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MEMORANDUM

FROM: Marie Alagia Cull
DATE: January 25, 2010
RE: Legislative Update - Week Ending Friday, January 22, 2010

This is the third week of the Legislative session. As stated previously, this is a long session – 60 days- and getting longer by the minute.

The Governor presented his budget to the General Assembly this past Tuesday. (You can watch the Governor’s budget address as well as the State of the Commonwealth address on KET at: <http://www.ket.org/legislature/>)

The budget is predicated on a 2% reduction across the executive branch agencies as well as on money from gaming (about \$780 million). The Governor’s budget has been declared “dead” by both the Speaker of the House and the President of the Senate. Speaker Stumbo has directed the Appropriations and Revenue Committee to draft a budget. In addition, he has appointed a committee to look at tax reform to get the debate started, if nothing else, this session. There appears to be a growing consensus that Kentucky’s tax structure needs to be reviewed and changed. Issues being considered include broadening the sales tax to cover services, reducing the sales tax, and/or eliminating/reducing personal and corporate income taxes. While it is unlikely such a comprehensive and complicated issue can be resolved this session, there is talk of a special session in the summer or taking up the issue during the 2011 legislative session. The filing deadline for 100% of the House seats and 50% of the Senate seats is Tuesday, Jan. 26 so the discussion will become more specific after that. Many legislators already have opposition and several have declared their intention not to run again.

The Commonwealth faces up to a \$1.5 billion dollar shortfall in the next biennium. The Governor’s budget can be reviewed at: <http://www.osbd.ky.gov/>
A summary of the Medicaid budget is attached; it is very general.

General information

Information on legislators can be found at the Legislative Research Commission website: <http://lrc.ky.gov/Legislators.htm>.

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Governor Beshear hosts a weekly web address each Friday. This week the Governor talks about heating assistance. Previous addresses can be seen at the web site as well. <http://www.governor.ky.gov/media/commentary.htm>

The LRC has added a feature to make its web site accessible through iPhones. To gain access to the new site, go to www.lrc.ky.gov/isite/index.html, click on the “+” at the bottom of the iPhone and then click “Add to home screen.” This will add an LRC app to the iPhone that makes the website easier to navigate.

Attached is a bill tracker listing all of the bills we are watching. In addition, I have attached a “Miscellaneous” bill list of other bills of interest. If you would like any of the bills on the “Miscellaneous” tracker added to the tracker, please let me know. I will only send the “Miscellaneous” bill tracker occasionally. Also, for more general information about the session, LRC issues a bulletin called “Capitol Notes”. http://www.lrc.ky.gov/pubinfo/capitol_notes.htm

Here is a summary of some of the bills on the tracker.

HB 41/HM – <http://www.lrc.ky.gov/record/10RS/HB41.htm> filed by Rep. Larry Clark (speaker pro-tem) – “AN ACT relating to continuity of health care”.

This bill addresses the Norton/Anthem contract dispute. Arguably, this bill is over-reaching since current law has some protections for patients – they just weren’t explained or implemented very well when the dispute was going on. The bill requires the following: - contracts between an acute care hospital and a managed care company would be required to include the following provisions: - a term of not less than 3 years; notice by the hospital to the MCO and DOI at least 6 months prior to the termination/non-renewal of the agreement; procedures for the continued access of the insureds to be developed not less than 30 days prior to the termination and notice to the insureds not less than 20 days prior to the termination. The procedures for continuity of care would include a provision for the insured or treating provider for an expedited internal and external appeal and a provision for mediation or binding arbitration of any dispute between the MCO and the hospital regarding an insured’s access to care under the continuity of care provision.

The bill was heard in the Banking and Insurance Committee meeting this week and passed out of the Committee to the Consent Calendar. There was little or no discussion of the bill other than the sponsor’s explanation. The bill has been taken from the Consent calendar indicating that it may be amended to address both provider and insurer concerns.

HB 65 <http://www.lrc.ky.gov/record/10RS/HB65.htm> - [T. Burch](#), [D. Horlander](#) AN ACT relating to acupuncture.

