

local health departments included Medicaid (\$1.2 million), private insurance (\$0.3 million), restricted carryover (\$0.3 million), patient fees (\$0.1 million), and other state funds (\$0.1 million).

42 CFR Section 59 requires states to provide family planning services, referral to a health care provider for medically necessary prenatal care upon confirmation of a pregnancy, and referral arrangements for emergency medical care. The federal grant recipient must not provide, promote, refer for, or support abortion as a method of family planning.

KRS 311.715 prohibits the law from being deemed “to deprive a woman of all appropriate medical care necessary to prevent her physical death.” Therefore, there should be no threat of loss of Title X grant funding to local health departments for any referral arrangements provided for emergency medical care, which may include a referral for a possible emergent medical necessary abortion.

Part III: Differences to Local Government Mandate Statement from Prior Versions

Part II, above, refers to the introduced version of the bill.

Data Source(s): LRC staff; Cabinet for Families and Children, Department for Public Health; 42 CFR Sec. 59

Preparer: Robert Jenkins **Reviewer:** KHC **Date:** 1/22/21