PUBLIC PROTECTION CABINET

KENTUCKY HORSE RACING COMMISSION

(Amendment)

810 KAR 8:020. Drug, medication, and substance classification schedule [and withdrawal guidelines].

RELATES TO: KRS 230.215, 230.225, 230.240, 230.260, 230.265, 230.290, 230.320, 230.370

STATUTORY AUTHORITY: KRS 230.215(2), 230.225, 230.240(2), 230.260, 230.320, 230.370

NECESSITY, FUNCTION, AND CONFORMITY: KRS 230.215(2) authorizes the Kentucky

Horse Racing Commission (the "commission") to promulgate administrative regulations

prescribing conditions under which all legitimate horse racing and wagering thereon is conducted

in Kentucky. KRS 230.240(2) requires the commission to promulgate administrative regulations

restricting or prohibiting the administration of drugs or stimulants or other improper acts to

horses prior to the horse participating in a race. This administrative regulation establishes the

drug classification schedule in effect in Kentucky[and the withdrawal guidelines] for permitted

drugs, medications, and substances that may be administered to race horses competing in

Kentucky.

Section 1. The Kentucky Horse Racing Commission Uniform Drug, Medication, and Substance Classification Schedule.[, KHRC 8-020-1,]

- (1) This administrative regulation shall establish the respective classifications of all substances contained herein[therein. The Kentucky Horse Racing Commission Withdrawal Guidelines Thoroughbred; Standardbred; Quarter Horse, Appaloosa, and Arabian, KHRC 8 020 2, shall provide certain mandatory treatment requirements and guidance and advice on withdrawal intervals as contained herein].
- (2)(a) Class A drugs, medications, and substances are those that:
- (1) Have the highest potential to influence performance in the equine athlete, regardless of their approval by the United States Food and Drug Administration; or
- (2) Lack approval by the United States Food and Drug Administration, but have pharmacologic effects similar to certain Class B drugs, medications, or substances that are approved by the United States Food and Drug Administration.

(b) Class A shall include:

Acecarbromal	Naepaine
Acetophenazine	Nalbuphine
Adinazolam	Nalorphine
Alcuronium	Nebivolol
Alfentanil	Nefazodone
Almotriptan	Nefopam
Alphaprodine	Nikethamide
Alpidem	Nimetazepam
Alprazolam	Nitrazepam Nitrazepam
Alprenolol	Norbolethone
Althesin	Norclostebol
Aminorex	Nordiazepam
<u>Amisulpride</u>	Norepinephrine Norepinephrine
<u>Amitriptyline</u>	Norethandrolone
<u>Amobarbital</u>	Nortriptyline Nortriptyline
<u>Amoxapine</u>	Nylidrin
<u>Amperozide</u>	<u>Olanzapine</u>
<u>Amphetamine</u>	<u>Olmesartan</u>
Amyl nitrite	<u>Oxabolone</u>
<u>Anileridine</u>	<u>Oxazepam</u>

Anilopam Oxazolam Apomorphine Oxcarbazepine Aprobarbital Oxilofrine Arecoline Oxprenolol Atracurium Oxycodone Atomoxetine Oxymesterone Azacylonol Oxymorphone Azaperone Oxypertine Barbital Paliperidone Barbiturates Pancuronium Bemegride Papaverine Benazepril Paraldehyde Paramethadione Benperidol

BentazepamPargylineBenzactizineParoxetineBenzoctaminePemolineBenzonatatePenfluridolBenzphetaminePentaerythritolBenztropinePentobarbitalBenzylpiperazinePentylenetetrazol

Bethanidine Perazine

<u>Biriperone</u>
<u>Perfluorocarbons</u>
<u>Perfluorodecahydro-</u>

<u>Bitolterol</u> <u>naphthalene</u> <u>Bolasterone</u> <u>Perfluorodecalin</u>

<u>Boldione</u> <u>Perfluorooctylbromide</u>

Brimondine Perfluorotripropylamine Bromazepam Bromfenac Periciazine Bromisovalum Perindopril Perlapine Bromocriptine Bromperidol Perphenazine Brotizolam Phenaglycodol Phenazocine Bufexamac Bupivacaine Phencyclidine Buprenorphine Phendimetrazine

