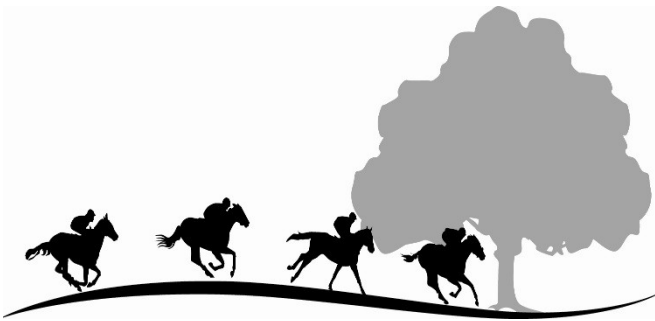


# **KENTUCKY RACING HEALTH & WELFARE FUND**

Español al Inverso



## **GUIDELINE BOOKLET**

**28<sup>th</sup> EDITION**

**JANUARY 2025**

## **DISCLAIMER**

The Kentucky Racing Health and Welfare Fund is a non-profit, charitable organization that receives no government funding or public tax revenue. It is not an insurance company and does not assume responsibility for any incurred charge nor does it guarantee approval for any request for assistance. This handbook should not be construed as a policy and should not be considered as an offer to extend assistance, benefits, coverage, or payment. The Fund's guidelines are changed at the sole discretion of the Fund's Board of Directors and are modified, extended, altered, and revised from time to time without prior notice. Therefore, any information supplied in any form must not be construed or regarded as creating any express or implied right to the services, coverage, or benefits the Fund may offer. A copy of the Fund's current guidelines can be obtained by a written request submitted to the Fund.

# **KENTUCKY RACING HEALTH & WELFARE FUND, INC.**

A non-profit charitable corporation  
Established in 1978

Rick Hiles – Chairman

Dr. Randy Scheen – Vice Chairman

Burr Travis – Treasurer

Carol Hebel - Secretary

Dale Romans – Member

Donna Ward - Member

Robert P. Benson, Jr. – Counsel

Richard P. Riedel – Executive Director

Karen Pehlke – Deputy Executive Director

Erika Lowe – Director of Client Services

Elizabeth Alarcon – Client Service Coordinator

Manuela Hernandez – Client Service Coordinator

Ivania Perez – Client Service Coordinator

Diana Varon – Client Service Coordinator

**422 HEYWOOD AVENUE  
LOUISVILLE, KY 40208**

Phone (502) 636-2900

Fax (502) 636-2955

Website: [KYRACINGHEALTH.COM](http://KYRACINGHEALTH.COM)

E-mail Address: [krhwf@kyracinghealth.org](mailto:krhwf@kyracinghealth.org)

The Facebook logo, consisting of the word "facebook" in a white, lowercase, sans-serif font, centered on a solid black rectangular background.

LOUISVILLE OFFICE HOURS

**By Appointment Only**

Monday – Friday  
8:00 am – 4:00 pm

# RACE TRACKER HAVEN

Sponsored By  
KENTUCKY RACING  
HEALTH & WELFARE FUND, INC.

## NOW LEASING THE OLD SCHOOL APARTMENTS

422 Heywood Avenue  
Louisville, KY 40208

The Old School Apartments, located within walking distance of Churchill Downs, in Louisville, Kentucky is now leasing and ready for you to move in.

- All utilities included in rent
- Spacious one bedroom and studio apartments
- On-site laundry facility
- Appliances furnished with carpet and blinds
- Must be 55 or older or disabled; income eligible
- 2004 Ida B. Willis Historic Preservation Award

Contact Number: (502) 636-5950

## Did you know that in 2024 the Kentucky Racing Health & Welfare Fund:

- ❖ Provided assistance for 729 eligible Kentucky race track licensees.
- ❖ Assisted Kentucky race track licensees with health-related benefits 1,108 times while paying 3,921 health related invoices.
- ❖ Provided more than \$1 million in health benefits.
- ❖ Surpassed the \$50 million mark in total health benefits paid out since our inception in 1978.
- ❖ Contributed \$100,000 to the Kentucky Race Track Retirement Plan, bringing its total contribution to \$7,087,500 in twenty-four years.
- ❖ Signed up 295 eligible individuals to the Kentucky Race Track Retirement Plan; active membership as of December 31, 2024 is 571 members.
- ❖ Sponsored the Kentucky Racing Health Services Center which provided treatment or medical services for 1,521 patient visits. The Health Service Center is located at The Old School, 422 Heywood Avenue, Louisville, KY 40208. Call (502) 636-2900 for hours of operation or to schedule an appointment. Open all year.
- ❖ Sponsored the Horsemen's Wellness Center @ Turfway Park which provided free treatment or medical services for 134 patient visits. The Wellness Center is located in the Horsemen's Hall in the same building as the Racing Secretary's office. Call (502) 636-2900 for hours of operation or to schedule an appointment.

