First Regular Session of the 122nd General Assembly (2021)

HOUSE ENROLLED ACT No. 1084

AN ACT to amend the Indiana Code concerning general provisions.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 3-6-4.2-3, AS AMENDED BY P.L.219-2013, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 3. (a) The governor shall appoint two (2) co-directors for the election division

~~(1) The co-directors~~ **who** shall do the following:

~~(A)~~ **(1)** Carry out the policies, decisions, and recommendations of the commission.

~~(B)~~ **(2)** Maintain an office for the election division.

(b) The co-directors may not be members of the same political party.

(c) The co-directors have equal authority and responsibilities under this title. However, if the co-directors are unable to resolve a dispute between themselves regarding:

(1) the commission's or the election division's budget;

(2) the commission's or the election division's expenditures; or

(3) contracts to which the commission or the election division is a party;

the secretary of state may decide the matter. A decision by the secretary of state regarding the matter is final.

(d) The co-directors must:

(1) be classified the same under the state's personnel system; and

(2) except for differences due to years of service as co-directors, receive the same compensation.

SECTION 2. IC 3-11-2-10, AS AMENDED BY P.L.141-2020, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) Public questions shall be placed on the general election ballot in the following order after the statement described in section 7 of this chapter, and the instructions described in subsections (d) and (e) and section 8 of this chapter, if instructions are printed on the ballot:

(1) Ratification of a state constitutional amendment.

(2) Local public questions.

Subject to section 10.1 of this chapter, each public question shall be placed in a separate column on the ballot.

(b) The name or title of the political party or independent ticket described in section 6 of this chapter shall be placed on the general election ballot after the public questions described in subsection (a). The device of the political party or independent ticket shall be placed immediately under the name of the political party or independent ticket. Notwithstanding section 8(b) of this chapter, the instructions for voting a straight party ticket shall be placed to the right of the device on the ballot.

(c) The instructions for voting a straight party ticket must conform as nearly as possible to the following:

"(1) You are not required to vote a straight party ticket. If you do not wish to vote a straight party ticket, do not make a mark in this section, and proceed to voting the ballot by office.

(2) To vote a straight (insert political party name) ticket for all (insert political party name) candidates on this ballot, except for candidates described in ~~(2)~~ **(3)** below, make a voting mark on or in this circle and do not make any other marks on this ballot.

(3) To vote for any candidate for an at-large office (insert county council, city common council, town council, or township board if those offices appear on this ballot) to which more than one (1) person may be elected, you must make another voting mark for each candidate you wish to vote for. Your straight party vote will not count as a vote for any candidate for that office.

(4) If you wish to vote for a candidate seeking a nonpartisan office or on a public question, you must make another voting mark on the appropriate place on this ballot.".

(d) Except as permitted under section 8(b) of this chapter, if the ballot contains an independent ticket described in section 6 of this chapter and at least one (1) other independent candidate, the ballot must also contain a statement that reads substantially as follows: "A vote cast for an independent ticket will only be counted for the

candidates for President and Vice President or governor and lieutenant governor comprising that independent ticket. This vote will NOT be counted for any OTHER independent candidate appearing on the ballot.".

(e) Except as permitted under section 8(b) of this chapter, the ballot must also contain a statement that reads substantially as follows: "A write-in vote will NOT be counted unless the vote is for a DECLARED write-in candidate. To vote for a write-in candidate, you must make a voting mark on or in the square to the left of the name you have written in or your vote will not be counted.".

(f) Subject to section 10.1 of this chapter, the list of candidates of the political party shall be placed immediately under the instructions for voting a straight party ticket. The names of the candidates shall be placed three-fourths (3/4) of an inch apart from center to center of the name. The name of each candidate must have, immediately on its left, a square three-eighths (3/8) of an inch on each side.

(g) The circuit court clerk may authorize the printing of ballots containing a ballot variation code to ensure that the proper version of a ballot is used within a precinct.

SECTION 3. IC 4-1-11-4, AS ADDED BY P.L.91-2005, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 4. As used in this ~~section~~ **chapter,** "state agency" has the meaning set forth in IC 4-1-10-2.

SECTION 4. IC 4-13-1-26 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 26. (a) The following amounts are appropriated to the department for the state fiscal year ending June 30, 2013:~~

~~(1) Seventy million dollars ($70,000,000) to defease any remaining bonds on the state museum.~~

~~(2) Fifty-eight million dollars ($58,000,000) to defease any remaining bonds on the forensics and health sciences lab.~~

~~(b) Money appropriated under this section may not be used for any other purpose.~~

SECTION 5. IC 4-23-6.5-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. As used in this chapter, "fund" refers to the coroners training and continuing education fund established by section ~~9~~ **8** of this chapter.

SECTION 6. IC 4-24-9 IS REPEALED [EFFECTIVE JULY 1, 2021]. (Name Changes for Certain Institutions).

SECTION 7. IC 4-31-11-5, AS AMENDED BY P.L.256-2015, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 5. ~~Except as provided in section 5.5 of this chapter,~~ A member of a development committee serves a term of four

(4) years. If a vacancy occurs on a development committee due to the death, resignation, or removal of a member, a new member shall be appointed to serve for the remainder of the unexpired term in the same manner as the original member was appointed under section 4 of this chapter.

SECTION 8. IC 5-10-5.5-17, AS AMENDED BY P.L.6-2020, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 17. **(a)** Any participant whose employment as an officer is terminated before accumulating fifteen (15) years of creditable service ~~and~~ and is not receiving a disability benefit under this chapter shall be entitled to a lump-sum refund of all contributions standing to the participant's credit in the participants' savings fund plus accumulated interest thereon.

(b) This subsection applies to participants who die before February 1, 2018. If a participant dies before accumulating fifteen (15) years of creditable service, all contributions standing to the participant's credit in the participants' savings fund plus the accumulated interest thereon shall be paid by the board to the person the participant shall nominate by written direction duly acknowledged and filed with the board. The payment may be in the form of a lump sum or a series of payments, at the discretion of the board.

(c) If a participant dies before accumulating fifteen (15) years of creditable service and has nominated no beneficiary, or in the event that the participant's nominee predeceases the participant, all contributions standing to the participant's credit in the participants' savings fund, plus accumulated interest thereon shall be paid by the board to the estate of the deceased participant. The payment may be in the form of a lump sum or a series of payments, at the discretion of the board.

(d) If a participant terminates the participant's employment after accumulating fifteen (15) years of creditable service, but before becoming eligible for any benefits under this chapter, no refund of contributions and interest shall be allowed. In such case, the participant's contributions shall be retained by the board until the participant becomes eligible for benefits. At that time, benefits shall be paid to, or on behalf of the participant in the same manner and in the same amount as all similar benefits are paid.

SECTION 9. IC 5-10.3-5-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 3. (a) The board shall invest its assets with the care, skill, prudence, and diligence that a prudent person acting in a like capacity and familiar with such matters would use in the conduct of an enterprise of a like character with like

aims. The board shall also diversify such investments in accordance with prudent investment standards. ~~subject to the limitations and restrictions set forth in IC 5-10.2-2-18.~~

(b) The board may invest up to five percent (5%) of the excess of its cash working balance in debentures of the corporation for innovation development subject to IC 30-4-3-3.