This bill would change acupuncture from a certified to a licensed profession in Kentucky and “clarify” an acupuncturist’s duty vis-a-vis a physician who has the same patient. The bill

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was amended in the House Health and Welfare Committee on Thursday to delete all provisions other than the changes needed to change certification to licensure.

[HB 72/FN](http://www.lrc.ky.gov/record/10RS/HB72.htm) -<http://www.lrc.ky.gov/record/10RS/HB72.htm> [T. Burch](#), [B. DeWeese](#), [L. Belcher](#), [S. Brinkman](#), [R. Crimm](#), [C. Embry Jr.](#), [J. Glenn](#), [K. Hall](#), [B. Housman](#), [M. Marzian](#), [K. Stevens](#), [D. Watkins](#) AN ACT relating to the Colon Cancer Screening Program, and making an appropriation therefor.

This bill amends Ky's current law regarding colon cancer screening to establish the Kentucky Colon Cancer Screening Program fund to be used by the Department for Public Health for education and colon cancer screening. It enables the DPH to establish an income based fee structure to accommodate more people in the program. \$1 million is appropriated in the first year and \$2 million in the second year. The bill passed favorably out of the House Health and Welfare Committee and has been recommitted to the House Appropriations and Revenue Committee.

[HB 127/LM/CI](http://www.lrc.ky.gov/record/10RS/HB127.htm) <http://www.lrc.ky.gov/record/10RS/HB127.htm> [R. Meeks](#), [T. Riner](#), [S. Westrom](#) AN ACT relating to expungement of criminal records.

HB 127 amends KRS 431.076, which is grouped with other statutes addressing general provisions concerning crime and punishment. The bill's provisions apply retroactively. KRS 431.076 provides for the expungement of criminal records for those found not guilty of crimes or for whom charges have been dismissed with prejudice. Currently, courts are granted the discretion to expunge records on motion. As appropriate, the Commonwealth/County Attorney and Cabinet for Health and Family Services must be notified and given an opportunity to respond to the expungement motion. HB 127 would require a court to automatically file an order to expunge and destroy records related to a charge when a person has been found not guilty of a crime or it has been dismissed with prejudice or, in a newly-created category, where a conviction has been reversed on appeal and a retrial is either prohibited or not contemplated. Language concerning the motion and chance of response from the Commonwealth/County Attorney and Cabinet has been deleted. A new provision would require the Cabinet to expunge all records concerning a criminal offense or substantiated child abuse or neglect in the circumstances described above.

This bill has been assigned to the House Judiciary Committee.

[HB 136/LM](http://www.lrc.ky.gov/record/10RS/HB136.htm) - <http://www.lrc.ky.gov/record/10RS/HB136.htm> [R. Henderson](#) AN ACT relating to substance endangerment of a child prior to birth.

The bill creates a new section of KRS 530, which is that part of the Kentucky Penal Code addressing "Family Offenses." Other offenses in this section of the KRS include incest, nonsupport and unlawful transaction with a minor. HB 136 creates a felony offense of "substance endangerment" of a child prior to birth. A woman would be guilty of the crime if she knows she is pregnant and the baby is born with evidence of controlled substances or alcohol in

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bodily substances, symptoms of withdrawal, or a health problem as a result of the mother's use of illegal controlled substances or alcohol. If the child is born with a serious physical injury, the crime is a Class C felony otherwise it is a Class D felony. Toxicology tests are used to establish a violation.

This bill has been assigned to the House Judiciary Committee.

HB 165 <http://www.lrc.ky.gov/record/10RS/HB165.htm> - **R. Damron** AN ACT relating to Kentucky Access.

