

## Kentucky - State Required Benefits

Benefit	Name of Required Benefit	Market Applicability	Citation Number
<b>Hospice Services</b>	Hospice	Individual, small group, basic health benefit plans & health benefit plans	KRS 304.17A-096 & KRS 304.17A-250(6)
<b>Home Health Care Services</b>	Home health care	Individual, group, blanket, basic health benefit plans	KRS 304.17-313, KRS 304.18-037, KRS 304.17A-096, KRS 304.32-280, & KRS 304.38-210
<b>Emergency Room Services</b>	Emergency medical conditions and emergency department services	Basic health benefit plans & health benefit plans	KRS 304.17A-096 & KRS 304.17A-580
<b>Inpatient Hospital Services (e.g., Hospital Stay)</b>	Minimum inpatient post-delivery care for a mother and her newly-born child	Health benefit plans	KRS 304.17A-145
<b>Inpatient Physician and Surgical Services</b>	Breast cancer treatment with high-dose chemotherapy with autologous bone marrow transplantation or stem cell transplantation	Kentucky contracts & certificates & health benefit plans	KRS 304.17-3165, KRS 304.17A-135, KRS 304.18-0985, KRS 304.32-1595 & KRS 304.38-1936
<b>Prenatal and Postnatal Care</b>	Newborn coverage	Individual, small group, and large group	KRS 304.17-042, KRS 304.17A-139, KRS 304.18-032, KRS 304.32-153 & KRS 304.38-199
<b>Habilitation Services</b>	Autism spectrum disorders	Individual and small group health benefit plans	KRS 304.17A-143 & 806 KAR 17:460
<b>Habilitation Services</b>	Autism spectrum disorders	Large group health benefit plans	KRS 304.17A-141 & 142
<b>Hearing Aids</b>	Hearing aids and related services	Health benefit plans	KRS 304.17A-132
<b>Preventive Care/Screening/Immunization</b>	Colorectal cancer screenings	Health benefit plans	KRS 304.17A-257
<b>Preventive Care/Screening/Immunization</b>	Mammograms	Basic health benefit plans	KRS 304.17A-096(3)
<b>Preventive Care/Screening/Immunization</b>	Ob/GYN annual visit	Individual, small group, and large group	KRS 304.17A-647

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<b>Preventive Care/Screening/Immunization</b>	Mammography	Kentucky contracts & certificates, basic health benefit plans, health benefit plans	KRS 304.17-316, KRS 304.17A-096(3), KRS 304.17A-133, KRS 304.18-098, KRS 304.32-1591 & KRS 304.38-1935
<b>Diabetes Care Management</b>	Diabetes	Basic health benefit plans & health benefit plans	KRS 304.17A-096 & KRS 304.17A-148
<b>Applied Behavior Analysis Based Therapies</b>	Autism spectrum disorders	Individual and small group health benefit plans	KRS 304.17A-143 & 806 KAR 17:460
<b>Applied Behavior Analysis Based Therapies</b>	Autism spectrum disorders	Large group health benefit plans	KRS 304.17A-141 & 142, 143
<b>Cochlear Implants</b>	Cochlear implants	Health benefit plans	KRS 304.17A-131
<b>Dental Anesthesia</b>	Anesthesia and hospital or facility charges for dental procedures	Health benefit plans	KRS 304.17A-149 & 806 KAR 17:095
<b>Inherited Metabolic Disorder - PKU</b>	Inborn errors of metabolism or genetic conditions	Health benefit plans	KRS 304.17A-258(2)
<b>Mental Health Other</b>	Treatment of mental health conditions to be covered under same terms and conditions as treatment of physical health conditions	Health benefit plans	KRS 304.17A-661
<b>Treatment for Temporomandibular Joint Disorders</b>	Temporomandibular and joint (TMJ) disorder and craniomandibular jaw (CMJ) disorder	Kentucky contracts & certificates	KRS 304.17-319, KRS 304.18-0365, KRS 304.32-1585, KRS 304.38-1937, & 806 KAR 17:090
<b>Second Opinion</b>	Second opinion	Individual, small group, and large group	KRS 304.17A-520(4)