## **KENTUCKY RACING HEALTH SERVICES CENTER**

The Kentucky Racing Health and Welfare Fund and The University of Louisville are partners in the health service center which is located in The Old School building in Louisville, Kentucky.

Please call (502) 636-2900 for an appointment.

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## **HORSEMEN'S WELLNESS CENTER @ TURFWAY PARK**

The Kentucky Racing Health and Welfare Fund and Northern Kentucky University are partners in the free health service center which is located in the Horsemen's Hall in the same building as the Racing Secretary's office at Turfway Park.

Please call (502) 636-2900 for an appointment.

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## **KENTUCKY RACE TRACK RETIREMENT PLAN**

The Kentucky Racing Health and Welfare Fund is the sponsor of the Kentucky Race Track Retirement Plan. For additional information or to sign up please contact Karen Pehlke, Plan Administrator Representative, at (502) 636-2646 to schedule an appointment.

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Connecting racing industry employees with the resources they need.

Download the **FREE** app for iPhone or Android.

Cómo is an app that connects racing industry employees to the vital services they need through a network of racetrack chaplains and Thoroughbred industry organizations. Chaplains and organizations have added their services including healthcare, legal services, continuing education, and more. App users can also receive information alerts and daily posts. Cómo is managed by TCA and founded by Godolphin.

## **Do You Need Help With Alcohol or Drug Abuse?**

**Recovery Kentucky  
(Kentucky Housing Corp.)**

**(800) 633-8896**

Recovery Kentucky is a residential social recovery program for adult women and men who are seeking recovery from alcohol and other drugs. It is a zero tolerance program. Clients are prohibited from using drugs and alcohol during their stay in the program.

ALL CALLS ARE KEPT CONFIDENTIAL

## **Is Domestic Violence Creating Havoc in Your Life?**

To contact the network community resources in Kentucky for victims, and their families, of domestic violence please contact one of the following crisis centers:

Louisville	(502) 581-7222
Lexington	(800) 544-2022
Florence	(800) 928-3335
Henderson	(800) 882-2873

ALL CALLS ARE KEPT CONFIDENTIAL

## **Gamblers Anonymous**

### **When It's No Longer A Game, There is HELP!**

Do you think you have a gambling problem?

Call (800) GAMBLER

Available 24 hours a day

## **Suicide and Crisis Lifeline**

### **HELP Is Available**

988 is the new, free, nationwide, three-digit dialing code for the Suicide and Crisis Lifeline.

The 988 dialing code connects people via call, text, or chat, to the existing National Suicide prevention Lifeline where compassionate, accessible care and support are available for anyone experiencing mental health related distress.

## **HUMAN TRAFFICKING**

### **HELP Is Available**

If you or someone you know is forced, tricked, or pressured to work or have sex in exchange for something of value (food, shelter, money), help is available.

Call: (888) 373-7888

Text: HELP to 233733 (BEFREE)

Chat: [humantraffickinghotline.org/chat](https://humantraffickinghotline.org/chat)





## TABLE OF CONTENTS

Table of Contents	1
Introduction	2
Overview	4
Reparation Policy	4
Eligibility	5
Waiting Period	6
Overall Maximum Benefits	7
Restricted Benefits	7
Hospital Related Charges	9
Chemical Abuse Related Charges	9
Racing Out of State	9
Financial Assistance	10
Disability	10
Dependent Children	10
Mental Health Benefits	10
Pregnancy & Miscarriage	11
Hardship Requests	14
Exclusions	14
Appeal Policy	15
Privacy Notice	15
Preferred Providers	16
Community Resources	17

## INTRODUCTION

This handbook is designed to familiarize you with the Fund's benefits and guidelines. Listed below are answers to the most frequently asked questions.

