Adopted as Amended

2025-6

RESOLUTION

Subject: Artificial Intelligence in Medicine

Submitted by: Michael Kuduk, MD (KMA Immediate Past President)

Referred to: Reference Committee

WHEREAS, 1.4 million Kentuckians are covered by Medicaid, which is 31% of the total population; and

WHEREAS, H.R. 1 from the 2025 U. S. Congress (the Big Beautiful Bill) contains provisions for significant and permanent cuts to state Medicaid funding; and

WHEREAS, proposed Medicaid cuts will pose a significant threat to the Kentucky state budget; and

WHEREAS, proposed Medicaid cuts are projected to reduce federal funding to rural hospitals by $50.4 billion over 10 years, threatening access to care in underserved communities; and

WHEREAS, decrease in Medicaid funding is likely to cause reductions in the number of lives covered, benefits to those covered, or both; and

WHEREAS, artificial intelligence technologies, including eligibility engines and predictive analytics, have demonstrated the ability to streamline Medicaid administration, reduce fraud, produce cost savings, and improve patient outcomes; now, therefore be it

RESOLVED, that KMA urge the state legislature to work with relevant stakeholders to explore innovative strategies—specific to physicians and healthcare providers-- regarding the responsible use of artificial intelligence, to enhance administrative efficiency, reduce costs, and improve care quality for Medicaid beneficiaries; and be it further

RESOLVED, that KMA opposes the use of artificial intelligence to deny medical claims or prior authorization requests without meaningful review by a qualified physician, and supports improved transparency for both patients and physicians regarding how artificial intelligence is used in these determinations; and be it further

RESOLVED, that KMA supports physician trainee participation in the development, implementation, and oversight of augmented intelligence policies in clinical and educational setting for the Commonwealth, which should include the integration of physician trainees' perspectives into all

institutional and statewide artificial intelligence committees and the involvement of physician trainees in the creation of educational modules on clinical implementation.