(c) The board is not subject to IC 4-13, IC 4-13.6, and IC 5-16 when managing real property as an investment. Any management agreements entered into by the board must ensure that the management agent acts in a prudent manner with regard to the purchase of goods and services. Contracts for the management of investment property shall be submitted to the governor, the attorney general, and the budget agency for approval. A contract for management of real property as an investment:

(1) may not exceed a four (4) year term and must be based upon guidelines established by the board;

(2) may provide that the property manager may collect rent and make disbursements for routine operating expenses such as utilities, cleaning, maintenance, and minor tenant finish needs;

(3) must establish, consistent with the board's duty under IC 30-4-3-3(c), guidelines for the prudent management of expenditures related to routine operation and capital improvements; and

(4) may provide specific guidelines for the board to purchase new properties, contract for the construction or repair of properties, and lease or sell properties without individual transactions requiring the approval of the governor, the attorney general, the Indiana department of administration, and the budget agency. However, each individual contract involving the purchase or sale of real property is subject to review and approval by the attorney general at the specific request of the attorney general.

(d) Whenever the board takes bids in managing or selling real property, the board shall require a bid submitted by a trust (as defined in IC 30-4-1-1(a)) to identify all of the following:

(1) Each beneficiary of the trust.

(2) Each settlor empowered to revoke or modify the trust.

SECTION 10. IC 6-1.1-20-1.1, AS AMENDED BY P.L.60-2020, SECTION 1, AND AS AMENDED BY P.L.159-2020, SECTION 40, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1.1. As used in this chapter, "controlled project" means any project financed by bonds or a lease, except for the following:

(1) A project for which the political subdivision reasonably expects to pay:

(A) debt service; or

(B) lease rentals;

from funds other than property taxes that are exempt from the levy limitations of IC 6-1.1-18.5 or (before January 1, 2009) IC 20-45-3. A project is not a controlled project even though the political subdivision has pledged to levy property taxes to pay the debt service or lease rentals if those other funds are insufficient.

(2) A project that will not cost the political subdivision more than the lesser of the following:

(A) An amount equal to the following:

(i) In the case of an ordinance or resolution adopted before January 1, 2018, making a preliminary determination to issue bonds or enter into a lease for the project, two million dollars ($2,000,000).

(ii) In the case of an ordinance or resolution adopted after December 31, 2017, and before January 1, 2019, making a preliminary determination to issue bonds or enter into a lease for the project, five million dollars ($5,000,000).

(iii) In the case of an ordinance or resolution adopted in a calendar year after December 31, 2018, making a preliminary determination to issue bonds or enter into a lease for the project, an amount (as determined by the department of local government finance) equal to the result of the ~~*assessed value*~~ *maximum levy* growth quotient determined under IC 6-1.1-18.5-2 for the year multiplied by the amount determined under this clause for the preceding calendar year.

The department of local government finance shall publish the threshold determined under item (iii) in the Indiana Register under IC 4-22-7-7 not more than sixty (60) days after the date the budget agency releases the *maximum levy* growth quotient for the ensuing year under IC 6-1.1-18.5-2.

(B) An amount equal to the following:

(i) One percent (1%) of the total gross assessed value of property within the political subdivision on the last assessment date, if that total gross assessed value is more than one hundred million dollars ($100,000,000).

(ii) One million dollars ($1,000,000), if the total gross assessed value of property within the political subdivision on the last assessment date is not more than one hundred

million dollars ($100,000,000).

(3) A project that is being refinanced for the purpose of providing gross or net present value savings to taxpayers.

(4) A project for which bonds were issued or leases were entered into before January 1, 1996, or where the state board of tax commissioners has approved the issuance of bonds or the execution of leases before January 1, 1996.

(5) A project that is required by a court order holding that a federal law mandates the project.

(6) A project that is in response to:

(A) a natural disaster;

(B) an accident; or

(C) an emergency;

in the political subdivision that makes a building or facility unavailable for its intended use.

(7) A project that was not a controlled project under this section as in effect on June 30, 2008, and for which:

(A) the bonds or lease for the project were issued or entered into before July 1, 2008; or

(B) the issuance of the bonds or the execution of the lease for the project was approved by the department of local government finance before July 1, 2008.

(8) A project of the Little Calumet River basin development commission for which bonds are payable from special assessments collected under IC 14-13-2-18.6.

(9) A project for engineering, land and right-of-way acquisition, construction, resurfacing, maintenance, restoration, and rehabilitation exclusively for or of:

(A) local road and street systems, including bridges that are designated as being in a local road and street system;

(B) arterial road and street systems, including bridges that are designated as being in an arterial road and street system; or

(C) any combination of local and arterial road and street systems, including designated bridges.

SECTION 11. IC 6-3.1-29-13, AS AMENDED BY P.L.15-2020, SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 13. As used in this ~~section,~~ **chapter,** "women's business enterprise" has the meaning set forth in IC 4-13-16.5-1.

SECTION 12. IC 6-3.6-3-6, AS AMENDED BY P.L.154-2020, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 6. (a) This section applies to a county in which the county adopting body is a local income tax council.

(b) In the case of a city or town that lies within more than one (1) county, the county auditor of each county shall base the allocations required by ~~subsection (c)~~ **subsections (d) and (e)** on the population of that part of the city or town that lies within the county for which the allocations are being made.

(c) Each local income tax council has a total of one hundred (100) votes.

(d) Each county, city, or town that is a member of a local income tax council is allocated a percentage of the total one hundred (100) votes that may be cast. The percentage that a city or town is allocated for a year equals the same percentage that the population of the city or town bears to the population of the county. The percentage that the county is allocated for a year equals the same percentage that the population of all areas in the county not located in a city or town bears to the population of the county.

(e) This subsection applies only to a county with a single voting bloc. Each individual who sits on the fiscal body of a county, city, or town that is a member of the local income tax council is allocated for a year the number of votes equal to the total number of votes allocated to the particular county, city, or town under subsection (d) divided by the number of members on the fiscal body of the county, city, or town. This subsection expires May 31, 2021.

(f) On or before January 1 of each year, the county auditor shall certify to each member of the local income tax council the number of votes, rounded to the nearest one hundredth (0.01), each member has for that year.

(g) This subsection applies only to a county with a single voting bloc. On or before January 1 of each year, in addition to the certification to each member of the local income tax council under subsection (f), the county auditor shall certify to each individual who sits on the fiscal body of each county, city, or town that is a member of the local income tax council the number of votes, rounded to the nearest one hundredth (0.01), each individual has under subsection (e) for that year. This subsection expires May 31, 2021.

SECTION 13. IC 6-3.6-9-5, AS AMENDED BY P.L.257-2019, SECTION 71, AND AS AMENDED BY P.L.259-2019, SECTION 8, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 5. (a) Before August 2 of each calendar year, ~~*before 2018, and before June 1 of each calendar year after 2017,*~~ the budget agency shall provide to the department of local government finance and the county auditor of each adopting county an estimate of the amount determined under section 4 of this chapter that

will be distributed to the county, based on known tax rates. *Subject to subsection (c),* not later than fifteen (15) days after receiving the estimate of the certified distribution, ~~*for calendar years before 2018, and not later than July 1 of each year; for calendar years after 2017,*~~ the department of local government finance shall determine for each taxing unit and notify the county auditor of the estimated amount of property tax credits, school distributions, public safety revenue, economic development revenue, certified shares, and special purpose revenue that will be distributed to the taxing unit under this chapter during the ensuing calendar year. Not later than thirty (30) days after receiving the department's estimate, the county auditor shall notify each taxing unit of the amounts estimated for the taxing unit.