- 1. From where does the Fund receive its revenues?**  
The Fund receives monies from uncashed pari-mutuel tickets generated at Kentucky's thoroughbred racetracks.
- 2. Is the Fund an insurance company?** No. The Fund is a non-profit organization which may provide charitable benefits to certain eligible individuals.
- 3. Does the Fund provide insurance coverage?** No. The charitable benefits which may be provided to certain eligible individuals should not be considered as insurance coverage. In order to determine eligibility, a request must be made to the Fund for each occurrence.
- 4. How are requests for assistance made?** A completed application and other request forms must be submitted to the Fund before consideration for eligibility can be given. Each request is kept confidential.
- 5. Where can I get an application?** The offices of the Kentucky Racing Health & Welfare Fund:

### **Churchill Downs**

422 Heywood Avenue  
Louisville, KY 40208  
(502) 636-2900 Phone  
(502) 919-4608 Text Only

### BY APPOINTMENT ONLY

8:00 am – 4:00 pm (M-F)

### **Ellis Park**

(502) 636-2900 – Phone  
(502) 919-4608 – Text Only

### **Keeneland**

4201 Versailles Road  
Lexington, KY 40510  
(800) 456-3412 ext. 5149  
7:00 am – 12:00 pm (M-F)

### **Turfway Park**

(502) 636-2900 – Phone  
(502) 919-4608 – Text Only

6. **Who is eligible to receive benefits from the Fund?** Each request for assistance is considered on an individual basis. Only certain eligible licensees (and certain dependents) of the Kentucky Horse Racing & Gaming Corporation who are employed in certain occupations in Kentucky thoroughbred racing, who can demonstrate financial need, and have no other resources to pay incurred charges may be eligible. Eligibility is subject to the Fund's guidelines.
7. **What type of assistance does the Fund provide?** The Fund may assist with certain charges incurred for non-work related and non-horse related medical treatment, mental health disorders, dentistry, vision care, certain financial assistance, and burial charges. This handbook includes more detail but does not include complete information. The Fund does not guarantee the eligibility of all those who apply for assistance. Anyone found to be eligible may be provided with assistance which will be in accordance with the Fund's guidelines, maximum limits, and other restraints.
8. **When should the Fund be contacted concerning a request?** The Fund should be contacted immediately concerning a non-work-related or non-horse related injury or illness, or immediately after treatment of same. Initial contact for each separate occurrence must be made within 90 days of illness/injury/treatment (except for pregnancy related medical charges). Initial contact can be made in person, by phone, fax, e-mail, mail, text or by the licensee's representative. Always contact the Fund should you have any questions and for the latest guidelines.
9. **Is it true that retirement benefits may be available?** Yes. The Fund sponsors and makes a contribution to the Kentucky Race Track Retirement Plan, now in its 25<sup>th</sup> year of operation. Eligibility for retirement benefits requires a person to meet guidelines separate from the Fund's. Call (502) 636-2646 for more information.

## **Synopsis of Kentucky Racing Health & Welfare Fund Guidelines**

*This synopsis is incomplete, and the Fund should be contacted for a full explanation. Fund guidelines are changed at the sole discretion of the Fund's Board of Directors and are modified, extended, altered, and revised from time to time without prior notice. Therefore, any information supplied in any form must not be construed or regarded as creating any express or implied right to the services, coverage, or benefits the Fund may offer.*

### **OVERVIEW**

Each request for assistance must be accompanied by an application. The completion of an application does not guarantee the approval of the request. The Fund provides benefits for charges incurred for medical, mental health disorders, dental, vision care, funeral charges, and financial assistance, as a result of a non-work related illness/injury, or an occurrence that is not covered by health/dental insurance, union health & welfare plans, Social Security, Medicare, Medicaid, KCHIP, public welfare, accident insurance, or any other form of illness and/or injury coverage or has entered into a litigation to recover damages.

### **REPARATION POLICY**

Once an individual applies to the Fund for assistance, it is the responsibility of the Fund's staff to conduct a routine inquiry into the accuracy of the information that has been provided.

If an individual has provided inaccurate or false information pertaining but not limited to: the nature of the illness/injury, non-disclosure of **ALL** KRHC license types, non-disclosure of insurance or other benefit coverage, falsification of employment, changes in identity (including name and/or SS#) or transferring benefits to a non-eligible individual no immediate benefits will be provided and additional action may be taken.

Please contact the Fund for additional information.