Buspirone Phenelzine Phenmetrazine Bupropion Butabartital Phenobarbital Butacaine Phentermine Butalbital Physostigmine Butanilicaine Picrotoxin Butaperazine Piminodine Butoctamide Pimozide

Calusterone Pinazepam Pipamperone Camazepam Cannabinoids, Synthetic Pipecuronium Captadiame Pipequaline Carazolol Piperacetazine <u>Carbid</u>opa Piperocaine Carbromal Pipotiazine Carfentanil Pipradrol <u>Carphenazine</u> Piquindone Carpipramine Piritramide Cathinone Prazepam Chloral betaine Procaterol

Chloral hydrateProchlorperazineChloraldehydePropanididChloralosePropiomazine

<u>Chlordiazepoxide</u> <u>Propionylpromazine</u>

Chlorhexadol Propiram Chlormezanone Propofol Chloroform Propoxycaine Chloroprocaine Prostanozol Chlorproethazine Prothipendyl Chlorpromazine Protokylol Chlorprothixene Protriptyline Proxibarbital Cimaterol Citalopram Pyrithyldione Cllibucaine Quazipam

Clocapramine Quinapril / Quinaprilat

Quetiapine

ClomethiazoleQuinboloneClomipramineRacemethorphanClonazepamRacemorphanClorazepateRacloprideClormecaineRactopamine

Clobazam

<u>Clostebol</u> <u>Ramipril / Ramiprilat</u>

Clothiapine Remifentanil Clotiazepam Remoxipride Cloxazolam Rilmazafone Clozapine Risperidone Cobratoxin <u>Ritanserin</u> Cocaine Rivastigmine Codeine Rocuronium Conorphone Ropivacaine Conotoxin Secobarbital Corticaine Selegiline

CrotetamideSertralineCyamemazineSildenafilCyclandelateSnake VenomsCyclobarbitalSomatremDarbepoetinSomatropinDecamethoniumSpiclomazineDehydrochloromethy-Spiperone

testosterone Spirapril / Spiraprilat

DelorazepamStenboloneDemoxepamSuccinylcholineDermorphinSufentanil

<u>Desipramine</u> <u>Sulfondiethylmethane</u>

Desoxymethyl-
testosteroneSulfonmethaneDextromoramideSulpirideDezocineSultoprideDiamorphineTadalasilDichloralphenazoneTalbutalDiethylpropionTandospirone

DiethylpropionTandospironeDiethylthiambuteneTemazepamDihydrocodeineTerazosinDimeflineTetrabenazineDiprenorphineTetracaine

<u>Divalproex</u> <u>Tetrahydrogestrinone</u>

Dixyrazine
Donepezil
Dopamine
Doxacurium

Tetrazepam
Thebaine
Thialbarbital
Thiamylal

<u>Doxapram</u> <u>Thiethylperazine</u>

Thiopental Doxazosin Thiopropazate Doxefazepam Doxepin Thioproperazine Droperidol Thioridazine Thiothixene Duloxetine Eletriptan Tiapride Enalapril Tiletamine Enciprazine Timiperone Tofisopam Endorphins **Enkephalins Topirimate** Ephedrine Torsemide

Epibatidine Tranylcypromine

EpinephrineTrazodoneErgaloid MesylatesTretoquinolErthritol tetranitrateTriazolam

Erythropoietin Tribromethanol

Eszopiclone Tricaine

<u>Estazolam</u> <u>Trichloroethanol</u> Ethamivan Tricholoethylene

Triclofos Ethanol Ethchlorvynol Trifluomeprazine Ethinamate Trifluoperazine Trifluperidol Ethoheptazine **Ethopropazine** Triflupromazine Trihexylphenidyl Ethosuximide Trimethaphan Ethylisobutrazine Ethylmorphine Trimipramine Ethylnorepinephrine Tubo<u>curarine</u> Ethylphenidate Tybamate Etidocaine Urethane Etifoxin Valerenic Acid Etizolam Valnoctamide Etodroxizine Vardenafil Etomidate Venlafaxine Etorphine HCL Veralipride Fenarbamate Vercuronium