This bill would amend KRS 304.17B-015, governing Kentucky's high risk pool, Kentucky Access to require Kentucky residency for eligibility, to clarify that eligible individuals cannot be eligible for other group health insurance coverage but may be eligible for individual coverage, to provide that dependents are not be eligible if group coverage has been waived, and to clarify those related individuals who are permitted to pay a member's premium. The bill would also delete the requirement that one offered plan shall be the standard benefit plan. The bill also includes language that amends KRS 344.040 to allow employers to charge smokers a higher rate for an employer-sponsored health plan and to offer incentives for smoking cessation. The bill's title has been changed to "An Act relating to health insurance." A floor amendment has been filed to allow employers to charge obese members a higher rate for an employer-sponsored health plan and to offer incentives for weight loss. The bill is posted for passage on the House floor on Wednesday, Jan. 27th.

HB 179 – <http://www.lrc.ky.gov/record/10RS/HB179.htm> – **M. Marzian** – AN ACT relating to nurses.

The bill amends the nursing statutes to change the term "advanced registered nurse practitioner" to "advanced practice registered nurse" (APRN). An APRN is defined as a certified nurse anesthetist, certified nurse midwife, or clinical nurse specialist, who is licensed to engage in advance practice registered nursing pursuant to KRS 314.042 and certified in at least one population focus. "Population focus" is defined to include the following 6 categories: family or individual across the lifespan; adult health and gerontology; neonatology; pediatrics; women's health and gender-related health; and psychiatric mental health.

The bill also provides immunity for any person who complains or participates in a proceeding under Chapter 314, provides a deliberative privilege for Board members and employees and classifies investigative information confidential except as provided in KRS 61.878.

Added to the list of behavior which must be reported to the Board is the suspicion of violating the confidentiality of a patient. (Page 90). The Board is given authority to discipline a nurse who has violated patient confidentiality. (Page 94). Applicants are required to disclose any other negative action regarding agency professional or business licenses. (Page 95). If an impaired nurse participates in the "alternative to discipline" program, the Board would be required to disclose the participation but no other information. (Page 101).

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The Board is given the authority to set standards for the establishment and outcomes of nursing education programs, to approve the programs and to determine whether a school should be closed. (Page 96).

This bill is being promoted by the Ky Board of Nursing.

The bill has been posted for consideration in the House Health and Welfare Committee and will likely be heard on Thursday, Jan. 30th.

[HB 192](http://www.lrc.ky.gov/record/10RS/HB192.htm) <http://www.lrc.ky.gov/record/10RS/HB192.htm> - [T. Burch](#), [T. Riner](#), [S. Westrom](#)

AN ACT relating to public information in child fatality cases.

This bill would amend KRS 620.050 to require, rather than permit, the Cabinet for Health and Family Services to publicly disclose information related to child fatalities in the case of child abuse or neglect.

The bill has been posted for consideration in the House Health and Welfare Committee and will likely be heard on Thursday, Jan. 30th.

[HB 193/FN](http://www.lrc.ky.gov/record/10RS/HB193.htm) <http://www.lrc.ky.gov/record/10RS/HB193.htm> - [T. Burch](#) AN ACT relating to Supports for Community Living, making an appropriation therefor, and declaring an emergency.

This bill would amend KRS 142.363 to require that administrative regulations be promulgated to provide for an annual cost of living increase in accordance with the consumer price index for providers of supports for community living services and other providers of identical services and require a 7.8% rate increase for providers of supports for community living services to recruit and retain staff. The bill has an effective date of July 1, 2010. The Cabinet has said that the only other Medicaid program that provides identical services is the Michelle P. waiver program. The fiscal note is a cost of \$17,355,400 over the biennium.

Testimony on this bill was heard on Thursday but no vote was taken. If the bill were to pass out of committee, it would be recommitted to Appropriations and Revenue because of the fiscal impact.

[HB 250/LM](http://www.lrc.ky.gov/record/10RS/HB250.htm) – <http://www.lrc.ky.gov/record/10RS/HB250.htm>. – Rep. Tom Riner. AN ACT relating to the protection of adults.

This bill would amend the statutes governing personal services agencies by prohibiting an agency or employee thereof from accepting gifts or gratuities of more than \$100 over the course of a calendar year if personal services are provided to that client in the client's home, and the client is mentally disabled or mentally ill, and 60 years of age or more.