(b) Before October 1 of each calendar year, the budget agency shall certify to the department of local government finance and the county auditor of each adopting county:

(1) the amount determined under section 4 of this chapter; and

(2) the amount of interest in the county's account that has accrued and has not been included in a certification made in a preceding year.

The amount certified is the county's certified distribution for the immediately succeeding calendar year. The amount certified shall be adjusted, as necessary, under sections 6, 7, and 8 of this chapter. *Subject to subsection (d),* not later than fifteen (15) days after receiving the amount of the certified distribution, the department of local government finance shall determine for each taxing unit and notify the county auditor of the certified amount of property tax credits, school distributions, public safety revenue, economic development revenue, certified shares, and special purpose revenue that will be distributed to the taxing unit under this chapter during the ensuing calendar year. Not later than thirty (30) days after receiving the department's estimate, the county auditor shall notify each taxing unit of the certified amounts for the taxing unit.

(c) This subsection applies to Lake County. When the department of local government finance notifies the county auditor of the estimated amount of property tax credits, school distributions, public safety revenue, economic development revenue, certified shares, and special purpose revenue that will be distributed to the taxing unit under this chapter during the ensuing calendar year, the department of local government finance shall also determine the amount of additional revenue allocated for economic development purposes that will be distributed to each civil taxing unit, reduced by an amount that is equal to the following percentages of the tax revenue that would

otherwise be allocated for economic development purposes and distributed to the civil taxing unit:

(1) For Lake County, an amount equal to twenty-five percent (25%).

(2) For Crown Point, an amount equal to ten percent (10%).

(3) For Dyer, an amount equal to fifteen percent (15%).

(4) For Gary, an amount equal to seven and five-tenths percent (7.5%).

(5) For Hammond, an amount equal to fifteen percent (15%).

(6) For Highland, an amount equal to twelve percent (12%).

(7) For Hobart, an amount equal to eighteen percent (18%).

(8) For Lake Station, an amount equal to twenty percent (20%).

(9) For Lowell, an amount equal to fifteen percent (15%).

(10) For Merrillville, an amount equal to twenty-two percent (22%).

(11) For Munster, an amount equal to thirty-four percent (34%).

(12) For New Chicago, an amount equal to one percent (1%).

(13) For Schererville, an amount equal to ten percent (10%).

(14) For Schneider, an amount equal to twenty percent (20%).

(15) For Whiting, an amount equal to twenty-five percent (25%).

(16) For Winfield, an amount equal to fifteen percent (15%).

The department of local government finance shall notify the county auditor of the amounts of the reductions and the remaining amounts to be distributed.

(d) This subsection applies to Lake County. When the department of local government finance notifies the county auditor of the certified amount of property tax credits, school distributions, public safety revenue, economic development revenue, certified shares, and special purpose revenue that will be distributed to the taxing unit under this chapter during the ensuing calendar year, the department of local government finance shall also determine the amount of additional revenue allocated for economic development purposes that will be distributed to each civil taxing unit, reduced by an amount that is equal to the following percentages of the tax revenue that would otherwise be allocated for economic development purposes and distributed to the civil taxing unit:

(1) For Lake County, an amount equal to twenty-five percent (25%).

(2) For Crown Point, an amount equal to ten percent (10%).

(3) For Dyer, an amount equal to fifteen percent (15%).

(4) For Gary, an amount equal to seven and five-tenths percent (7.5%).

(5) For Hammond, an amount equal to fifteen percent (15%).

(6) For Highland, an amount equal to twelve percent (12%).

(7) For Hobart, an amount equal to eighteen percent (18%).

(8) For Lake Station, an amount equal to twenty percent (20%).

(9) For Lowell, an amount equal to fifteen percent (15%).

(10) For Merrillville, an amount equal to twenty-two percent (22%).

(11) For Munster, an amount equal to thirty-four percent (34%).

(12) For New Chicago, an amount equal to one percent (1%).

(13) For Schererville, an amount equal to ten percent (10%).

(14) For Schneider, an amount equal to twenty percent (20%).

(15) For Whiting, an amount equal to twenty-five percent (25%).

(16) For Winfield, an amount equal to fifteen percent (15%).

The department of local government finance shall notify the county auditor of the remaining amounts to be distributed and the amounts of the reductions that will be withheld under IC 6-3.6-11-5.5.

SECTION 14. IC 7.1-1-3-16.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: **Sec. 16.6. The term "farm winery" means a commercial winemaking establishment that produces wine and meets the requirements of IC 7.1-3-12-4.**

SECTION 15. IC 7.1-1-3-44 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 44. The term "farm winery" means a commercial winemaking establishment that produces wine and meets the requirements of IC 7.1-3-12-4.~~

SECTION 16. IC 7.1-3-20-16.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 16.5. (a) A permit that is authorized by this section:

(1) is subject to the quota provisions of ~~IC 7-1-3-22;~~ **IC 7.1-3-22;** and

(2) is not subject to the proximity provisions of IC 7.1-3-21-11.

(b) The commission may issue a retailer's permit to the proprietor of a restaurant that is located in a facility that is on the National Register of Historic Places or that is located within the boundaries of an historic district that is established by ordinance pursuant to IC 36-7-11-7.

SECTION 17. IC 8-1-31.6-6, AS AMENDED BY P.L.137-2020, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 6. (a) Before a water utility is authorized to include customer lead service line improvements as eligible infrastructure improvements for purposes of IC 8-1-31, for a public utility, or for purposes of this chapter, for a municipally owned utility,

the commission must first approve the water utility's plan for the replacement of the customer owned portion of the lead service lines within or connected to the water utility's system. The water utility's plan must address the following:

(1) The availability of grants or low interest loans and how the water utility plans to use available grants or low interest loans to help the water utility finance or reduce the cost of the customer lead service line improvements for the water utility and the water utility's customers, including any arrangements for the customer to receive available grants or financing directly.

(2) A description of how the replacement of customer owned lead service lines will be accomplished in conjunction with distribution system infrastructure replacement projects.

(3) The estimated savings in costs per service line that would be realized by the water utility replacing the customer owned portion of the lead service lines versus the anticipated replacement costs if customers were required to replace the customer owned portion of the lead service lines.

(4) The number of lead mains and lead service lines estimated to be part of the water utility's system.

(5) A range for the number of customer owned lead service lines estimated to be replaced annually.

(6) A range for the total feet of lead mains estimated to be replaced annually.

(7) The water utility's proposal for addressing the costs of unusual site restoration work necessitated by structures or improvements located above the customer owned portion of the lead service lines.

(8) The water utility's proposal for:

(A) communicating with the customer the availability of the water utility's plan to replace the customer owned portion of the lead service line in conjunction with the water utility's replacement of the utility owned portion of the lead service line; and

(B) documenting the customer's consent or lack of consent to replace the customer owned portion of the lead service line.

(9) The water utility's proposal concerning whether the water utility or the customer will be responsible for future replacement or repair of the portion of the new service line corresponding to the previous customer owned lead service line.

