

INTERIM JOINT COMMITTEE ON HEALTH SERVICES

Minutes of the 3rd Meeting of the 2024 Interim

August 28, 2024

Call to Order and Roll Call

The third meeting of the Interim Joint Committee on Health Services was held on August 28, 2024, at 9:00 AM in Room 149 of the Capitol Annex. Representative Kimberly Poore Moser, Chair, called the meeting to order, and the secretary called the roll.

Present were:

Members: Senator Stephen Meredith Co-Chair; Representative Kimberly Poore Moser Co-Chair; Senators Julie Raque Adams, Karen Berg, Danny Carroll, Donald Douglas, Greg Elkins, Shelley Funke Frommeyer, Michael J. Nemes, and Lindsey Tichenor; Representatives Steve Bratcher, Josh Bray, Lindsey Burke, Emily Callaway, Adrielle Camuel, Robert Duvall, Deanna Frazier Gordon, Amy Neighbors, Rebecca Raymer, Steve Riley, Rachel Roarx, Scott Sharp, Lisa Willner, and Susan Witten.

Guests: Robert Caudill, MD, Professor, Residency Training Director, Department of Psychiatry and Behavioral Sciences, School of Medicine, University of Louisville; Leslie Aslam, MD, Director of Behavioral Health, Sterling Health Care; Jeb Teichman, MD, Director, Families Fighting Flu; Theresa Flores, Founder, Advocate, SOAP Project; Marissa Castellanos, Founder, Director, The Coterie; Dr. Glenn Harden, Assistant Professor, Chair, Data and Research Working Group, Statewide Human Trafficking Taskforce, Asbury University; Rewa Zakharia, Chief of Criminal Litigation, Office of the Attorney General; Selena McCormick, Forensic Nurse Violence Prevention Coordinator, St. Elizabeth Healthcare; Amy Nace-DeGonda, Program Director, Bakhita Empowerment Initiative, Catholic Charities of Louisville; and Molly Lewis, Chief Executive Officer, Kentucky Primary Care Association.

LRC Staff: DeeAnn Wenk, Logan Bush, Chris Joffrion, and Becky Lancaster.

Approval of Minutes

A motion to approve the minutes of the June 18, 2024, meeting was made by Senator Douglas, seconded by Senator Meredith, and approved by voice vote.

Collaborative Care Model: Psychiatric Care in KY

Leslie Aslam, MD, Director of Behavioral Health, Sterling Health Care, discussed the lack of mental health providers, integrating mental health care into primary care, and longer initial intake sessions for a more accurate diagnosis.

In response to questions and comments from Representative Moser, Dr. Aslam stated that having longer and fewer intake appointments are less profitable but the cost of untreated mental health is more costly to the patient.

Robert Caudill, MD, Professor, Residency Training Director, Department of Psychiatry and Behavioral Sciences, School of Medicine, University of Louisville, gave a brief overview of the collaborative care model to achieve better access to care for patients.

In response to questions and comments from Senator Adams, Molly Lewis, Chief Executive Officer, Kentucky Primary Care Association, stated that the collaborative care model has an opportunity to be reimbursed and supporting the primary care doctors could create another claim but the process is too labor-intensive to be cost-effective.

In response to questions and comments from Senator Funke Frommeyer, Dr. Aslam stated that coaching patients makes appointments longer, weekly accountability coaching is not reimbursed, and peer support specialists assist therapists between visits.

In response to questions and comments from Representative Willner, Dr. Aslam stated that full mental health integration allows facilities to utilize other provider types that do not have a schedule but are available to see patients immediately to better assess and work on a patient's mental and behavioral needs.

In response to questions and comments from Senator Berg, Dr. Aslam stated that community health workers can recover some payments from reimbursements and that she is able to bill at a higher level for 90-minute intake appointments.

In response to questions and comments from Senator Nemes, Dr. Aslam stated that it varies in the number of providers that a patient may see depending on the diagnosis.

In response to questions and comments from Senator Meredith, Dr. Aslam stated that typically providers each spend about one to two hours per day working on charting, correspondence, and other administration duties in addition to seeing patients throughout the day.