A violation of the law will result in a fine of up to \$250 or double the amount of the value of the gifts or gratuities received.

The Act is entitled “The Carl Everett Pendleton, Sr. Adult Protection Act of 2010.”

This bill has been assigned to the House Health and Welfare Committee.

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[HB 254/HM](http://www.lrc.ky.gov/record/10RS/HB254.htm) – <http://www.lrc.ky.gov/record/10RS/HB254.htm>. – Joseph Fischer, Mike Harmon, Adam Koenig, Brad Montell, Addia Wuchner. AN ACT relating to health insurance.

This bill provides authority for any individual or business entity domiciled in Kentucky to refuse to purchase health insurance coverage notwithstanding any federal fines, mandates, taxes or penalties to the contrary. The bill also provides authority for foreign health insurers to offer group and individual health benefit plans to Kentuckians notwithstanding any law to the contrary.

The Commissioner of the Department for Insurance would be responsible for implementing regulations to accommodate the changes in federal and state law as a result of federal law changes.

This bill has been assigned to the House Banking and Insurance Committee.

[HB 258/LM](http://www.lrc.ky.gov/record/10RS/HB258.htm) <http://www.lrc.ky.gov/record/10RS/HB258.htm> - [T. Burch](#) AN ACT relating to the accreditation of health departments and making an appropriation therefor.

HB calls for the appropriation of \$500,000 annually to fund a newly created Kentucky Commission on Public Health within the Finance and Administration Cabinet. The bill would add a new section to KRS Chapter 211, “State Health Programs.” The Commission would ensure that all health departments are accredited by the Public Health Accreditation Board and that they implement quality improvement efforts. It would also make recommendations on ways to improve health departments and seek resources and grants for health departments.

The 11-member Commission would be headed by an executive director and report annually to the Governor and the Interim Joint Committee on Health and Welfare. Members would serve 4-year terms and would include the Commissioner of the Department for Public Health and the following appointments to be made by the Governor: 2 deans, 2 health department directors, a public health employee, a local board of health member, 2 consumers and 2 public health employees.

This bill has been assigned to the House Health and Welfare Committee.

[HB 259](http://www.lrc.ky.gov/record/10RS/HB259.htm) - <http://www.lrc.ky.gov/record/10RS/HB259.htm> [T. Burch](#) AN ACT relating to the Kentucky Hemophilia and Blood Disorder Program.

HB 259 replaces the Kentucky Hemophilia and Blood Disorder Program and the Hemophilia Advisory Committee currently established under KRS 200 “Assistance to Children” with the Kentucky Hemophilia and Blood Disorder Program and the Kentucky Hemophilia and Blood Disorder Board to be established under KRS 214 “Diseases.”

The current Committee is a 9-member advisory body to the Commission for Children with Special Health Care Needs; the new Board would be a 9-member advisory body to the Program and would be created within the Department for Public Health. The Program’s purpose would be to address issues concerning hemophilia or related blood disorders and to assist eligible patients in securing health benefit coverage or financial assistance.

The Program is charged with developing programs for the diagnosis and treatment of hemophilia and related blood disorders, including but not limited to home care and medical and

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dental procedures. It would provide health insurance case management services and refer to Kentucky Access a patient not covered by Medicaid, Medicare or other insurance plans. The Program would seek funding sources, educate health care providers and establish community educational programs. A Kentucky resident with a medical diagnosis of hemophilia or related disorder who has a gross family income of at or below 200% of the federal poverty level would be eligible for Program services. Applicants shall have applied for private health insurance coverage and, if denied, apply for Medicaid coverage. Once accepted for Medicaid, patients must meet all Medicaid requirements to stay in the Program. The Program may pay health insurance premiums, including Medicaid premiums, for eligible participants. Program services are to be provided in accord with fund availability.

The new Board would be chaired by the commissioner of the Department for Public Health and would include as members: the executive director of the Commission for Children with Special Health Care Needs, the Department of Insurance commissioner, a UK and a U of L representative and 2 citizens to be appointed by the Governor. In addition, the Governor would appoint 2 representatives from a list of 3 persons nominated by the Kentucky Chapter of the National Hemophilia Foundation, the KMA, the KPA and the KHA.