Fentanyl Vinbarbital Fluanisone Vinylbital Fludiazepam Zaleplon Flunitrazepam Ziconotide Fluopromazine Zilpaterol

Viloxazine

Fluoresone hydrochloride Ziprasidone Fluoxetine Flupenthixol Zolazepam Flupirtine Zolpidem Flurazepam Zopiclone Fluspirilene Zotepine Zuclopenthixol

Flutoprazepam

Fluvoxamine Formebolone Fosinopril Furzabol Galantamine Gallamine Gepirone

Fenfluramine

Gestrinone <u>Glutethimide</u>

Guanadrel

<u>Guanethidine</u> Halazepam <u>Haloperidol</u> <u>Haloxazolam</u> **Hemoglobinglutamers Hemopure** <u>Hexafluorenium</u> Hexobarbital <u>Homophenazine</u> Hydrocodone Hydromorphone **Hydroxyamphetamine** Ibomal lloprost <u>Imipramine</u> Inositol Trispyrophosphate <u>Ipsapirone</u> Irbesarten <u>Isocarboxazid</u> <u>Isomethadone</u> <u>Isoproterenol</u> Ketazolam <u>Ketorolac</u> Lamotrigine <u>Lenperone</u> Levodopa <u>Levomethorphan</u> Levorphanol Lisinopril Lithium Lobeline <u>Lofentanil</u> Loflazepate, Ethyl <u>Loprazolam</u> <u>Lorazepam</u> <u>Lormetazepam</u> Loxapine <u>Mabuterol</u> Maprotiline Mazindol Mebutamate <u>Meclofenoxate</u> Medazepam

Meldonium Melperone **Memantine** Meparfynol Mepazine <u>Meperidine</u> Mephenoxalone Mephentermine Mephenytoin Mephobarbital Meprobamate Mesoridazine Mestanolone Mesterolone <u>Metaclazepam</u> Metaraminol Metazocine Methachloline Methadone Methamphetamine, when detected exclusively as dmethamphetamine or in combination with Imethamphetamine Methandriol Methandrostenolone Methaqualone Metharbital Methasterone Methcathinone Methenolone Methixene Methohexital Methotrimeprazine Methoxamine Methoxyphenamine 3-Methoxytyramine Methyl-1-testosterone Methylandriostenediol Methyldienolone <u>Methyldopa</u> Methylene Dioxypyrovalene (MDPV; 3,4

Methylenedioxy-	
<u>pyrovalerone)</u>	
<u>Methylhexaneamine</u>	
<u>Methylnortestosterone</u>	
<u>Methylphenidate</u>	
<u>Methyprylon</u>	
<u>Metocurine</u>	
<u>Metomidate</u>	
<u>Metopon</u>	
<u>Mexazolam</u>	
<u>Mirtazapine</u>	
<u>Mivacurium</u>	
<u>Modafinil</u>	
<u>Molindone</u>	
<u>Moperone</u>	
<u>Morphine</u>	
<u>Mosapramine</u>	
<u>Muscarine</u>	

(3)(a) Class B drugs, medications, and substances are those that:

(1) Are approved by the United States Food and Drug Administration and have a high potential to influence performance in the equine athlete, but less potential than Class A drugs, medications, and substances that are classified at that level because they have the highest potential to influence performance; or

(2) Lack approval by the United States Food and Drug Administration, but have pharmacologic effects similar to certain Class C drugs, medications, or substances that are approved by the United States Food and Drug Administration.

