

Kentucky Strategies to **Reduce Cost-Sharing for Patients**

Reduced Cost-Sharing for Prescription Drugs

This section examines whether states have passed legislation to reduce the amount consumers pay out-of-pocket for select prescription drugs including insulin, epinephrine, and asthma inhalers, and specialty drugs. Strategies examined in this section include:

- Waived or Reduced Cost-Sharing for Diabetes Medications
- Waived or Reduced Cost-Sharing for Asthma Inhalers
- Waived or Reduced Cost-Sharing for Epinephrine Auto-Injectors
- Waived or Reduced Cost-Sharing for Specialty Drugs

Reduced Cost-Sharing for Behavioral Health Services

High out-of-pocket costs can limit access to behavioral health care. To address this, some states require insurers to waive or reduce cost-sharing for an annual behavioral health visit, ensuring more affordable access to essential mental health services. This section examines whether states have implemented reduced cost-sharing requirements through:

- Waived or Reduced Cost-Sharing for an Annual Behavioral Health Office Visit

Reduced Cost-Sharing for Preventive Care

Preventive services recommended by the U.S. Preventive Services Task Force (USPSTF) are critical to early detection and management of health conditions. States can improve access by requiring insurers to waive or reduce cost-sharing for these services. Strategies examined in this section include:

- Waived or Reduced Cost-Sharing for United States Preventive Services Task Force (USPSTF) Recommended Preventive Services



Reduced Cost-Sharing for Maternal and Reproductive Health Services

Some states expand access to reproductive health care by requiring coverage of services such as fertility treatments, doula support, and abortion care without high cost-sharing barriers. These policies aim to improve maternal health outcomes and ensure equitable access to reproductive services. Strategies examined in this section include mandates requiring:

- Individual and Small Group Health Plans to Cover Fertility Treatments

- Individual and Small Group Health Plans to Cover Doula Services

- Individual and Small Group Health Plans to Cover Abortion Services

Reduced Cost-Sharing for Cancer Screening and Testing Services

Early detection of cancer improves outcomes but cost-sharing can be a barrier to recommended screenings. States may require insurers to waive or reduce cost-sharing for services such as colorectal, breast, cervical, lung, prostate, and ovarian cancer screenings, as well as biomarker testing. This section examines whether such requirements are in place to promote timely and affordable cancer screening. Strategies examined in this section include mandates requiring:

- Waived or Reduced Cost-Sharing for Colorectal Cancer Screenings

- Waived or Reduced Cost-Sharing for Follow-Up Colorectal Cancer Screenings

- Waived or Reduced Cost-Sharing for Lung Cancer Screenings

- Waived or Reduced Cost-Sharing for Breast Cancer Screenings

- Waived or Reduced Cost-Sharing for Supplementary Breast Cancer Screenings

- Waived or Reduced Cost-Sharing for Cervical Cancer Screenings

- Waived or Reduced Cost-Sharing for Ovarian Cancer Screenings

- Waived or Reduced Cost-Sharing for Prostate Cancer Screenings

- Waived or Reduced Cost-Sharing for Biomarker Testing



Reduce Cost-Sharing for Patients

Reduce Cost-Sharing: Prescription Drugs

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Diabetes Medications	 State has enacted legislation to limit cost-sharing for insulin, diabetes related equipment, or both	Kentucky caps the out-of-pocket cost for a 30-day supply of prescription insulin at \$30.00, regardless of the amount or type of insulin needed.
Waives or Reduces Cost-Sharing for Asthma Inhalers	 State has not enacted legislation limiting cost-sharing for asthma inhalers	
Waives or Reduces Cost-Sharing for Epinephrine Auto-Injectors	 State has not enacted legislation to limit cost-sharing for prescription epinephrine autoinjector(s)	
Waives or Reduces Cost-Sharing for Specialty Drugs	 State has enacted legislation to limit cost-sharing for specialty drugs	Kentucky caps cost-sharing for a 30-day supply of orally administered anticancer medications at \$100.00.

