

INTERIM JOINT COMMITTEE ON HEALTH SERVICES

Minutes of the 4th Meeting of the 2025 Interim

September 16, 2025

Call to Order and Roll Call

The fourth meeting of the Interim Joint Committee on Health Services was held on September 16, 2025, at 3:00 PM in Room 154 of the Capitol Annex. Senator Stephen Meredith, Chair, called the meeting to order, and the secretary called the roll.

Present were:

Members: Representative Kimberly Poore Moser, Co-Chair; Senator Stephen Meredith, Co-Chair; Senators Julie Raque Adams, Karen Berg, Donald Douglas, Keturah J. Herron, Michael J. Nemes, Steve Rawlings, and Lindsey Tichenor; and Representatives Josh Bray, Lindsey Burke, Emily Callaway, Adrielle Camuel, Robert Duvall, Ken Fleming, Deanna Gordon, Kim Holloway, Mary Lou Marzian, Rebecca Raymer, Scott Sharp, and Lisa Willner.

Guests: Kathryn Costanza, Program Principal, National Conference of State Legislatures (NCSL); Steven Stack, M.D., Secretary, Cabinet for Health and Family Services (CHFS); Chad Grant, Sickle Cell Ambassador; Rebecca Seavers, President, Sickle Cell Association; Chris Evans, Executive Director, Kentucky Opioid Abatement Advisory Commission (KYOAAC); and Dr. Shanna Babalonis, Director, University of Kentucky Cannabis Center.

LRC Staff: DeeAnn Wenk, Chris Joffrion, Cameron Franey, and DJ Burns.

Approval of Minutes

A motion to approve the minutes from the August 27, 2025, meeting was made by Senator Douglas, seconded by Representative Fleming, and approved after a voice vote.

Update on Federal Changes to the Medicaid Program

Kathryn Costanza, Program Principal, NCSL, gave a presentation on Medicaid provisions, including new flexibilities, funding opportunities, and key questions within the federal House Resolution 1 (H.R. 1).

In response to Senator Berg, Ms. Costanza stated NCSL does not have a position on whether H.R. 1 will be changed with future legislation. Currently, state Medicaid agencies are moving forward with the language passed.

In response to Representative Callaway, Ms. Costanza stated the Rural Health Transformation Fund guidelines contain allowable activities and three of nine possible priority areas within a state's rural health transformation plan.

In response to Representative Marzian, Ms. Costanza stated H.R. 1 does not contain any specific provisions regarding provider fraud.

Update on Rural Health Transformation Program

Steven Stack, MD, Secretary, CHFS, discussed updates to guidance on the Rural Health Transformation Fund and CHFS' effort to prepare an application for program funds.

In response to Chair Meredith, Secretary Stack stated behavioral health, telehealth, and population health are some of the issues CHFS is looking to invest in using rural health transformation funds.

In response to Representative Fleming, Secretary Stack stated rural health transformation fund proposals submitted from stakeholders to CHFS have included workforce development, telehealth, and information technology. He stated any proposal must address sustainability after initial funds have been exhausted.

Hospital Policies and Procedures for the Care of Patients with Sickle Cell Disease (2026 Regular Session Bill Request 499)

Co-Chair Moser presented 2026 RS BR 499 on behalf of Senator Gerald Neal, which mitigates the risk of opioid dependency among patients with sickle cell disease. Rebecca Seavers, President, Sickle Cell Association, discussed the importance of 2026 RS BR 499 to sickle cell patients in Kentucky. Chad Grant, Sickle Cell Ambassador, discussed reports from 2022 RS SB 276.

Update from the Kentucky Opioid Abatement Advisory Commission

Chris Evans, Executive Director, KYOAAC, presented on grants awarded by KYOAAC aimed at prevention, research, and innovation. He discussed strengthening the accountability measures by requiring organizations to report to KYOAAC on how grant funds are used.

In response to Chair Meredith, Mr. Evans stated depending on the type of organization, KYOAAC asks for metrics on individuals served and uses those metrics to determine prevention or treatment success. He stated KYOAAC can ask for funds back if they are spent outside of the contract.

In response to Representative Burke, Mr. Evans stated the research and innovation grant has a wide aperture so that any organization is able to apply, including the University of Kentucky Cannabis Center.

In response to Representative Sharp, Mr. Evans stated KYOAAC has seen a drop in opioid overdose deaths, but he could not speak to the demand for opioids.

Update from the University of Kentucky Cannabis Center

Dr. Shanna Babalonis, Director, University of Kentucky Cannabis Center, presented on the center's research activities, grants, and publications from the past year.

In response to Senator Douglas, Dr. Babalonis stated research began in 2022 with the establishment of the center by 2022 RS HB 604, although clinical trials were delayed due to drug supply. She stated epidemiology reports show cannabis smokers have higher rates of cardiac events leading to death and higher rates of cancer. Those reports need follow-up trials to determine the correlation between cannabis and these health outcomes.

In response to Representative Willner, Dr. Babalonis stated clinical trials conducted on cannabis treatment for post-traumatic stress disorder (PTSD) have been inconclusive.

In response to Senator Berg, Dr. Babalonis stated she is unaware of any pediatric deaths in Kentucky, but nationally pediatric ingestion of cannabis results in unresponsiveness leading to emergency room visits with half being discharged from the ER and the rest requiring further treatment. She stated many gray market cannabis edibles are available online and can be purchased easily without identification verification.

In response to Representative Raymer, Dr. Babalonis stated she would follow-up with symptoms seen in pediatric patients ingesting cannabis edibles containing delta 8 and delta 9.

In response to Co-Chair Moser, Dr. Babalonis stated the National Institutes of Health (NIH) grant process is becoming more difficult, but the center is optimistic about its sustainability through current and future NIH grants.

Adjournment

There being no further business, the meeting was adjourned at 4:59 PM.