(b) Class B shall include:

2-Aminoheptane	<u>Nadol</u>
<u>Acebutolol</u>	<u>Naloxone</u>
<u>Acepromazine</u>	<u>Naltrexone</u>
<u>Acetanilid</u>	<u>Nandrolone</u>
<u>Acetophenetidin</u>	<u>Naphazoline</u>
<u>Adrenochrome</u>	<u>Naratriptan</u>
<u>monosemicarbazone</u>	<u>Neostigmine</u>

salicylate Nicardipine Albuterol Nifedipine Alclofenac Niflumic acid Aldosterone Nimesulide Ambenonium Nimodipine Ambroxol Nitroglycerin Amiloride Nortestosterone Aminophylline Orphenadrine <u>Aminopyrine</u> Oxandrolone Amiodarone Oxaprozin Amisometradine Oxymetazoline Amitraz Oxymetholone Amlodipine Oxyphencyclimine Amrinone Oxyphenonium <u>Anisotropine</u> Penbutolol Antipyrine Pentazocine Apazone Pergolide Aprindine Phenacemide

Phenoxybenzamine Arformoterol

Articaine Phensuximide Atenolol Phentolamine Phenylephrine Atropine

Baclofen Phenylpropanolamine

Bend<u>roflumethiazide</u> Phenytoin Benoxaprofen Pindolol Benzocaine Pirbuterol Benzthiazide Piretanide Bepridil Piroxicam Betaxolol Polythiazide Bisoprolol Prazosin Boldenone Prilocaine Bretylium Primidone Bromhexine <u>Procainamide</u> Bromodiphenhydramine Procaine Brompheniramine Procyclidine Bumetanide Promazine Butorphanol Promethazine Butoxycaine Propafenone Caffeine Propantheline

Candesartan Propentophylline Captopril Propranolol Propylhexedrine Carbachol <u>Carbamezapine</u> Pseudoephedrine Carbazochrome Pyridostigmine

<u>Carbinoxamine</u> **Pyrilamine** Carisoprodol Quinidine <u>Carprofen</u> Reserpine Carteolol Ritodrine Carticaine Rizatriptan <u>Carved</u>ilol Rofecoxib Celecoxib Romifidine Chlormerodrin Salmeterol Chlorothiazide **Scopolamine** Chlorpheniramine Sibutramine Chlorthalidone Sotalol

Chlorzoxazone Spironalactone Cilostazol Stanozolol Clanobutin Strychnine Clemastine Sumatriptan Clenbuterol Telmisartin Clidinium Tenoxicam Clofenamide Tepoxalin Clonidine Terbutaline Colchicine Terfenadine Cyclizine Testolactone Cyclobenzaprine Testosterone Cyclothiazide Tetrahydrozoline <u>Cycrimine</u> Theobromine Cyproheptadine Theophylline Danazol Thiosalicylate Deracoxib Thiphenamil Tiaprofenic acid Detomidine

Dextromethorphan Timolol Dextropropoxyphene Tocainide Tolazoline Diazepam Diazoxide Tolmetin Dibucaine Tramadol Diflunisal Trandolapril Digitoxin Trenbolone Digoxin Triamterene Dihydroergotamine Tridihexethyl Diltiazem Trimeprazine **Dimethisoquin** Trimethadione Tripel<u>ennamine</u> Diphenhydramine Triprolidine Diphenoxylate Dipyridamole Valdecoxib <u>Disopyramide</u> Valsartan Vedaprofen Dobutamine