(10) The estimated total cost to replace all customer owned portions of the lead service lines within or connected to the water

utility's system and an estimated range for the annual cost to be incurred by the water utility under the water utility's plan.

(b) The commission shall approve a water utility's plan if the commission finds the plan to be reasonable and in the public interest. Subject to subsection (c), in general rate cases following the approval of a public utility's plan, the commission shall for ratemaking purposes add to the value of the public utility's property for purposes of IC 8-1-2-6 the actual costs incurred by the public utility in replacing the customer owned portion of the lead service lines and in removing customer owned lead service lines from service in accordance with the ~~water~~ **public** utility's plan, notwithstanding the continued ownership of the service line by the customer.

(c) To the extent a water utility incurs an annual cost under the water utility's plan in excess of the range set forth in subsection (a)(10) and approved by the commission under subsection (b), the additional costs are not eligible for the ratemaking treatment provided for in this section or in section 7 of this chapter.

SECTION 18. IC 8-1-31.7-2, AS ADDED BY P.L.137-2020, SECTION 15, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. As used in this chapter, "eligible addition" means any new utility plant or equipment:

(1) that does not increase revenues by connecting to new customers, even though the plant or equipment may provide the eligible utility with greater available capacity; and

(2) that:

(A) for a public utility:

(i) is used and useful;

(ii) is procured, installed, or constructed by ~~an eligible~~ **the public** utility with expenditures that are service enhancement improvements; and

(iii) was not included in the public utility's rate base in its most recent general rate case; or

(B) for a municipally owned or not-for-profit utility:

(i) is or will be an extension or replacement, consistent with section 8 of this chapter; and

(ii) was not included on the utility's balance sheet as plant in service in the utility's most recent general rate case.

SECTION 19. IC 8-15-2-18 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 18. (a) Each toll road project as defined in section ~~4(c)~~ **4(4)** of this chapter, when constructed and opened to traffic shall be maintained and kept in good condition and repair by the authority. Each such project shall also be policed and

operated by such force of police, toll-takers, and other operating employees as the authority may in its discretion employ.

(b) All public or private property damaged or destroyed in carrying out the powers granted by this chapter shall be restored or repaired and placed in its original condition as nearly as practicable or adequate compensation made therefor out of funds provided under the authority of this chapter.

(c) All counties, cities, towns, townships, and other political subdivisions and all public agencies and commissions of the state, notwithstanding any contrary provision of law, are authorized and empowered to lease, lend, grant, or convey to the authority at its request upon such terms and conditions as the proper authorities of such counties, cities, towns, townships, other political subdivisions or public agencies and commissions of the state may deem reasonable and fair and without the necessity for an advertisement, order of court, or other action of formality, other than the regular and formal action of the authorities concerned, any real property owned by any such municipality or governmental subdivision which may be necessary or convenient to the effectuation of the authorized purposes of the authority under this chapter.

SECTION 20. IC 9-30-6-8, AS AMENDED BY P.L.29-2020, SECTION 1, AND AS AMENDED BY P.L.110-2020, SECTION 4, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 8. (a) *Except as provided in IC 9-30-16-1(g),* whenever a judicial officer has determined that there was probable cause to believe that a person has violated IC 9-30-5, IC 35-46-9, or IC 14-15-8 (before its repeal), the clerk of the court shall forward:

(1) a paper copy of the affidavit, or an electronic substitute; or

(2) a bureau certificate as described in section 16 of this chapter;

to the bureau *at the conclusion of the initial hearing under subsection (c).*

(b) The probable cause affidavit required under section 7(b)(2) of this chapter must do the following:

(1) Set forth the grounds for the arresting officer's belief that there was probable cause that the arrested person was operating a vehicle in violation of IC 9-30-5 or a motorboat in violation of IC 35-46-9 or IC 14-15-8 (before its repeal).

(2) State that the person was arrested for a violation of IC 9-30-5 or operating a motorboat in violation of IC 35-46-9 or IC 14-15-8 (before its repeal).

(3) State whether the person:

(A) refused to submit to a chemical test when offered; or

(B) submitted to a chemical test that resulted in prima facie evidence that the person was intoxicated.

(4) Be sworn to by the arresting officer.

(c) Except as provided in subsection (d), if it is determined under subsection (a) that there was probable cause to believe that a person has violated IC 9-30-5, IC 35-46-9, or IC 14-15-8 (before its repeal), at the initial hearing of the matter held under IC 35-33-7-1 the court shall recommend immediate suspension of the person's driving privileges to take effect on the date the order is entered, and forward to the bureau a copy of the order recommending immediate suspension of driving privileges.

(d) If it is determined under subsection (a) that there is probable cause to believe that a person violated IC 9-30-5, the court may, as an alternative to *any* suspension of the person's driving privileges under subsection (c), issue an order recommending that the person be prohibited from operating a motor vehicle unless the motor vehicle is equipped with a functioning certified ignition interlock device under IC 9-30-8. *This subsection applies even if the probable cause affidavit in subsection (b) states that the person:*

(1) refused to submit to a chemical test; or

(2) submitted to a chemical test that resulted in prima facie evidence that the person was intoxicated.

The order remains in effect until the bureau is notified by a court that the criminal charges against the person have been resolved. *When the court issues an order under this subsection, no administrative suspension is imposed by the bureau and no suspension is noted on the person's driving record.*

(e) A person commits a Class B infraction if the person:

(1) operates a motor vehicle without a functioning certified ignition interlock device; and

(2) is prohibited from operating a motor vehicle unless the motor vehicle is equipped with a functioning certified ignition interlock device under subsection (d).

(f) A person commits a Class B misdemeanor if the person:

(1) operates a motor vehicle without a functioning certified ignition interlock device; and

(2) knows the person is prohibited from operating a motor vehicle unless the motor vehicle is equipped with a functioning certified ignition interlock device under subsection (d).

SECTION 21. IC 12-7-2-9, AS AMENDED BY P.L.171-2011, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE

JULY 1, 2021]: Sec. 9. "Agency" means the following:

~~(1) For purposes of IC 12-10-12, the meaning set forth in IC 12-10-12-1.~~

~~(2)~~ **(1)** For purposes of IC 12-12.7-2, the meaning set forth in IC 12-12.7-2-1.

~~(3)~~ **(2)** For purposes of IC 12-32-1, the meaning set forth in IC 12-32-1-1.

SECTION 22. IC 12-7-2-15, AS AMENDED BY P.L.145-2006, SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 15. "Applicant" means the following:

(1) For purposes of the following statutes, a person who has applied for assistance for the applicant or another person under any of the following statutes:

(A) IC 12-10-6.

~~(B) IC 12-10-12.~~

~~(C)~~ **(B)** IC 12-13.

~~(D)~~ **(C)** IC 12-14.

~~(E)~~ **(D)** IC 12-15.

~~(F)~~ **(E)** IC 12-19.

(2) For purposes of IC 12-17-12, the meaning set forth in IC 12-17-12-1.

(3) For purposes of IC 12-17-13, the meaning set forth in IC 12-17-13-1.

(4) For the purposes of IC 12-17.2, a person who seeks a license to operate a child care center or child care home.

