

1 AN ACT relating to the establishment of the Kentucky Health Command.

2 WHEREAS, the Commonwealth of Kentucky faces numerous challenges, including
3 a shortage of healthcare professionals, in its efforts to deliver quality health care in rural
4 communities across the state; and

5 WHEREAS, artificial intelligence-based technologies hold promising potential in
6 providing basic health and wellness information and education by connecting individuals
7 with healthcare providers and answering general health-related questions that can be
8 safely addressed outside of a clinical setting; and

9 WHEREAS, the development of a system that enables virtual encounters through
10 the use of avatar-based technology would facilitate meaningful communication and
11 provide ease of access for individuals to connect with an appropriate health care provider;
12 and

13 WHEREAS, to the extent federal funds may be made available in the future,
14 whether through the Rural Health Transformation Program or from other grants from the
15 Centers for Medicare and Medicaid Services, the Health Resources and Services
16 Administration, or the Department of Health and Human Services, having a uniform,
17 interoperable avatar-based virtual encounter platform available to providers in rural
18 communities will position the Commonwealth as a leader in transforming the delivery of
19 health care services to many disadvantaged communities; and

20 WHEREAS, the effective and sustainable delivery of health care services
21 increasingly depends upon the ability of health systems to leverage modern, advanced
22 technology platforms that support education, navigation, and health-related partnerships
23 aligned with patient needs;

24 NOW, THEREFORE,

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

26 ➔SECTION 1. A NEW SECTION OF KRS 42.720 TO 42.742 IS CREATED TO
27 READ AS FOLLOWS:

1 (1) As used in this section:

2 (a) "Avatar-based virtual encounter system" means a digital, interactive
3 platform that enables a user to participate in a virtual health-related
4 encounter through one (1) or more computer-generated avatars
5 representing an automated interface, a participating health care provider, a
6 user, or a partner institution tethered together within a single, unified visual
7 environment;

8 (b) "Health management services":

9 1. Means nonclinical, health-related ancillary services;

10 2. Includes:

11 a. Providing information on preventative services or services
12 designed to slow the progression of chronic diseases, including
13 screenings for basic human needs and referrals to appropriate
14 services and agencies to meet those needs;

15 b. Health promotion education to prevent illness or disease,
16 including the promotion of health behaviors and diets to increase
17 awareness and prevent the development of illness or disease;

18 c. Facilitation between a user and a health care provider when
19 cultural factors, such as language, socioeconomic status, or
20 health literacy, become a barrier to properly understanding
21 treatment options or treatment plans;

22 d. Diagnosis-related user education regarding self-management of
23 physical and mental health and treatment plan compliance;

24 e. Assisting users in understanding and comprehending their
25 electronic medical records;

26 f. Connecting users to local health care providers and assisting
27 with appointment scheduling;

1 g. Providing access for telehealth interactions with licensed health
2 care providers;

3 h. Routine follow-up assistance; and

4 i. Recommending that a user seek emergency care; and

5 3. Does not include:

6 a. The practice of medicine; or

7 b. Diagnosing or treating any disease, illness, or medical condition;
8 and

9 (c) "Rural health care providers and facilities" means licensed health care
10 providers and facilities that are located in:

11 1. Nonmetropolitan counties;

12 2. Outlying metropolitan counties with no population from an urban
13 area of fifty thousand (50,000) or more;

14 3. Census tracts with Rural-Urban Commuting Areas codes 4-10 in
15 metropolitan counties; or

16 4. Large census tracts of at least four hundred (400) square miles in
17 metropolitan counties with a population density of thirty-five (35) or
18 fewer people per square mile and Rural-Urban Commuting Area
19 codes 2-3.

20 (2) (a) There is hereby created within the Commonwealth Office of Technology an
21 agency of state government to be known as Kentucky Health Command.