This bill has been assigned to the House Health and Welfare Committee.

[HB 263/LM](http://www.lrc.ky.gov/record/10RS/HB263.htm) - <http://www.lrc.ky.gov/record/10RS/HB263.htm> - [T. Burch](#) An ACT relating to the prevention of opioid drug overdose.

HB 263 adds a new section to KRS 218A “Controlled Substances” to create the Opioid Drug Overdose Prevention Program within the Department for Public Health. The Program would provide opioid overdose prevention, recognition and response education and produce and distribute media materials on overdose prevention and response. It would establish policies and programs to facilitate the prescribing of opioid antidotes, which are defined in the bill as naloxone hydrochloride or other similar FDA-approved drugs for the treatment of drug overdose. The Program would call for collaboration among health care providers to promote the prescribing, dispensing, and distribution of opioid antidote and for the preparation of curricula for use by those interested in the prevention of opioid drug overdose.

A health care provider prescribing an opioid antidote must ensure the patient receives patient information, which is defined in the bill to include information on opioid drug overdose prevention and recognition, rescue breathing, 911, antidote administration, and care for the victim after administration of the antidote. “Patient” is defined in the bill as a person who may be in a position to assist an individual during an overdose and who is not at risk for overdose. A physician, paramedic, nurse, physician assistant or pharmacist could provide patient information and could train nonlicensed individuals to administer an opioid overdose antidote. A delegation of the provision of patient information could be made by written agreement. In an emergency, a nonlicensed individual who has received patient information could administer an opioid antidote. Such an administration would not be considered professional practice and would not subject the person to criminal prosecution. Likewise, a health care provider who in good faith prescribes or

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dispenses the antidote to a person he deems capable of administering the drug in an emergency shall be immune to civil liability and professional licensing actions.

HB 263 amends KRS 311A, “Emergency Medical Services,” to allow an EMT to administer an opioid antidote and require that ambulance providers keep a supply of the antidote and establish medical protocols for cases of possible opioid drug overdose. It also amends KRS 15A.342, which addresses the Office of Drug Control Policy within the Justice and Public Safety Cabinet, to specify that the Office has oversight over the Program.

This bill has been assigned to the House Health and Welfare Committee.

[HB 266](http://www.lrc.ky.gov/record/10RS/HB266.htm) – <http://www.lrc.ky.gov/record/10RS/HB266.htm> – [T. Edmonds](#) – AN ACT relating to personal identification for prescription drugs.

This bill would amend KRS 218A.202 to allow a patient filling a prescription for a Schedule II, III, IV, or V controlled substance to use the patient's Social Security number, driver's license number, or number appearing on an identification card issued under KRS 186.412 as the patient identifier required in the statute.

This bill has been assigned to the House Health and Welfare Committee.

[HB 285/LM/CI](http://www.lrc.ky.gov/record/10RS/HB285.htm) - <http://www.lrc.ky.gov/record/10RS/HB285.htm> - [A. Wuchner](#), [L. Belcher](#), [S. Brinkman](#), [T. Burch](#), [J. Carney](#), [R. Crimm](#), [B. Farmer](#), [J. Fischer](#), [J. Jenkins](#), [T. Kerr](#), [S. Lee](#), [M. Marzian](#), [R. Nelson](#), [M. Rader](#), [T. Riner](#), [S. Westrom](#), [J. York](#) AN ACT relating to pediatric abusive head trauma.

HB 285 amends a number of statutes to include provisions concerning awareness and training regarding pediatric abusive head trauma (PAHT).

The first section of the bill is a non-codified acknowledgement by the General Assembly of three Norton parent education pilot projects that began this month and expresses its hope that the pilot project will reduce pediatric head trauma. The bill requests that the pilot project findings be shared with the Interim Joint Committee on Health and Welfare.