(5) For purposes of IC 31-27, a person who seeks a license to operate a child caring institution, foster family home, group home, or child placing agency.

SECTION 23. IC 12-7-2-18, AS AMENDED BY P.L.145-2006, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 18. "Assistance", for purposes of the following statutes, means money or services regardless of the source, paid or furnished under any of the following statutes:

(1) IC 12-10-6.

~~(2) IC 12-10-12.~~

~~(3)~~ **(2)** IC 12-13.

~~(4)~~ **(3)** IC 12-14.

~~(5)~~ **(4)** IC 12-15.

~~(6)~~ **(5)** IC 12-19.

SECTION 24. IC 12-7-2-21, AS AMENDED BY P.L.145-2006, SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 21. "Blind" means the following:

(1) For purposes of the following statutes, the term refers to an individual who has vision in the better eye with correcting glasses of 20/200 or less, or a disqualifying visual field defect as determined upon examination by an ophthalmologist or optometrist who has been designated to make such examinations by the county office and approved by the division of family resources or by the division in the manner provided in any of the following statutes:

(A) IC 12-10-6.

~~(B) IC 12-10-12.~~

~~(C)~~ **(B)** IC 12-13.

~~(D)~~ **(C)** IC 12-14.

~~(E)~~ **(D)** IC 12-15.

~~(F)~~ **(E)** IC 12-19.

(2) For purposes of the following statutes, the term refers to an individual who has a central visual acuity of 20/200 or less in the individual's better eye with the best correction or a field of vision that is not greater than twenty (20) degrees at its widest diameter:

(A) IC 12-12-1.

(B) IC 12-12-3.

(C) IC 12-12-5.

(D) IC 12-12-6.

SECTION 25. IC 12-7-2-103 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 103. "Health facility", ~~means the following:~~

~~(1)~~ for purposes of IC 12-10-5.5, **has** the meaning set forth in IC 12-10-5.5-2.

~~(2) For purposes of IC 12-10-12, the meaning set forth in IC 12-10-12-3.~~

SECTION 26. IC 12-8-10-1, AS AMENDED BY P.L.113-2014, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. This chapter applies only to the indicated money of the following state agencies to the extent that the money is used by the agency to obtain services from grantee agencies to carry out the program functions of the agency:

(1) Money appropriated or allocated to a state agency from money received by the state under the federal Social Services Block Grant Act (42 U.S.C. 1397 et seq.).

(2) The division of aging, except this chapter does not apply to money expended under the following:

(A) The following statutes, unless application of this chapter is required by another subdivision of this section:

(i) IC 12-10-6.

(ii) IC 12-10-12 **(before its expiration).**

(B) Epilepsy services.

(3) The division of family resources, for money expended under the following programs:

(A) The child development associate scholarship program.

(B) The dependent care program.

(C) Migrant day care.

(D) The commodities program.

(E) The migrant nutrition program.

(F) Any emergency shelter program.

(G) The energy weatherization program.

(4) The state department of health, for money expended under the following statutes:

(A) IC 16-19-10.

(B) IC 16-38-3.

(5) The group.

(6) All state agencies, for any other money expended for the purchase of services if all the following apply:

(A) The purchases are made under a contract between the state agency and the office of the secretary.

(B) The contract includes a requirement that the office of the secretary perform the duties and exercise the powers described in this chapter.

(C) The contract is approved by the budget agency.

(7) The division of mental health and addiction.

SECTION 27. IC 12-10-1-3, AS AMENDED BY P.L.99-2007, SECTION 59, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 3. The bureau shall administer the following programs:

(1) The federal Older Americans Act under IC 12-9.1-4-1.

(2) Area agencies on aging services under this article.

(3) Adult protective services under IC 12-10-3.

(4) Room and board assistance and assistance to residents in county homes under IC 12-10-6.

(5) Adult guardianship program under IC 12-10-7.

(6) Community and home options for the elderly and individuals with a disability under IC 12-10-10.

~~(7) Nursing home preadmission screening under IC 12-10-12.~~

~~(8)~~ **(7)** Long term care advocacy under IC 12-10-13.

~~(9)~~ **(8)** Nutrition services and home delivered meals.

~~(10)~~ **(9)** Title III B supportive services.

~~(11)~~ **(10)** Title III D in-home services.

~~(12)~~ **(11)** Aging programs under the Social Services Block Grant.

~~(13)~~ **(12)** United States Department of Agriculture elderly feeding program.

~~(14)~~ **(13)** Title V senior employment.

~~(15)~~ **(14)** PASARR under older adult services.

SECTION 28. IC 12-10-11-2, AS AMENDED BY P.L.210-2015, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. (a) The board consists of the following fifteen (15) members:

(1) The director of the division of aging or the director's designee.

(2) The chairman of the Indiana state commission on aging or the chairman's designee.

(3) Three (3) citizens nominated by two (2) or more organizations that:

(A) represent senior citizens; and

(B) have statewide membership.

(4) One (1) citizen nominated by one (1) or more organizations that:

(A) represent individuals with disabilities, including individuals who are less than eighteen (18) years of age; and

(B) have statewide membership.

(5) One (1) citizen nominated by one (1) or more organizations that:

(A) represent individuals with mental illness, including dementia; and

(B) have statewide membership.

(6) One (1) provider who provides services under IC 12-10-10.

(7) One (1) licensed physician, physician assistant, or registered nurse who specializes either in the field of gerontology or in the field of disabilities.

(8) Two (2) home care services advocates or policy specialists nominated by two (2) or more:

(A) organizations;

(B) associations; or

(C) nongovernmental agencies;

that advocate on behalf of home care consumers, including an organization listed in subdivision (3) that represents senior citizens or persons with disabilities.

(9) Two (2) members of the senate, who may not be members of the same political party, appointed by the president pro tempore of the senate with the advice of the minority leader of the senate.

(10) Two (2) members of the house of representatives, who may not be members of the same political party, appointed by the speaker of the house of representatives with the advice of the minority leader of the house of representatives.

The members of the board listed in subdivisions (9) and (10) are nonvoting members.

(b) The members of the board designated by subsection (a)(3) through (a)(8) shall be appointed by the governor for terms of four (4) years. The term of a member of the board expires July 1. However, a member may continue to serve until a successor is appointed. In case of a vacancy, the governor shall appoint an individual to serve for the remainder of the unexpired term.

(c) The division shall establish notice and selection procedures to notify the public of the board's nomination process described in this chapter. Information must be distributed through:

(1) the area agencies on aging; and

(2) all organizations, associations, and nongovernmental agencies that work with the division on home care issues and programs.

~~(d) Notwithstanding subsection (b):~~

~~(1) the terms of all the board members designated by subsection (a)(3) through (a)(8) expire July 1, 2015;~~

~~(2) the governor shall reappoint each board member who on June 30, 2015, had at least one (1) full year remaining on the member's term as a member of the board; and~~

~~(3) the initial appointments beginning July 1, 2015, must be staggered as follows:~~

~~(A) One (1) year for one (1) member appointed under subsection (a)(3) and (a)(5).~~

~~(B) Two (2) years for one (1) member appointed under subsection (a)(3), (a)(6), and (a)(8).~~

~~(C) Three (3) years for one (1) member appointed under subsection (a)(3) and (a)(7).~~

~~(D) Four (4) years for one (1) member appointed under subsection (a)(4) and (a)(8).~~

~~This subsection expires July 1, 2019.~~

SECTION 29. IC 12-11-2.1-6, AS AMENDED BY P.L.35-2016, SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 6. The bureau may not approve the initial placement of a developmentally disabled individual in an intermediate care facility for individuals with intellectual disabilities serving more than eight (8) individuals or a nursing facility unless:

(1) the individual has medical needs; and

(2) the placement is appropriate to the individual's needs.

