduct hearings pursuant to KRS Chapter 13B and keep records and minutes necessary to carry out the functions of KRS 335.010 to 335.160 and KRS 335.990.
- (5) The board may employ any other persons it deems necessary to carry on the work of the board, and shall define their duties and fix their compensation.
- (6) The board may renew licenses and require continuing education as a condition for license renewals, *and shall authorize organizations to provide continuing education programs including but not limited to:*
 - (a) *Schools of social work accredited by the Council on Social Work Education;*
 - (b) *The National Association of Social Workers-Kentucky chapter; and*
 - (c) *The Kentucky Society of Clinical Social Workers.*
- (7) The board may, *after a hearing conducted in accordance with KRS Chapter 13B*, revoke, suspend, or refuse to issue or renew; impose probationary or supervisory conditions upon; impose administrative fines; issue written reprimands and admonishments; or any combination of actions regarding licenses and licensees.

- (8) The board may seek injunctive relief in Franklin Circuit Court to stop the unlawful practice of social work by unlicensed persons.
- (9) The board may establish, by promulgation of administrative regulations, the requirements for temporary permits to practice social work.
- (10) The board may enter into agreements with any organization for the creation and implementation of a social work impairment program, as specified in the agreement.
- (11) ***The board shall refund any levied administrative assessments that it has received for practice by unlicensed individuals employed by organizations exempted from the application of KRS 335.010 to 335.160 and 335.990 by subsection (5) of Section 1 of this Act.***

➔Section 80. The following KRS sections are repealed:

194.210 Transfer of functions of councils and committees.

194A.085 Governor's Office of Wellness and Physical Activity -- Duties, rights, and responsibilities.

194A.092 Division of Child Abuse and Domestic Violence Services.

216A.100 Provisional license.

216A.120 Courses of instruction -- Approval of out-of-state courses.

➔Section 81. The General Assembly hereby confirms the Governor's Executive Order 2011-353, dated May 19, 2011, to the extent it is not otherwise confirmed or superseded by this Act.

➔Section 82. The Finance and Administration Cabinet, which is assigned the functions, duties, and responsibilities associated with the administration of the weatherization program operated in accordance with the requirements for funding received from the United States Department of Energy and any subordinate entities in Executive Order 2011-353 and this Act, is hereby authorized to engage and contract with the Kentucky Housing Corporation to operate and manage the weatherization program if the cabinet deems it to be in the best interest of the weatherization program and the Commonwealth of Kentucky.

➔Section 83. It is the intent of the General Assembly that the amendment of statutes in this Act to effect the reorganization set forth in Executive Order 2011-353 shall not serve to void amendments made to these sections by other bills enacted during the 2012 Regular Session of the Kentucky General Assembly, regardless of whether this Act is enacted before or after those other Acts.

➔Section 84. In order to reflect the reorganization effectuated by this Act, the reviser of statutes shall replace references in the Kentucky Revised Statutes to the agencies, subagencies, and officers affected by this Act with references to the appropriate successor agencies, subagencies, and officers established by this Act. The reviser of statutes shall base these actions on the functions assigned to the new entities in this Act and may consult with officers of the affected agencies, or their designees, to receive suggestions.

Signed by Governor April 23, 2012.