Doxylamine
Dromstanolone
Dyphylline
Edrophonium

Eltenac Enalapril Ergotamine Esmolol

Etamiphylline
Etanercept
Ethacrynic acid

Ethotoin Ethylestrenol

Ethylestrenol
Etodolac
Felbamate
Felodipine

Felodipine
Fenbufen
Fenclozic acid
Fenoldopam
Fenoprofen
Fenoterol

Fenspiride Fentiazac Flecainide Floctafenine

Flufenamic acid Flumethiazide

Flunarizine

<u>Fluoroprednisolone</u>

<u>Fluoxymesterone</u>

<u>Fluphenazine</u> <u>Flurbiprofen</u>

Formoterol Fosphenytoin

Gabapentin Guanabenz

Heptaminol

<u>Hexocyclium</u>

<u>Hexylcaine</u>

<u>Homatropine</u>

<u>Hydralazine</u>

<u>Hydrochlorthiazide</u> <u>Hydroflumethiazide</u>

Hydroxyzine

Verapamil Xylazine

Xylometazoline
Yohimbine
Zolmitriptan
Zomepirac
Zonisamide

Ibutilide Indomethacin <u>Infliximab</u> <u>Ipratropium</u> Isoetharine <u>Isometheptene</u> <u>Isopropamide</u> Isosorbide dinitrate <u>Isoxicam</u> Isradipine Kebuzone <u>Ketamine</u> L-methamphetamine, when detected by itself and not in combination with dmethamphetamine Labetalol <u>Levobunolol</u> Lidocaine <u>Loperamide</u> Losartan **Mecamylamine** Meclizine **Medetomid**ine Mefenamic acid MelMepenzolate Mephenesin Mepivacaine Meralluride Merbaphen Mercaptomerin Mercumatilin <u>Mersalyl</u> Metaproterenol <u>Metaxalone</u> <u>Methantheline</u> <u>Methapyrilene</u> Methdilazine **Methosuxamide** Methotrexate <u>Methscopolamine</u> <u>Methylatropine</u> <u>Methylchlorthiazide</u> Methysergide

<u>Methyltestosterone</u>		
<u>Metiamide</u>		
<u>Metolazone</u>		
<u>Metoprolol</u>		
<u>Mexilitine</u>		
<u>Mibefradil</u>		
<u>Mibolerone</u>		
<u>Midazolam</u>		
<u>Midodrine</u>		
<u>Milrinone</u>		
<u>Minoxidil</u>		
<u>Moexipriloxicam</u>		
(4)(a) Class C drugs, medi	cations, and substances are those	e that:

(1) Are approved by the United States Food and Drug Administration and have a lesser potential to influence performance in the equine athlete than Class A drugs, medications, and substances and those Class B drugs, medications, and substances that are classified at that level because they have a high potential to influence performance and are approved by the United States Food and Drug Administration; or

(2) Lack approval by the United States Food and Drug Administration, but have pharmacologic effects similar to certain Class D drugs, medications, or substances that are approved by the United States Food and Drug Administration.

(b) Class C shall include:

<u>Acenocoumarol</u>	<u>Glycopyrrolate</u>
<u>Acetaminophen</u>	<u>Guaifenesin</u>
<u>Acetazolamide</u>	<u>Halcinonide</u>
Acetylsalicylic acid	<u>Halobetasol</u>
<u>Alclometasone</u>	<u>Hydrocortisone</u>
<u>Amcinonide</u>	<u>Ibuprofen</u>
Aminocaproic acid	<u>Isoflupredone</u>
<u>Beclomethasone</u>	<u>Ketoprofen</u>
<u>Benoxinate</u>	<u>Letosteine</u>
<u>Betamethasone</u>	<u>Loratidine</u>
<u>Bethanechol</u>	Meclofenamic acid

Budesonide Medrysone Butamben Mesalamine <u>Camphor</u> Methazolamide Cetirizine Methocarbamol Chlorophenesin Methylergonovine Chloroquine Methylprednisolone Ciclesonide Metoclopramide Clobetasol Mometasone Clocortolone Montelukast N-butylscopolamine