~~If the placement is in a nursing facility, that placement must be appropriate to an individual's needs based upon preadmission screening conducted under IC 12-10-12.~~

SECTION 30. IC 12-15-3-4 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 4. For purposes of sections 2 and 3 of this chapter, except for an applicant or a recipient who is determined to be eligible for home and community based services under 42 U.S.C. 1396 et seq., the applicant's or recipient's parent or parents are the parent or parents with whom the applicant or recipient resides.~~

SECTION 31. IC 12-15-11-9, AS ADDED BY P.L.195-2018, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 9. (a) The office shall implement a centralized credentials verification organization and credentialing process that:

(1) uses a common application, as determined by provider type;

(2) issues a single credentialing decision applicable to all Medicaid programs, except as determined by the office;

(3) recredentials and revalidates provider information not less than once every three (3) years;

(4) requires attestation of enrollment and credentialing information every six (6) months; and

(5) is certificated or accredited by the National Committee for Quality Assurance or its successor organization.

(b) A managed care organization or contractor of the office may not require additional credentialing requirements in order to participate in a managed care organization's network. However, a contractor may collect additional information from the provider in order to complete a contract or provider agreement.

(c) A managed care organization or contractor of the office is not required to contract with a provider.

(d) A managed care organization or contractor of the office shall:

(1) send representatives to meetings and participate in the credentialing process as determined by the office; and

(2) not require additional credentialing information from a provider if a non-network credentialed provider is used.

(e) Except when a provider is no longer enrolled with the office, a credential acquired under this chapter is valid until recredentialing is required.

(f) An adverse action under this section is subject to IC 4-21.5.

(g) The office may adopt rules under IC 4-22-2 to implement this section.

~~(h) The office may adopt emergency rules to implement this section.~~

~~However, an emergency rule adopted under this section expires the earlier of:~~

~~(1) one (1) year after the rule was accepted for filing under IC 4-22-2-37.1(e); or~~

~~(2) June 30, 2019.~~

~~This subsection expires July 1, 2019.~~

~~(i) The office shall report the timeliness of determinations made under this section to the legislative council in an electronic format under IC 5-14-6 not later than December 31, 2018. This subsection expires January 1, 2019.~~

SECTION 32. IC 12-23-20-2, AS ADDED BY P.L.213-2019, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. (a) This section does not apply to a health care provider providing services in any of the following:

(1) An adult or juvenile correctional facility operated by the state or a local unit.

(2) A hospital licensed under IC 16-21-2.

(3) A facility that is certified by the division.

(4) An opioid treatment program that has been certified or licensed by the division under IC 12-23-18.

(5) A state institution.

(6) A health facility licensed under IC 16-28.

(7) The Indiana Veterans' Home.

(b) A physician who is providing office based opioid treatment or who is acting in a supervisory capacity to other health care providers that are providing office based opioid treatment must:

(1) have both:

(A) a waiver from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) and meet the qualifying standards required to treat opioid addicted patients in an office based setting; and

(B) a valid federal Drug Enforcement Administration registration number and identification number that specifically authorizes treatment in an office based setting; and

(2) abide by all:

(A) federal; and

(B) state;

laws and regulations concerning the prescribing of medications.

(c) A health care provider that prescribes for a patient in an office based opioid treatment setting shall do and document the following:

(1) Determine the patient's age.

(2) Perform an initial assessment and a physical examination as

appropriate for the patient's condition and the health care provider's scope of practice and obtain a medical history of the patient before treatment begins.

(3) Obtain substance use history and any substance use disorder diagnosis of the patient.

(4) Perform a mental health assessment.

(5) Obtain informed consent for treatment and establish a treatment agreement with the patient that meets the requirements set forth in subsection (d).

(6) If determined appropriate, prescribe office based opioid treatment for the patient and require office visits of the patient in person throughout treatment.

(7) Evaluate the patient's progress and compliance with the treatment agreement and document the patient's progress with the treatment plan.

(8) Perform toxicology screening for the following in accordance with rules adopted under IC 25-22.5-2-7(a)(14) in order to assess medication adherence and to screen for other substances:

(A) Stimulants.

(B) Alcohol.

(C) Opioids, including:

(i) oxycodone;

(ii) methadone; and

(iii) buprenorphine.

(D) Tetrahydrocannabinol.

(E) Benzodiazepines.

(F) Cocaine.

(9) Review INSPECT (as defined in ~~IC 35-48-7-5.2)~~ **IC 25-26-24-7)** concerning controlled substance information for the patient before induction and at least four (4) times per year during treatment.

(10) If the patient is a female and has child bearing potential:

(A) perform a pregnancy test at the onset of treatment;

(B) counsel the patient about the risks of treatment to a fetus, including fetal opioid dependency and neonatal abstinence syndrome; and

(C) provide for or refer the patient to prenatal care, if the pregnancy test performed under clause (A) is positive.

(11) Prescribe an overdose intervention drug and education on how to fill the prescription when buprenorphine is initiated on the patient.

(12) Provide for an ongoing component of psychosocial

supportive therapy, with direction from the health care provider on the amount of the therapy.

(d) The treatment agreement required in subsection (c)(5) must include at least the following:

(1) The goals of the treatment.

(2) The patient's consent to drug monitoring testing.

(3) The prescriber's prescribing policies that include at least the following:

(A) A requirement that the patient take the medication as prescribed.

(B) A prohibition on sharing or selling the medication.

(C) A requirement that the patient inform the prescriber about any:

(i) other controlled substances or other medication prescribed or taken by the patient; and

(ii) alcohol consumed by the patient.

(4) The patient's consent to allow the prescriber to conduct random pill counts for prescriptions.

(5) Reasons that the office based opioid treatment of the patient may be changed or discontinued by the prescriber.

The provider shall maintain a copy of the informed consent for treatment in the patient's medical record.

(e) During the examinations required by subsection (c)(6), the prescriber shall do the following:

(1) Evaluate and document patient progress and compliance with the patient's treatment plan.

(2) Document in the patient's medical record whether the patient is meeting treatment goals.

(3) Discuss with the patient the benefits and risks, if relevant, of ongoing buprenorphine treatment.

(f) If a toxicology screening described in subsection (c)(8) shows an absence of a prescribed drug, the provider must discuss and implement a plan with the patient to optimize medication adherence and schedule an earlier follow up appointment with the patient. The provider shall document the discussion in the patient's medical record.

(g) If a toxicology screening described in subsection (c)(8) shows a presence of an illegal or nonprescribed drug, the provider shall assess the risk of the patient to be successfully treated and document the results in the patient's medical record.

(h) The provider may perform a subsequent confirmation toxicology screening of the patient if the provider considers it medically necessary or to clarify an inconsistent or unexpected toxicology screening result.