## **ELIGIBILITY**

### **Assistant Trainer, Exercise Rider and Stable Employee**

1. Must be currently licensed by KHR&GC and working in Kentucky thoroughbred racing.
2. Earn no less than \$150 per week for same employer and work no less than twenty-four (24) hours for same employer. A free-lance exercise rider/pony person must earn no less than \$150 per week from one or more eligible trainer(s) and has exercised not less than twelve (12) horses during the prior week.
3. Must show W2 and/or 1099 and Federal Income Tax Return from the previous year to be eligible for full benefits.
4. The taxable income of an applicant who is single shall not exceed \$49,850 in 2025.
5. The taxable income of an applicant who is married shall not exceed \$99,700 in 2025.
6. Those applicants determined ineligible may receive additional consideration in accordance with the provisions set forth in the Hardship Request guideline. If eligible, Hardship Request benefits will be eligible at thirty-three (33) percent up to seventy-five (75) percent of eligible charges up to a maximum benefit of \$7,000 per year.

### **Others**

1. Includes those applicants licensed and employed as an assistant starter, jockey, outrider, owner, pari-mutuel clerk, pony personnel, trainer, and valet. Also, any other thoroughbred license type issued by the KHR&GC.
2. Must provide financial statement, tax return, corporate tax return, payroll stub and other proof of compensated employment, documents of financial and property disclosure, and give permission to investigate all requests for benefits.
3. The taxable income of an applicant who is single shall not exceed \$49,850 in 2025.
4. The taxable income of an applicant who is married shall not exceed \$99,700 in 2025.

## Eligibility – continued

5. Applicant's net assets shall not exceed \$69,296. The first \$69,296 in equity in the applicant's principal residence is exempt. All IRA's, pension and 401(k) savings and all children's savings are exempt. If an applicant's net assets exceed \$69,296 but are less than \$207,751 additional consideration will be given.
6. Owners must provide evidence of owning the aggregate total of at least one (1) thoroughbred race horse that has made at least three (3) Kentucky starts in the six (6) month period prior to treatment/illness/injury or five (5) starts in the twelve (12) month period prior to treatment/illness/injury **AND** one (1) Kentucky start in the seventy-five (75) day period prior to illness/injury/treatment or twenty (20) Kentucky starts the prior calendar year. Stabled outside of Kentucky reduces benefit maximums.
7. Trainers must have made at least three (3) Kentucky starts in the six (6) month period prior to treatment/illness/injury or five (5) starts in the twelve (12) month period prior to treatment/illness/injury **AND** one (1) Kentucky start in the seventy-five (75) day period prior to illness/injury/treatment or twenty (20) Kentucky starts the calendar prior year. This guideline is also used to determine if a trainer is an eligible employer of stable employees requesting assistance. Stabled outside of Kentucky reduces benefit maximums.
8. Pari-mutuel clerks must work nine hundred seventy-five (975) hours in the twelve (12) month period prior to illness/injury/treatment.

## **WAITING PERIOD**

A waiting period is a period in which an applicant may need to wait before being eligible for benefits. The length of the waiting period may differ depending upon the type of license the applicant has been issued by the KHR&GC and the type of assistance (medical, dental, or vision, etc.) being requested. The nature of the request, whether it is an emergency, non-emergency, accident, or illness is also considered. A waiting period will typically range from one (1) day to thirty (30) days, in which either a reduced benefit or no benefit may be available.

## **OVERALL MAXIMUM BENEFITS**

Benefits will be provided up to a total maximum as shown below for each eligible licensee in accordance with the number of years licensed by the KHR&GC and required tax documentation.

### **Tier 1 – No W2 and/or 1099**

<b>Overall Maximum</b>	<b>Dental</b>	
\$3,000	\$250	Basic

### **Tier 2 – W2 and/or 1099 (No Tax Return)**

<b>Overall Maximum</b>	<b>Dental</b>	<b>Number of Years licensed by the KHR&amp;GC</b>
\$5,000	\$500	One Year (Current Year)
\$7,000	\$600	Two out of Five prior years
\$9,000	\$700	Three out of Five prior years
\$11,000	\$800	Four out of Five prior years
\$13,000	\$900	Five out of Five prior years
\$15,000	\$1,000	More than six consecutive years

### **Tier 3 – W2 and/or 1099 AND Tax Return**

<b>Overall Maximum</b>	<b>Dental</b>	<b>Number of Years licensed by the KHR&amp;GC</b>
\$8,000	\$700	One Year (Current Year)
\$10,000	\$800	Two out of Five prior years
\$12,000	\$900	Three out of Five prior years
\$14,000	\$1,000	Four out of Five prior years
\$16,000	\$1,100	Five out of Five prior years
\$18,000	\$1,200	More than six consecutive years
\$20,000	\$1,500	More than seven consecutive years

## **RESTRICTED BENEFITS**

- \$25 co-pay on all specialty Doctor, Chiropractor and Acupuncture Office Visits.
- Acupuncture - \$25 co-pay / \$750 limit per year.
- Appliances, Orthotics, Braces, Over-the-Counter Therapeutic Devices – 10% co-pay.
- Birth Control - Purchase of the pill, diaphragm, Depo-Provera, Nuva-Ring, contraceptive patch, IUD or Implanon. Also limited benefit for tubal ligation and vasectomy.
- Chiropractic - \$25 co-pay / \$750 limit per year.
- Dental & Periodontia - Subject to the number of years licensed by the Kentucky Horse Racing & Gaming Corporation and other eligibility requirements.