Cortisone

Cyclomethylcaine Nabumetone Dantrolene Naproxen Dembroxol Olsalazine

Deoxycorticosterone Oxyphenbutazone Desonide Paramethasone Desoximetasone Phenylbutazone Dexamethasone Pirenzapine Dibucaine Pramoxine Dichlorphenamide Prednisolone Diclofenac Prednisone Diflorasone Probenecid Diflucortolone <u>Proparacaine</u> Dimethylsulfoxide Salicylamide Diphenadione <u>Salicyla</u>te Dipyrone Sulfasalazine Dyclonine Sulindac

Ergonovine Tranexamic acid

Triamcinolone acetonide Ethoxzolamide

Ethylaminobenzoate Trichlormethiazide

Fexofenadine Zafirlukast Firocoxib Zeranol Fludrocortisone Zileuton

Flumethasone Flunisolide Flunixin Fluocinolone Fluocinonide Fluorometholone Fluprednisolone Flurandrenolide Fluticasone

Furosemide

(5)(a) Class D drugs, medications, and substances are those that:

(1) Have a lesser potential to influence performance in the equine athlete than Class A
and B drugs, medications, and substances or those Class C drugs, medications, and substances
that are classified at that level because they have a lesser potential to influence performance and
are not approved by the United States Food and Drug Administration; or
(2) Have a lesser potential to influence performance in the equine athlete than any Class
A, B, or C drugs, medications or substances.

(b) Class D shall include:

<u>Anisindione</u>	<u>Nedocromil</u>
<u>Cimetidine</u>	<u>Nizatidine</u>
<u>Cromolyn</u>	<u>Omeprazole</u>
<u>Dicumarol</u>	<u>Pantoprazole</u>
<u>Esomeprazole</u>	<u>Pentoxyfylline</u>
<u>Famotidine</u>	<u>Phenindione</u>
<u>Isoxsuprine</u>	<u>Phenprocoumon</u>
<u>Lansoprazole</u>	Polyethylene glycol
Misoprostol	<u>Rabeprazole</u>
	<u>Ranitidine</u>
	<u>Warfarin</u>

810 KAR 8:020 READ AND APPROVED:

Secretary, Public Protection Cabinet

Jonathan Rabinowitz / gw	03/04/2021
Jonathan Rabinowitz	Date
Chair, Kentucky Horse Racing Commission	
King BHang	3/4/2021
Kerry Harvey	Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held at 9:00 a.m. on May 24, 2021 at Kentucky Horse Racing Commission, 4063 Iron Works Parkway, Building B, Lexington, KY 40511 via Zoom. Individuals interested in being heard at this hearing shall notify this agency in writing by five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who wishes to be heard will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through 11:59 PM on May 31, 2021. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person below.

Contact Person: Jennifer Wolsing

Title: General Counsel

Address: Kentucky Horse Racing Commission, 4063 Iron Works Parkway, Building B, Lexington,

KY 40511

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Email: jennifer.wolsing@ky.gov

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Regulation: 810 KAR 8:020

Contact Person: Jennifer Wolsing

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Email: jennifer.wolsing@ky.gov

(1) Provide a brief summary of:

- (a) What this administrative regulation does: This regulation sets a medication classification schedule.
- (b) The necessity of this administrative regulation: This regulation is necessary to clearly establish requirements and prohibitions concerning the use of medications before and during race meetings.
- (c) How this administrative regulation conforms to the content of the authorizing statutes: KRS 230.215(2) authorizes the Kentucky Horse Racing Commission to promulgate administrative regulations prescribing conditions under which all legitimate horse racing and wagering thereon is conducted in Kentucky. KRS 230.240(2) requires the commission to promulgate administrative regulations restricting or prohibiting the administration of drugs or stimulants or other improper acts to horses prior to the horse participating in a race. This administrative regulation establishes the drug classification schedule in effect in Kentucky.
- (d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: This administrative regulation ensures that medications are used appropriately on and before racing dates, and in a manner that is consistent with the integrity of racing.
- (2) If this is an amendment to an existing administrative regulation, provide a brief summary of:
- (a) How the amendment will change this existing administrative regulation: This amendment will change the regulation in two (2) ways. First, the medication classification schedule is removed from incorporated materials and placed directly into the body of the regulation. Second, the withdrawal guidelines and threshold levels are removed from incorporated materials and placed directly into the body of 810 KAR 8:025.
- (b) The necessity of the amendment to this administrative regulation: This amendment is necessary to consolidate incorporated materials into the body of the regulation. Regulated entities will be able to read all guidelines at the LRC's website or Westlaw, rather than searching for incorporated materials that are available on the KHRC's website.

