

HOUSE OF REPRESENTATIVES

KENTUCKY GENERAL ASSEMBLY AMENDMENT FORM
2022 REGULAR SESSION
Unofficial Document

Amend printed copy of **SB 68/HCS 1**

On page 4, beginning on line 16 and continuing through page 7, line 25 delete all text in its entirety; and

Renumber subsequent sections; and

On page 7, line 27, by deleting "Medicaid beneficiaries and".

Amendment No. HFA

Rep. Rep. Kimberly Poore Moser

Committee Amendment

Signed: _____

Floor Amendment

LRC Drafter: _____

Adopted: _____

Date: _____

Rejected: _____

Doc. ID: XXXX

Not for Filing