The definition of pediatric abusive head trauma is set forth in KRS 15.310, which provides definitions for the Kentucky Law Enforcement Council and police officer certification and training. PAHT is defined generally as the injuries that result from what is often referred to as “shaken infant syndrome,” including but not limited to brain damage, eye damage or hearing loss, paralysis, death and central nervous system injuries. All students attending law enforcement training must be trained in PAHT and officers must undergo a professional development course of 1.5 hours at least one time every 5 years.

An amendment to KRS Chapter 158 “Conduct of Schools – Special Programs” would encourage an educational segment on PAHT during the student’s final year in high school. The secretary of the Cabinet for Health and Family Services would be encouraged to train Department for Community Based Services front-line staff on PAHT. The Department of Corrections would include a 1.5 hour course on PAHT for inmates, and all practicing guardian ad litem attorneys would be required to attend a 1.5 hour training course in PAHT to be offered by the Administrative Office of the Courts. Prospective adoptive parents would also be required

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to attend a 1.5 hour course on PAHT, as would employees of licensed child care centers. The Cabinet for Health and Family Services' Health Access Nurturing Development Services (HANDS), a voluntary statewide home visitation program targeted towards at-risk parents, would include a PAHT educational component.

KRS 216B, "Licensure and Regulation of Health Facilities and Services," would include a new section mandating continuing PAHT education for all health care professionals practicing in urgent treatment or urgent care facilities. The State Board of Medical Licensure would be required to ensure that practicing pediatricians, radiologists, family practitioners, trauma physicians, and emergency medicine physicians demonstrate completion of at least a 1.5 hour course in PAHT. Physician assistants, nurses, paramedics, EMT/first responders and social workers would be required to receive 1.5 hours of training as well. Foster parents who receive placements of children younger than 5 would attend a PAHT educational session one time every 5 years.

This bill has been assigned to the House Health and Welfare Committee.

[HB 300](http://www.lrc.ky.gov/record/10RS/HB300.htm) - <http://www.lrc.ky.gov/record/10RS/HB300.htm> [M. Cherry](#), [W. Coursey](#), [C. Embry Jr.](#), [M. Henley](#), [M. King](#), [F. Nesler](#), [S. Rudy](#), [T. Thompson](#), [B. Yonts](#) AN ACT relating to emergency authority for pharmacists

This bill would create a new section of KRS Chapter 315, the pharmacy practice act, to authorize the Governor during a declared state of emergency to grant to pharmacists the emergency authority to dispense up to a 30 day supply of maintenance medication, administer immunizations to children, operate temporarily a pharmacy in an area not designated on the pharmacy permit, and dispense drugs as needed to treat or prevent the ailment that caused the emergency. The Kentucky Board of Pharmacy would promulgate administrative regulations to implement the law.

The bill was originally assigned to the House Health and Welfare Committee but has been reassigned to the House State Government Committee.

[SB 1](http://www.lrc.ky.gov/record/10RS/SB1.htm) – <http://www.lrc.ky.gov/record/10RS/SB1.htm> – [D. Williams](#) – AN ACT relating to primary stroke center certification.

This bill creates a new section of KRS Chapter 216B (the CON law) to require the secretary of the Cabinet for Health and Family Services to designate any acute care hospital as a primary stroke center that has received a primary stroke center certification from the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), to suspend or revoke a designation if certification is withdrawn and promulgate administrative regulations to establish the criteria for designation. Sen. Williams has said he has been working with U/L on this bill because of the importance of the public understanding where to go to receive help – noting his late father's stroke.

This bill was amended to include other forms of accreditation and to delete the requirement that the Cabinet promulgate a regulation.

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The bill has passed the Senate, been received in the House but has not been assigned to a House committee.

SB 3 - <http://www.lrc.ky.gov/record/10RS/SB3.htm> **B. Smith, D. Seum, J. Schickel, D. Thayer, E. Tori, J. Westwood** AN ACT proposing to create a new section of the Constitution of Kentucky, adopting a 21st Century Bill of Rights.