SECTION 33. IC 14-37-6-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. Instead of the bond required by ~~sections~~ **section** 1 ~~and 6~~ of this chapter, the department may accept cash or a certificate of deposit.

SECTION 34. IC 16-18-2-9.3 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 9.3. "Advisory council", for purposes of IC 16-19-17, refers to the palliative care and quality of life advisory council established by IC 16-19-17-3.~~

SECTION 35. IC 16-18-2-52, AS AMENDED BY P.L.45-2020, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 52. (a) "Certificate" or "certification", for purposes of IC 16-31, means authorization in written form issued by the Indiana emergency medical services commission to a person to furnish, operate, conduct, maintain, advertise, or otherwise engage in providing emergency medical services as a part of a regular course of doing business, either paid or voluntary.

(b) "Certificate", for purposes of IC 16-42-5.2, has the meaning set forth in ~~IC 16-42-5.2-4.5.~~ **IC 16-42-5.2-3.7.**

SECTION 36. IC 16-18-2-109.1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 109.1. "Emergency medical dispatch agency", for purposes of IC 16-31-3.5, has the meaning set forth in ~~IC 16-35-3.5-1.~~ **IC 16-31-3.5-1.**

SECTION 37. IC 16-18-2-109.3 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 109.3. "Emergency medical dispatcher", for purposes of IC 16-31-3.5, has the meaning set forth in IC 16-35-3.5-1.~~

SECTION 38. IC 16-18-2-109.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 109.5. "Emergency medical dispatching", for purposes of IC 16-31-3.5, has the meaning set forth in ~~IC 16-35-3.5-1.~~ **IC 16-31-3.5-1.**

SECTION 39. IC 16-18-2-196.5 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 196.5. "Kit", for purposes of IC 16-21-8-1.8, has the meaning set forth in IC 16-21-8-1.8(a).~~

SECTION 40. IC 16-18-2-316.5 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 316.5. "Replacement bed", for purposes of IC 16-28-16, has the meaning set forth in IC 16-28-16-3.~~

SECTION 41. IC 16-18-2-331.8, AS ADDED BY P.L.218-2007, SECTION 43, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 331.8. **(a)** "Small employer", for purposes of IC 16-46-13, ~~has the meaning set forth in IC 16-3.1-31.2-3.~~ **means an employer that:**

(1) is actively engaged in business; and

(2) on at least fifty percent (50%) of the working days of the

employer during the preceding calendar year, employed at least two (2) but not more than one hundred (100) eligible employees, the majority of whom work in Indiana.

(b) In determining the number of eligible employees for purposes of subsection (a), employers that are affiliated employers or that are eligible to file a combined tax return for purposes of state taxation are considered one (1) employer.

SECTION 42. IC 16-18-2-375.5, AS ADDED BY P.L.93-2020, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 375.5. "Weighted average negotiated charge", for purposes of IC 16-21-17 and ~~IC 16-21-24.5,~~ **IC 16-24.5,** has the meaning set forth in IC 16-21-17-0.5.

SECTION 43. IC 16-19-5-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 4. (a) The weights and measures fund is established for the purpose of providing funds for training and equipment for weights and measures inspectors and the state metrology laboratory. The state department shall administer the fund.

(b) The fund consists of fees collected under section ~~1(b)(7)~~ **1(b)(6)** of this chapter.

(c) Money in the fund at the end of a state fiscal year does not revert to the state general fund.

SECTION 44. IC 16-21-2-14, AS AMENDED BY P.L.117-2019, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 14. A license to operate a hospital, an ambulatory outpatient surgical center, an abortion clinic, or a birthing center:

(1) expires:

(A) one (1) year after the date of issuance for:

(i) an ambulatory outpatient surgical center;

(ii) an abortion clinic;

(iii) a birthing center; and

(iv) a hospital until April 30, 2020; and

(B) beginning May 1, 2020, two (2) years after the date of issuance for a hospital;

(2) is not assignable or transferable;

(3) is issued only for the premises named in the application;

(4) must be posted in a conspicuous place in the facility; and

(5) may be renewed each year, **or every two (2) years for a hospital,** upon the payment of a renewal fee at the rate adopted by the state department under IC 4-22-2.

SECTION 45. IC 16-31.5-2-8, AS ADDED BY P.L.3-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE

JULY 1, 2021]: Sec. 8. As used in this article, "license" means the authorization by a state for an individual to practice as an EMT, **an** AEMT, **or a** paramedic, or **at** a level between EMT and paramedic.

SECTION 46. IC 16-31.5-4-2, AS ADDED BY P.L.3-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. To exercise the privilege to practice under the terms and provisions of this compact, an individual must:

(1) be at least eighteen (18) years of age;

(2) possess a current unrestricted license in a member state as an EMT, an AEMT, a paramedic, or **at** a state recognized and licensed level with a scope of practice and authority between EMT and paramedic; and

(3) practice under the supervision of a medical director.

SECTION 47. IC 16-31.5-7-1, AS ADDED BY P.L.3-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. Member states shall consider:

(1) a veteran;

(2) an active military service member;

(3) a member of the National Guard and reserves separating from an active duty tour; and

(4) a spouse of an individual described in subdivisions (1) through (3);

who holds a current valid and unrestricted **National Registry of Emergency Medical Technicians** (NREMT) certification at or above the level of the state license being sought as satisfying the minimum training and examination requirements for the licensure.

SECTION 48. IC 16-42-19-13, AS AMENDED BY P.L.119-2011, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 13. A person may not possess or use a legend drug or a precursor unless the person obtains the drug:

(1) on the prescription or drug order of a practitioner;

(2) in accordance with section ~~11(2)~~ **11(a)(2)** or 21 of this chapter; or

(3) in accordance with rules adopted by the board of pharmacy under IC 25-26-23.

SECTION 49. IC 20-20-40-1, AS ADDED BY P.L.122-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. As used in this chapter, "behavioral intervention plan" means a plan that is agreed upon by the case conference committee (as defined in ~~IC 20-35-7-2)~~ **IC 20-35-9-3)** and incorporated into a student's individualized education program (as defined in IC 20-18-2-9) and that describes the following:

(1) The pattern of behavior that impedes the student's learning or the learning of others.

(2) The purpose or function of the behavior as identified in a functional behavioral assessment.

(3) The positive interventions and supports, and other strategies, to:

(A) address the behavior; and

(B) maximize consistency of implementation across people and settings in which the student is involved.

(4) If applicable, the skills that will be taught and monitored in an effort to change a specific pattern of behavior of the student.

The behavioral intervention plan seeks to maximize consistency of implementation across people and settings in which the student is involved.

SECTION 50. IC 20-20-42 IS REPEALED [EFFECTIVE JULY 1, 2021]. (Indiana Out of School Time Learning Advisory Board).

SECTION 51. IC 20-26-7.1-4, AS ADDED BY P.L.270-2019, SECTION 13, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 4. (a) Not later than ten (10) days after passing a resolution or taking other official action to close, no longer use, or no longer occupy a school building that was previously used for classroom instruction, the governing body shall:

(1) notify the department of the official action and the effective date that the school building will be closed, no longer used, or no longer occupied;

(2) make the school building available for inspection by a charter school that notifies the department that it is interested in leasing or purchasing the school building described under section 3 of this chapter; and

(3) make the following information available to a charter school described in subdivision (2):

(A) Estimates of the operating expenses for the school building for the past three (3) years.