Reduced Cost-Sharing: Behavioral Health

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for an Annual Behavioral Health Office Visit	 State does not require private insurers to cover at least one annual mental health wellness exam without cost-sharing	



State Has Active Policy or Program



Policy or Program Partially Implemented



State Does Not Have an Active Policy or Program



No Source, or Limited Information Found

Reduce Cost-Sharing for Patients

Reduced Cost-Sharing: Preventive Care

Policy	Status as of June 2025	Summary
Waives Cost-Sharing for Preventive Services Recommended by the U.S. Preventive Services Task Force (USPSTF)	 State does not mandate private insurers cover USPSTF recommended preventive services without cost-sharing	

Reduced Cost-Sharing: Maternal and Reproductive Health Care

Policy	Status as of June 2025	Summary
Individual and Small Group Health Plans Required to Cover Fertility Treatment	 The state requires individual and small group health plans to offer coverage for fertility preservation services, but not for in-vitro fertilization	Kentucky requires all health benefit plans to cover fertility preservation services when medically necessary treatments may cause iatrogenic infertility. However, in vitro fertilization (IVF) is not covered.
Individual and Small Group Health Plans Required to Cover Doula Services	 State does not require private health insurers to cover doula services for enrollees	
Individual and Small Group Health Plans Required to Cover Abortion Services	 The state does not require individual and small group health plans to cover abortion services	

Reduce Cost-Sharing for Patients

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Colorectal Cancer Screenings	State law requires insurers to cover colorectal cancer screening tests with no cost-sharing	Effective January 1, 2025, all health plans in Kentucky are required to cover all cancer screenings, tests, and procedures mandated under federal law or consistent with nationally recognized clinical guidelines (USPSTF, ACS, NCCN), as well as those ordered by authorized providers. These services must be covered without cost-sharing or utilization management, except under high-deductible health plans where federal rules require the deductible to apply.
Waives or Reduces Cost-Sharing for Follow-Up Colorectal Cancer Screening Exams	State law requires insurers to cover follow-up colorectal cancer screening tests with no cost-sharing	
Waives or Reduces Cost-Sharing for Lung Cancer Screenings	State law requires insurers to cover lung cancer screening tests with no cost-sharing	

Reduce Cost-Sharing for Patients

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Cervical Cancer Screenings	State law requires insurers to cover cervical cancer screening tests with no cost-sharing	Effective January 1, 2025, all health plans in Kentucky are required to cover all cancer screenings, tests, and procedures mandated under federal law or consistent with nationally recognized clinical guidelines (USPSTF, ACS, NCCN), as well as those ordered by authorized providers. These services must be covered without cost-sharing or utilization management, except under high-deductible health plans where federal rules require the deductible to apply.
Waives or Reduces Cost-Sharing for Breast Cancer Screenings	State law requires insurers to cover breast cancer screening with no cost-sharing	
Waives or Reduces Cost-Sharing for Supplementary Breast Cancer Screenings	State law requires insurers to cover supplementary breast cancer screening with no cost-sharing	

Reduce Cost-Sharing for Patients

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Prostate Cancer Screenings	State law requires insurers to cover prostate cancer screening with no cost-sharing	Effective January 1, 2025, all health plans in Kentucky are required to cover all cancer screenings, tests, and procedures mandated under federal law or consistent with nationally recognized clinical guidelines (USPSTF, ACS, NCCN), as well as those ordered by authorized providers. These services must be covered without cost-sharing or utilization management, except under high-deductible health plans where federal rules require the deductible to apply.
Waives or Reduces Cost-Sharing for Ovarian Cancer Screening	State law requires insurers to cover ovarian cancer screening with no cost-sharing	
Waives or Reduces Cost-Sharing for Biomarker Testing for Cancer	State requires coverage of biomarker testing for cancer screening but allows cost-sharing	In Kentucky, health plans must cover genetic tests for cancer risk recommended by licensed providers under NCCN guidelines, including biomarker testing. Carriers may still require patients to pay deductibles, copays, or coinsurance. However, the state also requires health benefit plans to provide coverage for genetic testing to determine if someone is at an increased risk for cancer without cost-sharing.

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