AND

HB 253/LM - <http://www.lrc.ky.gov/record/10RS/HB253.htm> **D. Floyd, B. Montell, R. Crimm, J. DeCesare, T. Moore, D. Osborne, S. Santoro, A. Wuchner** AN ACT proposing to create a new section of the Constitution of Kentucky, adopting a 21st Century Bill of Rights.

SB 3 and HB 253 propose an amendment to the Bill of Rights of the Constitution of Kentucky. “Kentucky’s 21st Century Bill of Rights” would require a reasonable period of time for public review of revenue measures and would prohibit a person, employer or health care provider from being required to participate in a health care system or to provide abortion services. The bills would also bar the prevention of the severing of coal, allow for the posting of the Ten Commandments as part of a historical display and bar laws that require a law-abiding person to surrender firearms. Additionally, in the absence of a compelling governmental interest, no law could prevent a person from acting in a manner motivated by religious belief. Section 2 of the bills contain proposed language to submit to the voters for a constitutional amendment.

SB 3 passed out of the Senate State Government Committee on a strict party vote. 2 floor amendments have been filed to add further protections/clarifications.

SB 18 – <http://www.lrc.ky.gov/record/10RS/SB18.htm> — **J. Denton, W. Blevins Jr., P. Clark, D. Harper Angel, J. Turner** AN ACT relating to health care services provided in clinical trials for the treatment of cancer.

This bill would clarify the responsibilities of a health insurance company and a clinical trial sponsor regarding payment for services received during the course of the clinical trial. A definition for “routine patient health care costs” excludes all costs related to the clinical trial but includes coverage for costs incurred in the course of the cancer clinical trial if the plan would have provided coverage had the cost not been incurred during a cancer clinical trial.

This bill was introduced in 2009 in both the Senate (SB 102 – never got a hearing) and the House (HB 30 – passed House but never got a hearing in the Senate). In 2008 HB 317 was amended to apply only to Phase III clinical trials.

The bill has been assigned to the Senate Banking and Insurance Committee.

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[SB 59](http://www.lrc.ky.gov/record/10RS/SB59.htm) – <http://www.lrc.ky.gov/record/10RS/SB59.htm> – [J. Denton](#), [R. Webb](#) – AN ACT relating to prescription drugs.

This bill amends the Rx pedigree bill passed in 2008 to exclude blood banks, medical nitrous oxide, oxygen and veterinarian drugs from the provisions of the law. The bill passed the Senate and the House Health and Welfare Committee last year and was on the Consent Calendar. Rep. Burch filed an amendment to add one of Sen. Denton's bills to it and it never got a vote on the House floor.

[SB 75](http://www.lrc.ky.gov/record/10RS/SB75.htm) – <http://www.lrc.ky.gov/record/10RS/SB75.htm>, – [G. Tapp](#), [D. Boswell](#) – AN ACT relating to nursing.

This bill amends the nurse practice statute to delete the requirement that an ARNP have a collaborative care agreement with a physician for prescribing and dispensing non-scheduled legend drugs. The bill also provides that an ARNP with a CAPA-CS for 3 years and no disciplinary action against his/her license or criminal conviction relating to controlled substances then the CAPA-CS requirement will no longer need to be met. The nurse will notify the KBN which will notify the KBML. This bill is being pushed by the Kentucky Coalition of Nurse Practitioners and Nurse Midwives.

[SB 99](http://www.lrc.ky.gov/record/10RS/SB99.htm) - <http://www.lrc.ky.gov/record/10RS/SB99.htm> [T. Buford](#) AN ACT relating to quality assurance in pharmacies.

This bill would require pharmacies to have a "Quality assurance program"; a program that documents and assesses medication errors to determine cause and appropriate response as part of a mission to improve the quality of pharmacy services and prevent errors. The bill also requires pharmacies to maintain a quality assurance program that is privileged and provides that a medication error by a pharmacist does not constitute unethical or unprofessional conduct unless it constitutes a willful disregard for patient health and safety or is grossly negligent.

The bill has not been assigned to a Committee.