## Restricted Benefits – continued

- Teeth Cleaning - Up to \$50 twice per year, applicant and up to three dependents.
- Diagnostic Testing – Up to \$75 co-pay.
- Funeral – up to \$7,000
- Genetic Counseling Treatment – if ordered by the Kentucky Racing Health Services Center.
- Hearing Aids – up to \$1,500 per ear for the purchase of a digital hearing aid. Benefit limited to every thirty-six months. \$100 co-pay per ear.
- Hospital - \$5,000 annual maximum benefit.
- HPV Vaccine/Gardasil Vaccine - Reimbursement basis.
- Immigration Medical Screening – up to \$250 on a reimbursement basis.
- Orthodontia – Up to 50% of actual charges up to \$1,000 per twenty-four months. Subject to the number of years licensed by the Kentucky Horse Racing & Gaming Corporation and other eligibility requirements.
- PAP Smears & Mammograms - Annual, upon request.
- Physical Therapy - \$10 co-pay / Limit 12 visits.
- Pregnancy – Up to \$6,000 for normal well mother/well baby delivery. Subject to the number of years licensed by the Kentucky Horse Racing & Gaming Corporation and other eligibility requirements.
- Prescriptions - \$7 co-pay on all generic prescription medications, 10% co-pay on all non-generic prescription medications with a \$7 minimum and a \$50 maximum.
- Prostate cancer screening - Annual, upon request.
- School Physical & Immunizations - required for admission (no sports physicals); paid at the Health Department rates.
- Smoking Cessation - one 50% lifetime benefit; refund basis only.
- Specialty Doctors - \$25 co-pay
- Speech Therapy - \$25 co-pay / Up to ten (10) speech therapy sessions per calendar year administered by a certified speech therapist; \$100 maximum benefit per session.
- Surgery Fee - \$100 co-pay. Will be collected prior to surgery.
- Vaccines - \$10 co-pay per vaccine
- Vision - \$300 maximum / applicant or 1 dependent.
- Well Child Care - Routine exams and immunizations; paid at the Health Department rates.

## **HOSPITAL RELATED CHARGES**

All applicants who have or intend to incur hospital charges must first apply to the Hospital Financial Assistance Program or applicable state program for determination of eligibility before such charges are considered by the Fund. Written determination must be submitted to the Fund before determination of eligibility for the Fund can be determined.

If otherwise not eligible for Medicaid or Hospital Financial Assistance charges will be paid at the hospital un-insured discount rate or at a negotiated or contractual rate.

If the applicant and/or patient fails to apply for any of the above-mentioned programs no benefits will be provided related to the hospital charges.

Emergency Room Visit - \$100 co-pay; if eligible for Hospital Financial Assistance the co-pay will be applied to the Emergency Room physician charges, laboratory charges and/or radiology charges.

If the applicant is unable to apply for Hospital Financial Assistance due to the hospital documentation requirements (tax return, bank statements) a 10% co-pay not to exceed \$500 will be applied to the facility charges only.

The annual maximum hospital benefit per applicant (including dependents) is \$5,000.

## **CHEMICAL ABUSE RELATED CHARGES**

Medical charges that are incurred in which alcohol/drug use and/or abuse was a primary or contributing factor will be reviewed pursuant to the Fund's Alcohol and Drug guideline which may require the applicant to acknowledge that alcohol/drug use and/or abuse was a primary or contributing factor.

Patients must apply to Medicaid and all financial assistance programs before charges will be considered.

Any patient responsibility will be paid at 50% not to exceed the overall maximum benefit.

## **RACING OUT OF STATE BENEFITS**

Some benefits may be extended to certain eligible licensees while they are racing outside of Kentucky.

Please contact the Fund for additional information.

## **FINANCIAL ASSISTANCE**

Benefits may be provided on a limited basis for certain living expenses while disabled or recovering from an incapacitating condition due to a non-work-related illness/injury occurrence.