- (c) How the amendment conforms to the content of the authorizing statutes: KRS 230.215(2) and 230.260(8) authorize the commission to promulgate administrative regulations prescribing conditions under which racing shall be conducted in Kentucky. KRS 230.240(2) authorizes the commission to promulgate administrative regulations restricting or prohibiting the use and administration of drugs or simulants or other improper acts to horses participating in a race. The amendment to this regulation is necessary to ensure that racing participants have easier access to the commission's regulatory requirements and guidance.
- (d) How the amendment will assist in the effective administration of the statutes: The amendment will assist in the effective administration of KRS 230.215(2), 230.260(8), KRS 230.240(2) by ensuring that racing participants have easier access to regulations establishing appropriate requirements and prohibitions pertaining to the use of medications in horse racing in Kentucky.
- (3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: The Kentucky Horse Racing Commission is affected by this administrative regulation. In addition, Kentucky's licensed thoroughbred and standardbred race tracks, and all individual participants in horse racing, are potentially affected by this administrative regulation's establishment of fundamental rules pertaining to the use of medication in horse racing. In 2017, the commission licensed over 22,000 individuals to participate in horse racing. This number is consistent from year to year.
- (4) Provide an analysis of how the entities identified in the previous question will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:
- (a) List the actions each of the regulated entities have to take to comply with this regulation or amendment: Participants in horse racing, and especially owners, trainers, and veterinarians, will be required to adhere to the requirements and rules set forth in these medication classifications, which pertain to the use of medications in horse racing.
- (b) In complying with this administrative regulation or amendment, how much will it cost each of the entities: No new costs are anticipated to comply with this administrative regulation, as Kentucky's licensees have operated in accordance with similar requirements for many years.
- (c) As a result of compliance, what benefits will accrue to the entities: Participants in racing will benefit from clearly defined rules that enhance the integrity of racing.
- (5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:
- (a) Initially: There is no initial administrative cost to implement this administrative regulation.

- (b) On a continuing basis: There is no continuing cost to implement this administrative regulation.
- (6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Kentucky's racing associations are required by KRS 230.240(2) to pay for the cost of testing for prohibited medications. The Kentucky Horse Racing Commission covers other costs of implementing and enforcing this administrative regulation.
- (7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: No additional fees or funding are necessary to implement this administrative regulation.
- (8) State whether or not this administrative regulation established any fees or directly or indirectly increased any fees: This administrative regulation does not establish any new fees or increase any current fees to participate.
- (9) TIERING: Is tiering applied? Explain why or why not. Tiering was not applied because this administrative regulation will apply to all similarly situated entities in an equal manner.

FISCAL NOTE ON STATE OR LOCAL GOVERNMENT

Regulation: 810 KAR 8:020

Contact Person: Jennifer Wolsing

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- (1) What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation? The Kentucky Horse Racing Commission will be impacted by this administrative regulation.
- (2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation. KRS 230.215, 230.225, 230.240, 230.260, 230.300.
- (3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect. If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.
- (a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year? This administrative regulation will not generate revenue for state or local government for the first year.
- (b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years? This administrative regulation will not generate revenue for state or local government for subsequent years.
- (c) How much will it cost to administer this program for the first year? No funds will be required to administer this regulation for the first year.
- (d) How much will it cost to administer this program for subsequent years? No funds will be required to administer this regulation for the subsequent years.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

- (4) Revenues (+/-): Neutral.
- (5) Expenditures (+/-): Neutral.

(6) Other Explanation: NA