

# Unofficial Document

KENTUCKY GENERAL ASSEMBLY AMENDMENT FORM  
2026 REGULAR SESSION

Amend printed copy of **HB 2/SCS 1**

On page 35, line 2, by bracketing and striking through "and"; and

On page 35, line 19, by deleting "." and inserting "; **and**" in lieu thereof; and

On page 35, between lines 19 and 20, by inserting the following:

**"(e) With regard to provider audits:**

- 1. Allow at least thirty (30) calendar days for a provider to provide or grant access to the requested records;**
- 2. Complete an audit within one hundred eighty (180) calendar days from the date on which the audit was initiated by the managed care organization unless the provider subject to the audit fails to provide or grant access to requested records in a timely manner;**
- 3. Only recoup denied payments or issue a demand for payment from a provider upon the final disposition of the audit, including the appeals process established in KRS 205.646; and**
- 4. Base recoupment of claims on the actual overpayment or underpayment of claims unless the provider agrees to a settlement to the contrary."**; and

On page 44, line 1, after the word "**section**" by inserting "**and Section 25 of this Act**"; and

On page 66, between lines 7 and 8, by inserting the following:

**➔SECTION 25. A NEW SECTION OF KRS CHAPTER 205 IS CREATED TO READ**

Amendment No. SFA 1

Rep. Sen. Craig Richardson

Committee Amendment \_\_\_\_\_

Signed: \_\_\_\_\_

Floor Amendment \_\_\_\_\_

LRD Drafter: \_\_\_\_\_

Adopted: \_\_\_\_\_

Date: \_\_\_\_\_

Rejected: \_\_\_\_\_

Doc. ID: XXXX

**Not for Filing**

AS FOLLOWS:

(1) No later than January 1, 2027, the department shall:

(a) Develop and implement a tiered priority system for assigning a priority level for each waiver program applicant who meets waiver eligibility criteria but for whom a waiver program slot is not immediately available. The tiered priority system shall be based on a standardized assessment of functional needs and risk factors included in the assessment tool developed or adopted in accordance with paragraph (b) of this subsection; and

(b) Develop or adopt a standardized assessment tool to determine an applicant's priority level. The assessment tool shall be:

1. Evidence-based and aligned with person-centered functional assessment practices;
2. Applied consistently across all waiver programs for which there is a waitlist; and
3. Administered at the time of the initial application for waiver program services.

(2) Beginning January 1, 2027, access to waiver program services and the allocation of waiver slots within any waiver program for which there is a waitlist shall be based on an applicant's assigned priority level.

(3) (a) The department shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section, including administrative regulations to establish:

1. The priority tier definitions and scoring criteria as identified in the assessment tool developed or adopted in accordance with subsection (1) of this section;

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**2. Applicant assessment and annual reassessment procedures; and**

**3. An appeals process for priority level determinations.**

**(b) Administrative regulations promulgated under this subsection shall be consistent with federal Medicaid law and federal waiver program requirements.**"; and

Renumber subsequent sections accordingly; and

On page 66, line 15, by deleting the first instance of "or"; and

On page 66, line 15, after "15" by inserting ", or 25"; and

On page 66, line 19, by deleting the first instance of "and"; and

On page 66, line 19, after "15" by inserting ", and 25"; and

On page 66, line 21, by deleting "and"; and

On page 66, line 21, after "15" by inserting ", and 25"; and

On page 66, line 23, by deleting "and 26" and inserting "25, and 27"; and

On page 67, line 23, by deleting "28" and inserting "29" in lieu thereof; and

On page 67, line 27, by deleting "28 and 29" and inserting "29 and 30" in lieu thereof.