

## Kentucky - State Required Benefits

Benefit	Name of Required Benefit	Market Applicability	Citation Number
Hospice Services	Hospice	Individual, small group, basic health benefit plans & health benefit plans	KRS 304.17A-096 & KRS 304.17A-250(6)
Home Health Care Services	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
Emergency Room Services	Emergency medical conditions and emergency department services	Basic health benefit plans & health benefit plans	KRS 304.17A-096 & KRS 304.17A-580
Inpatient Physician and Surgical Services	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
Prenatal and Postnatal Care	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
Habilitation Services	Autism spectrum disorders	Individual and small group health benefit plans	KRS 304.17A-143 & 806 KAR 17:460
Habilitation Services	Autism spectrum disorders	Large group health benefit plans	KRS 304.17A-141 & 142
Hearing Aids	Hearing aids and related services	Health benefit plans	KRS 304.17A-132
Preventive Care/Screening/Immunization	Colorectal cancer screenings	Health benefit plans	KRS 304.17A-257
Preventive Care/Screening/Immunization	Mammograms	Basic health benefit plans	KRS 304.17A-096(3)
Preventive Care/Screening/Immunization	Ob/GYN annual visit	Individual, small group, and large group	KRS 304.17A-647

<b>Benefit</b>	<b>Name of Required Benefit</b>	<b>Market Applicability</b>	<b>Citation Number</b>
<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>Temporomandibular joint disorder and craniomandibular disorder</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)