22 (b) The Kentucky Health Command shall:

23 1. Employ a full-time director who shall:

24 a. Be appointed by and serve at the pleasure of the Governor; and

25 b. Have knowledge of and experience in artificial intelligence-
26 based technology platforms;

27 2. No later than January 1, 2027, designate and contract, in accordance

1 with KRS Chapter 45A, with a private sector entity to develop and
2 provide standards and qualifications, in accordance with subsection
3 (4) of this section, for the utilization of an artificial intelligence-
4 assisted virtual health platform to be made available to rural health
5 care providers and facilities; and

6 3. Establish, through the promulgation of administrative regulations in
7 accordance with KRS Chapter 13A, a process:

8 a. By which rural health care providers and facilities may contract,
9 or enter into an end user licensing agreement, for the use of the
10 artificial intelligence-assisted virtual health platform; and

11 b. For the equitable sharing of net advertising revenues. The
12 revenue sharing process developed under this subparagraph
13 shall:

14 i. Prioritize reimbursing the state for the initial costs
15 associated with development of the artificial intelligence-
16 assisted virtual health platform; and

17 ii. Once the state has recouped costs associated with
18 development of the artificial intelligence-assisted virtual
19 health platform, distribute at least eighty percent (80%) of
20 net advertising revenues from the platform to participating
21 rural health care providers and facilities based the rate of
22 utilization.

23 (3) The artificial intelligence-assisted virtual health platform shall:

24 (a) Be designed to enable user-initiated health management services;

25 (b) Have the capability of using an avatar-based virtual encounter system;

26 (c) Present the user interaction together with identifying information of
27 participating rural health care providers and facilities, accreditation

1 indicators, or other authorized entities, and may link or tether avatar
2 interactions to health-related data for the purposes of health management
3 services, navigation, education, referral, and the contextual presentation of
4 health-related information, resources, or promotions relevant to the user's
5 needs; and

6 (d) Not include or engage in the practice of medicine or the diagnosis or
7 treatment of any disease, illness, or medical condition.

8 (4) The standards and qualifications for utilization of the artificial intelligence-
9 assisted virtual health platform shall:

10 (a) Require that the developer contracted under subsection (2) of this section
11 holds the necessary patent or legal or licensing rights to the platform and
12 related technologies;

13 (b) Establish a process for the sharing and transfer of health data while
14 protecting user privacy, including certification of electronic health records,
15 interoperability, algorithm transparency, and other information sharing;

16 (c) Establish guardrails to prevent users from receiving misinformation and to
17 prevent the platform from offering or providing any service that would
18 constitute the practice of medicine or the provision of regulated health care
19 services;

20 (d) Permit the display of commercial advertising, sponsored content, and paid
21 promotions relevant to the user's health needs;

22 (e) Require that commercial advertising, sponsored content, and paid
23 promotions comply with all relevant state and federal laws and
24 administrative regulations related to medical advertising; and

25 (f) Include any other standards or qualifications deemed necessary to protect
26 users while optimizing and leveraging available technologies to promote
27 efficient delivery of health management services.

1 ➔Section 2. KRS 42.724 is amended to read as follows:

2 (1) There is hereby created within the Finance and Administration Cabinet an agency
3 of state government known as the Commonwealth Office of Technology.

4 (2) The Commonwealth Office of Technology shall be headed by an executive director,
5 also known as the chief information officer, appointed by the secretary of the
6 Finance and Administration Cabinet and approved by the Governor. Duties and
7 functions of the executive director shall include serving on the Governor's
8 Executive Cabinet and those established in KRS 42.730.

9 (3) The Commonwealth Office of Technology shall consist of the following offices,
10 each headed by an executive director and organized into divisions headed by a
11 division director:

12 (a) Office of Infrastructure Services, consisting of the:

- 13 1. Division of Network Services; and
14 2. Division of Platform Services;

15 (b) Office of Architecture and Governance, consisting of the:

- 16 1. Division of Enterprise Solutions;
17 2. Division of Mainframe Services;
18 3. Division of Geographic Information Systems; and
19 4. Division of Governance and Strategy;

20 (c) Office of the Chief Information Security Officer. The office shall ensure the
21 efficiency and effectiveness of information technology security functions and
22 responsibilities;~~and~~

23 (d) Office of Client Support Services, consisting of the:

- 24 1. Division of Field Services; and
25 2. Division of Support Services; and

26 (e) *Kentucky Health Command. The command shall oversee the development*
27 *and operation of an artificial intelligence-assisted virtual health platform in*

1 *accordance with Section 1 of this Act.*

2 (4) Executive directors and division directors appointed under this section shall be
3 appointed by the secretary with the approval of the Governor.