

1 A CONCURRENT RESOLUTION establishing the Rural Health Transformation
2 Task Force.

3 WHEREAS, Kentucky is the 10th most rural state in the nation, with over 70
4 percent of its counties classified as rural; and

5 WHEREAS, rural Americans have been found to travel over twice the distance for
6 medical care than their urban counterparts; and

7 WHEREAS, a higher travel burden has been associated with delayed or foregone
8 care and missed appointments, which can lead to reduced preventative care, greater
9 disease burden, poorer treatment outcomes, and reduced quality of life; and

10 WHEREAS, several rural hospitals have closed and an estimated 35 more are at
11 risk of closure as they operate on thin margins and rely heavily on declining Medicaid
12 funding; and

13 WHEREAS, nearly one in six Kentucky women of childbearing age live in
14 maternity care deserts, more than four times the national average; and

15 WHEREAS, 17 percent of Kentuckians live with multiple chronic conditions,
16 compared with 11 percent nationally; and

17 WHEREAS, the Centers for Disease Control and Prevention reports that in 2023,
18 compared to other states, Kentucky had the highest rate of deaths from cancer, 181.6 per
19 100,000; the highest rate of deaths from kidney disease, 22 per 100,000; the second
20 highest rate of death from chronic lower respiratory disease, 57.4 per 100,000; and the
21 sixth highest rate of death from diabetes, 28.6 per 100,000; and

22 WHEREAS, nearly one-half of Kentucky's paramedics are concentrated in the
23 state's five largest counties which limits access to rural communities; and

24 WHEREAS, nearly 75 percent of the emergency medical service volunteers in
25 Kentucky work in rural communities; and

26 WHEREAS, there is a need for licensed emergency medical responders, emergency
27 medical technicians, advanced emergency technicians, and paramedics across the state,

1 especially in rural communities; and

2 WHEREAS, a shortage of qualified emergency service trainers and training sites
3 across the state disproportionately impacts training emergency service providers in rural
4 communities; and

5 WHEREAS, Kentucky ranks 40th in the nation in the number of primary care
6 physicians per 100,000 people, and only 25 percent of Kentucky physicians practice in
7 rural counties; and

8 WHEREAS, the United States Department of Health and Human Services (HHS)
9 has designated 107 Kentucky counties as medically underserved areas; and

10 WHEREAS, HHS has designated 30 rural counties in Kentucky as primary care
11 shortage areas, 17 of which are designated as high-need areas; and

12 WHEREAS, HHS estimates that an additional 388 primary care providers, 219
13 dentists, and 150 mental health providers are needed to remove the shortage designation
14 for the entire state; though simply adding providers will not necessarily address shortages
15 in underserved areas; and

16 WHEREAS, the Commonwealth of Kentucky has been awarded funding through
17 the Centers for Medicare and Medicaid Services Rural Health Transformation Fund; and

18 WHEREAS, these funds are intended to expand access and improve health
19 outcomes for rural residents across the Commonwealth; and

20 WHEREAS, the five interrelated initiatives of Kentucky's Rural Health
21 Transformation Program include rural community hubs for chronic care innovation,
22 maternal and infant health, rapid response to recovery, rural dental access, and integrated
23 emergency medical services; and

24 WHEREAS, the General Assembly has a compelling interest in monitoring the
25 implementation of these initiatives and providing input and guidance to the Cabinet for
26 Health and Family Services on the progress of this implementation; and

27 WHEREAS, the health of the rural population is of vital importance for the health

1 of all Kentuckians; and

2 WHEREAS, the General Assembly is committed to improving overall access to
3 health care services in rural communities;

4 NOW, THEREFORE,

5 ***Be it resolved by the House of Representatives of the General Assembly of the***
6 ***Commonwealth of Kentucky, the Senate concurring therein:***

7 ➔Section 1. The Legislative Research Commission is hereby directed to establish
8 the Rural Health Transformation Task Force. The task force shall:

9 (1) Identify programs, initiatives, and opportunities for:

10 (a) Expanding health care services by increasing the numbers of health care
11 providers and health care facilities, including emergency medical services and hospitals;
12 and

13 (b) Improving the physical and mental health of rural Kentuckians; and

14 (2) Examine funding models and long-term sustainability plans for achieving the
15 goals of the task force.

16 ➔Section 2. The Rural Health Transformation Task Force shall be composed of
17 the following members, with final membership of the task force being subject to the
18 consideration and approval of the Legislative Research Commission:

19 (1) Three members of the Senate to be appointed by the President of the Senate,
20 one of whom shall be designated to serve as co-chair;

21 (2) One member of the Senate to be appointed by the Minority Floor Leader of
22 the Senate;

23 (3) Three members of the House of Representatives to be appointed by the
24 Speaker of the House of Representatives, one of whom shall be designated to serve as co-
25 chair; and

26 (4) One member of the House of Representatives to be appointed by the Minority
27 Floor Leader of the House of Representatives.

1 ➔Section 3. The Rural Health Transformation Task Force shall at a minimum
2 meet monthly during the 2026 Interim of the General Assembly and shall submit
3 recommendations to the Legislative Research Commission for referral to the Interim
4 Joint Committee on Health Services by December 1, 2026.

5 ➔Section 4. Provisions of this section to the contrary notwithstanding, the
6 Legislative Research Commission shall have the authority to alternatively assign the
7 issues identified herein to an interim joint committee or subcommittee thereof, and to
8 designate a study completion date.