## **DISABILITY**

Medical benefits may be provided to an otherwise eligible applicant who has become unable to work and is not working in any capacity for up to a period of twelve (12) months from the date of disability. The original disabling occurrence may be work related or non-work related in nature (this excludes living expense benefit).

All applicants must supply a written doctor's letter of disability. The applicant must have been eligible on the date of disability to be eligible for benefits during the disability period.

An applicant must be KHR&GC licensed, working and otherwise eligible for a period of not less than one hundred eight two (182) days following the end of the disability period to be eligible for any additional disability benefits.

## **DEPENDENT CHILDREN**

Certain dependent children of an eligible applicant may also be eligible for benefits.

## **MENTAL HEALTH BENEFITS**

Benefits will only be provided when treatment charges are incurred by one of the Fund's network providers as indicated below:

- a) Inpatient – Five (5) days per twelve (12) month period with one admission every six (6) month period.
- b) Outpatient – Ten (10) visits per twelve (12) month period plus nine (9) medical check-ups per twelve (12) month period for the eligible applicant and up to three eligible dependents of the applicant.

## PREGNANCY AND MISCARRIAGE

To be eligible an applicant must be in compliance with all applicable guidelines including stabling and race record.

1. All applicants must first apply to the Kentucky Medicaid Program (or applicable state program) for determination of eligibility. This written determination by the Kentucky Medicaid Program (or applicable state program) must be submitted at the time of application for maternity benefits from the Fund. If eligible for the Kentucky Medicaid Program (or applicable state program), and if the applicant is otherwise eligible for the Fund's benefits, the Fund will provide benefits after the benefits from the state programs have been exhausted. This requirement is waived for clients who have health insurance which provides maternity benefits.
2. Benefits for a normal healthy vaginal delivery will be provided in accordance with the staggered maximum benefit not to exceed up to \$6,000.
3. Benefits for a Caesarian section birth and other types of complicated pregnancy will be determined by the Staggered Maximum guideline.
4. The year of conception will be used as the starting date to determine the number of consecutively licensed years by the KHR&GC in determining the maximum benefit to an otherwise eligible applicant subject to the following conditions:
  - (a) (i) Applicant is working in an eligible occupation in Kentucky at the time of initial contact and;  
(ii) Applicant can verifiably prove through payroll checks or stubs that he/she had worked in Kentucky for a period of not less than ninety (90) consecutive days, for an eligible employer or employers, immediately prior to conception and;
  - (b) (iii) Applicant was licensed by the Kentucky Horse Racing & Gaming Corporation as an eligible license type in the year prior to conception and has secured a valid Kentucky Horse Racing & Gaming Corporation license at least three hundred sixty-five (365) days prior to the date of conception in the combined prior or current year **or**

Pregnancy – continued

(c) (i) Applicant was working in an eligible occupation in Kentucky at the time of initial contact and;

(ii) Applicant was licensed by the Kentucky Horse Racing & Gaming Corporation as an eligible license type in the year prior to conception and had secured a valid Kentucky Horse Racing & Gaming Corporation license at least three hundred sixty-five (365) days prior to the date of conception in the combined prior and current year and;

(iii) Applicant can verifiably prove through payroll checks or stubs that he/she was working in an eligible occupation in Kentucky, for an eligible employer or employers for at least ninety (90) days, in the calendar year prior to the calendar year in which conception took place and;

(iv) Applicant can verifiably prove through payroll checks or stubs that he/she has worked for an eligible employer or employers for the immediate ninety (90) consecutive day period prior to conception (trainers and owners must meet race record guidelines).

5. Initial contact must be made no later than one hundred twenty (120) days from the date of conception. The applicant (or spouse) must be pregnant at the time of application. If the applicant has health insurance with maternity benefits initial contact must be made by the thirtieth (30<sup>th</sup>) day after delivery.
6. The applicant must be legally married to dependent prior to giving birth.
7. The applicant's dependent children will not be eligible for benefits for charges related to pregnancy or miscarriage.
8. Benefits will not be provided for the services of a mid-wife.

