## 205.510 Definitions for medical assistance law.

As used in this chapter as it pertains to medical assistance unless the context clearly requires a different meaning:

- (1) "Chiropractor" means a person authorized to practice chiropractic under KRS Chapter 312;
- (2) "Council" means the Advisory Council for Medical Assistance;
- (3) "Dentist" means a person authorized to practice dentistry under laws of the Commonwealth;
- (4) "Health professional" means a physician, physician assistant, nurse, doctor of chiropractic, mental health professional, optometrist, dentist, or allied health professional who is licensed in Kentucky;
- (5) "Medical care" as used in this chapter means essential medical, surgical, chiropractic, dental, optometric, podiatric, telehealth, and nursing services, in the home, office, clinic, or other suitable places, which are provided or prescribed by physicians, optometrists, podiatrists, or dentists licensed to render such services, including drugs and medical supplies, appliances, laboratory, diagnostic and therapeutic services, nursing-home and convalescent care, hospital care as defined in KRS 205.560(1)(a), and such other essential medical services and supplies as may be prescribed by such persons; but not including abortions, or induced miscarriages or premature births, unless in the opinion of a physician such procedures are necessary for the preservation of the life of the woman seeking such treatment or except in induced premature birth intended to produce a live viable child and such procedure is necessary for the health of the mother or her unborn child. However, this section does not authorize optometrists to perform any services other than those authorized by KRS Chapter 320;
- (6) "Nurse" means a person authorized to practice professional nursing under the laws of the Commonwealth;
- (7) "Nursing home" means a facility which provides routine medical care in which physicians regularly visit patients, which provide nursing services and procedures employed in caring for the sick which require training, judgment, technical knowledge, and skills beyond that which the untrained person possesses, and which maintains complete records on patient care, and which is licensed pursuant to the provisions of KRS 216B.015;
- (8) "Optometrist" means a person authorized to practice optometry under the laws of the Commonwealth;
- (9) "Other persons eligible for medical assistance" may include the categorically needy excluded from money payment status by state requirements and classifications of medically needy individuals as permitted by federal laws and regulations and as prescribed by administrative regulation of the secretary for health and family services or his designee;
- (10) "Pharmacist" means a person authorized to practice pharmacy under the laws of the Commonwealth;
- (11) "Physician" means a person authorized to practice medicine or osteopathy under the

laws of the Commonwealth;

- (12) "Podiatrist" means a person authorized to practice podiatry under the laws of the Commonwealth:
- (13) "Primary-care center" means a facility which provides comprehensive medical care with emphasis on the prevention of disease and the maintenance of the patients' health as opposed to the treatment of disease;
- (14) "Public assistance recipient" means a person who has been certified by the Department for Community Based Services of the Cabinet for Health and Family Services as being eligible for, and a recipient of, public assistance under the provisions of this chapter;
- (15) "Telehealth consultation" means a medical or health consultation, for purposes of patient diagnosis or treatment, that requires the use of advanced telecommunications technology, including, but not limited to:
  - (a) Compressed digital interactive video, audio, or data transmission;
  - (b) Clinical data transmission via computer imaging for teleradiology or telepathology; and
  - (c) Other technology that facilitates access to health care services or medical specialty expertise;
- (16) "Third party" means an individual, institution, corporation, company, insurance company, personal representative, administrator, executor, trustee, or public or private agency, including, but not limited to, a reparation obligor and the assigned claims bureau under the Motor Vehicle Reparations Act, Subtitle 39 of KRS Chapter 304, who is or may be liable to pay all or part of the medical cost of injury, disease, or disability of an applicant or recipient of medical assistance provided under Title XIX of the Social Security Act, 42 U.S.C. sec. 1396 et seq.; and
- (17) "Vendor payment" means a payment for medical care which is paid by the Cabinet for Health and Family Services directly to the authorized person or institution which rendered medical care to an eligible recipient.

Effective: June 20, 2005

History: Amended 2005 Ky. Acts ch. 99, sec. 227, effective June 20, 2005. -- Amended 2000 Ky. Acts ch. 14, sec. 32, effective July 14, 2000; and ch. 376, sec. 3, effective July 15, 2001. -- Amended 1998 Ky. Acts ch. 426, sec. 194, effective July 15, 1998. - Amended 1980 Ky. Acts ch. 135, sec. 28, effective July 15, 1980; and ch. 252, sec. 1, effective July 15, 1980. -- Amended 1978 Ky. Acts ch. 140, sec. 2, effective June 17, 1978. -- Amended 1976 Ky. Acts ch. 119, sec. 1. -- Amended 1974 Ky. Acts ch. 74, Art. VI, sec. 107(1), (15), (16) and (19); ch. 225, sec. 1; and ch. 308, sec. 38. -- Amended 1972 Ky. Acts ch. 256, sec. 15. -- Amended 1970 Ky. Acts ch. 78, sec. 1. -- Amended 1963 (2d Extra. Sess.) Ky. Acts ch. 2, sec. 1. -- Amended 1960 (1st Extra. Sess.) Ky. Acts ch. 2, sec. 1. -- Created 1960 Ky. Acts ch. 68, Art. VII, sec. 3.

**Legislative Research Commission Note** (7/15/2001). Under 2000 Ky. Acts ch. 376, sec. 24(1), this version of the statute takes effect "on July 15, 2001, or upon approval of any federal waivers, whichever first occurs." Because federal waivers were not approved, the effective date is July 15, 2001.