Consideration of Referred Administrative Regulations

The following referred administrative regulations were placed on the agenda for consideration:

- 201 KAR 028:240 Emergency** - Occupational Therapy Licensure Compact.
- 915 KAR 001:001 Proposed** - Definitions for 915 KAR Chapter 1.
- 915 KAR 001:030 Proposed** - Cultivator.
- 915 KAR 001:040 Proposed** - Processor.
- 915 KAR 001:050 Proposed** - Producer.
- 915 KAR 001:060 Proposed** - Safety compliance facility.
- 915 KAR 001:070 Proposed** - Dispensary.
- 915 KAR 001:080 Proposed** - Transportation and delivery of medicinal cannabis.
- 915 KAR 001:090 Proposed** - Advertising.
- 915 KAR 001:100 Proposed** - Packaging and labeling of medicinal cannabis.
- 915 KAR 001:110 Proposed** - Medicinal cannabis testing.
- 915 KAR 002:001 Proposed** - Definitions for 915 KAR Chapter 2.
- 915 KAR 002:010 Proposed** - Procedures for registry identification cards.
- 915 KAR 002:020 Proposed** - Supply limits and equivalency formula.
- 915 KAR 002:030 Proposed** - Written certifications.
- 915 KAR 002:040 Proposed** - Procedures to publish list of varieties of medicinal cannabis.

All of the above listed administrative regulations were reviewed.

Sepsis in the Community

Jeb Teichman, MD, Director, Families Fighting Flu, discussed losing his son to complications from influenza or viral sepsis, the symptoms of Systemic Inflammatory Response Syndrome (SIRS), Lochlin's Law to require hospitals and urgent care centers to have sepsis training and protocols, and the importance of influenza vaccinations.

In response to questions and comments from Representative Moser, Dr. Teichman stated that sepsis-3 is another variation of sepsis.

In response to questions and comments from Senator Carroll, Dr. Teichman stated that the SIRS criteria are taught in medical schools, used in emergency rooms, but not required in the urgent care facilities.

In response to questions and comments from Representative Tichenor, Dr. Teichman stated that sepsis can be activated by a viral, fungal, or a bacterial infection.

Human Trafficking: Update on Kentucky Actions and Working with Other States

Theresa Flores, Founder, Advocate, the Save our Adolescents from Prostitution (SOAP) Project, shared her personal experience of surviving human trafficking and her work with the SOAP Project to prevent others from being abused.

Dr. Glenn Harden, Assistant Professor, Chair, Data and Research Working Group Statewide Human Trafficking Taskforce, Asbury University, discussed the Kentucky Statewide Human Trafficking Data Report anti-trafficking recommendations based on data gathered by the Kentucky Statewide Human Trafficking Task Force.

Marissa Castellanos, Founder, Director, The Coterie, discussed Kentucky's participation in regional and national anti-trafficking organizations, programs, and training efforts, the National Labor Trafficking Conference, the Love146 educational curriculum development, and the Improving Outcomes for Child and Youth Victims of Human Trafficking Project implemented by the Department for Community Based Services (DCBS) to create an evidence-based screening tool.

Rewa Zakharia, Chief of Criminal Litigation, Office of the Attorney General, discussed three ways the office assists in human trafficking prevention, four anti-human trafficking training groups, the advantages trauma-informed trainings for interviewing, the electronic crimes lab, and Charity, the electronic storage detection dog.

Amy Nace-DeGonda, Program Director, Bakhita Empowerment Initiative, Catholic Charities of Louisville, discussed the program outcomes, main types of services provided, barriers to services, and the importance of services provided that create empowerment and stability for the trafficked survivor.

In response to questions and comments from Representative Moser, Ms. Castellanos stated that DCBS has used an online training for staff that provides a basic overview of trafficking and how to access services.

Selena McCormick, Forensic Nurse Violence Prevention Coordinator, St. Elizabeth Healthcare, discussed the aspects of forensic nursing model to human-trafficking, importance of human-trafficking for healthcare providers, the follow up needed to assist patients that have been trafficked and the difference legislation for mandatory screening for providers could make in the lives of the victims.

In response to questions and comments from Senator Tichenor, Ms. Zakharia stated that it is difficult for prosecution to have a solid case because once the trafficking has stopped the victim disappears in fear. More training and resources are needed to allow the victim to feel safe to participate in the prosecution of the perpetrator.

In response to questions and comments from Representative Sharp, Ms. Nace-DeGonda stated that her organization does not bring illegal immigrants across the border but they do work with migrant refugee services and agencies. Ms. Castellanos stated that each of the Catholic Charities is an individual non-profit organization. Dr. Harden stated that the border patrol does screen asylees for human trafficking.

In response to questions and comments from Representative Camuel, Ms. Castellanos stated there is national funding for prevention education and curriculum to be used by school districts. Ms. Nace-DeGonda stated that the evidence-based programs Love146, My Life My Choice, and I Am Empowerment, are used in schools to prevent and educate about trafficking.

Adjournment

There being no further business, the meeting was adjourned at 11:18 AM.