Pregnancy – continued

9. The date of conception will be determined by subtracting two hundred seventy (270) calendar days from the expected due date that has been submitted in writing by a licensed physician. The day after the date of conception will be counted as the first day for determining eligibility.
10. First priority of benefits will be given to medical providers; reimbursements will be made to the applicant after all other charges have been paid, not to exceed the maximum benefit for pregnancies.
11. Benefits for pre-natal vitamins up to a thirty (30) day supply each month will be provided.
12. Benefits will only be provided should the mother deliver in a hospital in Kentucky or a facility bordering Kentucky in another state within fifty (50) miles of the Kentucky border.
13. An eligible female licensee will be granted a six (6) week disability period *prior* to delivery. In the event of a complicated pregnancy, the disability period would commence as indicated in a work release document by the licensee's obstetrician. During the period of disability, she will be considered as if she were employed, and if otherwise eligible, will be extended benefits (except for financial assistance) that the Fund provides provided that she is living in Kentucky or a state that borders Kentucky.
14. An eligible female licensee will be granted a six (6) week disability period *after* giving birth or suffering a miscarriage. During that period, she will be considered as if she were employed and if otherwise eligible there will be extended benefits (except for financial assistance) that the Fund provides, as long as she is living in Kentucky or a state that borders Kentucky.

## **HARDSHIP REQUEST**

Those applicants determined ineligible may receive additional consideration in accordance with the provisions set forth in the Hardship Request guideline.

If eligible, Hardship Request benefits will be eligible at thirty-three (33) percent up to seventy-five (75) percent of eligible charges up to a maximum benefit of \$7,000 per year.

## **EXCLUSIONS**

Include, but are not limited to:

1. Work and thoroughbred horse related injuries.
2. Procedures that are not medically necessary to sustain good health.
3. Procedures that are not performed or prescribed by a licensed medical professional.
4. Abortion, except to save the life of the mother.
5. Preventive medicine and cosmetic surgery.
6. Charges that are incurred while committing a felony or while engaged in an illegal occupation.
7. Charges incurred resulting from the act of violence in which the applicant was the aggressor, instigator, or willing participant.
8. Radial Keratotomy
9. Charges related to the cure or treatment of impotency and other sexual dysfunctions, and infertility.
10. Charges that are incurred while driving a motor vehicle without insurance.
11. OxyContin / Zohydro (Zohydro ER)
12. Alternative or Complementary Medicine
13. Methadone, Suboxone, Vivitrol and other substances used to treat withdrawal/use or abuse of drugs and alcohol.
14. Charges that are incurred while participating in a high-risk activity.

## **APPEAL POLICY**

1. If a client disputes a request for assistance that does not meet the Fund's guidelines, the request shall be re-evaluated by the Fund's Deputy Executive Director.
2. If the request is again found to not meet the Fund's guidelines, the client shall be informed of the right for additional review by the Executive Director.
3. If the request, after review by the Executive Director, is found to not meet the Fund's guidelines, the client shall be advised of the right for additional review by the Fund's Board of Directors at its next regularly scheduled meeting.
4. The decision of the Board of Directors will be final.

## **PRIVACY NOTICE**

The Kentucky Racing Health and Welfare Fund, Inc. (the Fund) is required to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to private health information.

You can obtain a copy of our privacy practices by contacting the Fund at (502) 636-2900 or by visiting our website at [KYRACINGHEALTH.COM](http://KYRACINGHEALTH.COM).



## **PREFERRED PROVIDERS**

The Fund has an extensive network of preferred providers. Please contact the Kentucky Racing Health & Welfare Fund office before scheduling any appointments.

When charges are incurred with non-network providers the Fund will review each request on a case-by-case basis and may offer that non-network provider an amount equivalent to that accepted by Network Providers as payment in full and may withhold all payment if an agreement cannot be reached with the non-network provider.

### **Other Important Information**

This booklet does not guarantee benefits and should not be presented as evidence of insurance coverage to the provider at the time of service.

Contact the Fund immediately when you incur medical charges. The Fund may be able to assist you with the payment of your medical bills.

When possible, please contact the Fund prior to treatment for authorization. The Fund may not be able to provide assistance without the proper authorization.

**COMMUNITY RESOURCES**

CHURCHILL DOWNS 18

ELLIS PARK 19

KEENELAND 20

TURFWAY PARK 21

## CHURCHILL DOWNS

700 Central Avenue  
Louisville, KY 40208  
(800) 283-3729

Information Center	211
Emergency	911
Alcoholics Anonymous	(502) 582-1849
Crisis & Information Center	(502) 589-4313
Child & Adult Abuse Hotline	(877) 597-2331
Domestic Violence & Sexual Assault	(502) 581-7222 (877) 803-7577
Housing Authority 801 Vine Street	(502) 569-6060
American Red Cross 510 E. Chestnut Street	(502) 589-4450
Iroquois Family Health Center 4100 Taylor Blvd.	(502) 366-4747
Social Security Office 601 W. Broadway, Room 101	(866) 716-9671
Medicaid Office 908 W. Broadway, 4 <sup>th</sup> floor	(855) 306-8959
Wayside Christian Mission 432 E. Jefferson	(502) 584-3711
Salvation Army Center of Hope 911 S. Brook	(502) 671-4900
Recovery Kentucky - Men	(502) 585-4848
Recovery Kentucky - Women	(502) 568-6680
Pregnancy Resource Center 515 W. Oak Street	(502) 583-2151
Family Community Free Clinic 1420 E. Washington Street	(502) 384-8444
Hosparus Health Louisville	(502) 456-6200 (502) 629-3600

**ELLIS PARK**  
Highway 41 North  
Henderson, KY 42420-0033  
(800) 333-8110

Emergency	911
Alcoholics Anonymous	(270) 683-0371
Crisis & Information Center	(270) 684-9466 (800) 433-7291
Child Protective Services (Evansville)	(812) 421-5400
(Henderson)	(270) 826-6203
Rape Center (Owensboro)	(270) 926-7273
(Henderson)	(270) 826-7273
Spouse Abuse (Owensboro)	(270) 685-0260 (800) 88-ABUSE
American Red Cross 1970 Barret Court	(270) 826-2775
Health Department (Henderson)	(270) 826-3951
Social Security & Medicare 2000 N. Elm Street, Bldg. 3 (Henderson)	(855) 628-1593
Welfare & Medicaid 510 Klutey Park Plaza Drive (Henderson)	(855) 306-8959
Men's Shelter 804 Clay Street (Henderson)	(270) 827-5010
Shelter for Women & Children 530 Klutey Park Plaza Drive (Henderson)	(270) 688-9000
Recovery Kentucky – Women	(270) 826-0036
Recovery Kentucky – Men	(270) 689-0905
SouthernCare Hospice	(812) 867-6834

**KEENELAND**  
4201 Versailles Road  
Lexington, KY 40510  
(800) 456-3412

Emergency	911
Alcoholics Anonymous	(859) 225-1212
Mental Health Care	(859) 233-0444
Child Abuse Hotline	(859) 245-5258
Rape Center	(859) 656-HOPE
Domestic Violence Hotline	(859) 233-0657 (800) 544-2022
American Red Cross 1450 Newtown Pike	(859) 253-1331
Health Department 650 Newtown Pike	(859) 252-2371
Social Security Office	(800) 772-1213
Welfare & Medicaid	(855) 306-8959
Families & Women Shelter Salvation Army 736 W. Main Street	(859) 252-7706
Shelter for Men – Hope Center 360 W. Loudon	(859) 252-7881
The Nest Center for Women Children & Families	(859) 259-1974
Recovery Kentucky - Women	(859) 252-2002
Recovery Kentucky – Men	(859) 225-4673
Bluegrass Care Navigators	(855) 492-0812
Mission Lexington 230 S. Martin Luther King Blvd. (Free Medical, Dental, Vision)	(859) 272-0219

**TURFWAY PARK**  
7500 Turfway Road  
Florence, KY 41042  
(800) 733-0200

Emergency	911
Alcoholics Anonymous	(859) 491-7181
Mental Health	(859) 331-3292
Child Abuse Hotline	(859) 292-6550
Rape Center	(859) 491-3335
Domestic Violence	(859) 491-3335
Boone Co. Health Department 7505 Burlington Pike	(859) 363-2060
HealthPoint Clinic (Covington)	(859) 655-6100
Social Security Office	(800) 772-1213
Welfare & Medicaid	(855) 306-8959
Men's Shelter Fair Haven Rescue Mission 260 Pike Street (Covington)	(859) 491-1027
Shelter for Women & Children Welcome House 205 W. Pike Street (Covington)	(859) 431-8717
Recovery Kentucky - Women	(859) 282-9390
Recovery Kentucky – Men	(859) 359-4500
Hospice of the Bluegrass	(859) 441-6332

**OTHER IMPORTANT  
PHONE NUMBERS**

Kentucky HBPA

Main Office	(502) 363-1077
Churchill Downs	(502) 637-7935
Ellis Park	(812) 435-8956
Keeneland	(800) 456-3412
Turfway Park	(859) 647-4764

Track Chaplaincy

Churchill Downs	(859) 444-2948
Ellis Park	(270) 925-7691
Keeneland	(859) 288-4149
Turfway Park	(859) 903-3426