(B) Written information regarding the condition of the building, including the age of the roof and the HVAC system, and any known conditions which, in the governing body's opinion, require prompt repair or replacement.

(C) A description of the property as shown on the current tax statement.

(b) Within five (5) days of receiving notice under subsection (a)(1), the department shall provide written notification to each charter school authorizer (excluding school corporation authorizers as defined in

IC 20-24-1-2.5(1)) and statewide organizations representing charter schools in Indiana of the school corporation's resolution or official action described in subsection (a), including the date when the school building will close, no longer be used, or become vacant.

(c) The school corporation shall lease the school building to a charter school for one dollar ($1) per year for as long as the charter school uses the school building for classroom instruction for a term at the charter school's discretion, or sell the school building for one dollar ($1), if the charter school does the following:

(1) Within thirty (30) days of receiving the department's notice under subsection (b), a charter school must submit a preliminary request to purchase or lease the school building.

(2) Subject to subsection (d), within ninety (90) days of receiving the department's notice under subsection (b), a charter school must submit to the school corporation the following information:

(A) The name of the charter school that is interested in leasing or purchasing the vacant or unused school building.

(B) A time frame, which may not exceed two (2) years from the date that the school building is to be closed, no longer used, or no longer occupied, in which the charter school intends to begin providing classroom instruction in the vacant or unused school building.

(C) A resolution, adopted by the board of the charter school stating that the board has determined that, after the charter school has made any necessary repairs or modifications, the school building will be sufficient to meet the charter school's needs and can be operated within the charter school's budget.

(D) This clause applies to a vacant or unused school building with more than two hundred thousand (200,000) gross square feet. In addition to the information provided in clauses (A) through (C), a charter school shall submit the following:

(i) The charter school's projected enrollment when all of the grade levels are added.

(ii) A letter from the charter school's authorizer or prospective authorizer that indicates that the charter school's authorizer or prospective authorizer has reviewed the items described in clauses (B) through (C) and that the projected enrollment of the charter school when all of the grade levels are added or fully implemented will be at least sixty percent (60%) of the maximum annual student enrollment of the school building during the past twenty-five (25) years as validated by records maintained or created by the

department.

(d) If the department does not receive any preliminary requests to purchase or lease a school building within the time frame described in subsection (c)(1) and except as provided in section 7 of this chapter, the department shall send notification to the school corporation that the department has not received any preliminary requests to purchase or lease the school building. Upon receipt of the notification under this subsection, the school corporation may sell or otherwise dispose of the school building in accordance with IC 36-1-11, IC 20-25-4-14, ~~IC 20-26-5-4(7),~~ **IC 20-26-5-4(a)(7),** and section 8 of this chapter.

(e) In the event that two (2) or more charter schools submit a preliminary request to purchase or lease a school building within the time frame described in subsection (c)(1), the department shall send notification to an authorizer described in IC 20-24-1-2.5(3) and each statewide charter school authorizer and statewide organization representing charter schools in Indiana (excluding school corporation authorizers as defined in IC 20-24-1-2.5(1)) and the school corporation that the department has received two (2) or more preliminary requests under this section. An authorizer committee shall be established, with each statewide authorizer that has authorized one (1) or more charter schools appointing a representative, and the committee shall establish the chairperson and procedures for the committee. Within sixty (60) days of receiving notice under this subsection, the committee shall select which charter school may proceed under subsection (c)(2) to purchase or lease the school building or determine if two (2) or more charter schools should co-locate within the school building. The committee shall give priority to a charter school located within one (1) mile of the vacant or unused school building. In the event that the committee determines that two (2) or more charter schools should co-locate in the school building and, if applicable, that the combined enrollment of the charter schools will meet or exceed the requirements in subsection (c)(2)(D), the charter schools have sixty (60) days to submit a memorandum of understanding stating that the charter schools shall be jointly and severally liable for the obligations related to the sale or lease of the school building, and specifying how the charter schools will utilize the school building and share responsibility for operational, maintenance, and renovation expenses. If the charter schools are unable to agree, the charter schools shall be deemed to have revoked their prior request regarding the lease or sale of the school building.

(f) A school corporation shall lease the school building for one dollar ($1) per year for as long as the charter school uses the school

building for classroom instruction for any combination of kindergarten through grade 12 for a term at the charter school's discretion, or sell the school building to the charter school for one dollar ($1), if the charter school has met the requirements set forth in subsection (c) and uses the vacant or unused school building to provide classroom instruction to students in any combination of kindergarten through grade 12. If a charter school has not met the requirements under subsection (c), the school corporation may, subject to section 7 of this chapter, sell or otherwise dispose of the school building in accordance with IC 36-1-11, IC 20-25-4-14, ~~IC 20-26-5-4(7),~~ **IC 20-26-5-4(a)(7),** and section 8 of this chapter.

SECTION 52. IC 20-26-11-31, AS AMENDED BY P.L.92-2020, SECTION 30, AND AS AMENDED BY P.L.155-2020, SECTION 8, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 31. (a) This section applies to a school corporation *and to a charter school* that enrolls a student who has legal settlement in another school corporation for the purpose of the student receiving services from ~~*an*~~ *a state* accredited nonpublic alternative high school described in ~~*IC 20-19-2-10(e).*~~ *IC 20-31-4.1-2(c).*

(b) A school corporation *or a charter school* is entitled to receive state tuition support for a student described in subsection (a) in an amount equal to:

(1) the amount received by the school corporation *or charter school* in which the student is enrolled for ADM purposes; or

(2) the amount received by the school corporation in which the student has legal settlement;

whichever is greater.

SECTION 53. IC 20-26-13-10, AS AMENDED BY P.L.86-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) Except as provided in section 11 of this chapter, the four (4) year graduation rate for a cohort in a high school is the percentage determined under STEP FIVE of the following formula:

STEP ONE: Determine the grade 9 enrollment at the beginning of the reporting year three (3) years before the reporting year for which the graduation rate is being determined.

STEP TWO: Add:

(A) the number determined under STEP ONE; and

(B) the number of students who:

(i) have enrolled in the high school after the date on which the number determined under STEP ONE was determined;

and

(ii) have the same expected graduation year as the cohort.

STEP THREE: Subtract from the sum determined under STEP TWO the number of students who have left the cohort for any of the following reasons:

(A) Transfer to another public or nonpublic school.

(B) Except as provided in IC 20-33-2-28.6 and subsection (b), removal by the student's parents under IC 20-33-2-28 to provide instruction equivalent to that given in the public schools.

(C) Withdrawal because of a long term medical condition or death.

(D) Detention by a law enforcement agency or the department of correction.

(E) Placement by a court order or the department of child services.

(F) Enrollment in a virtual school.

(G) Leaving school, if the student attended school in Indiana for less than one (1) school year and the location of the student cannot be determined.

(H) Leaving school, if the location of the student cannot be determined and the student has been reported to the Indiana clearinghouse for information on missing children and missing endangered adults.

(I) Withdrawing from school before graduation, if the student is a high ability student (as defined in IC 20-36-1-3) who is a full-time student at an accredited institution of higher education during the semester in which the cohort graduates.

(J) Withdrawing from school before graduation pursuant to providing notice of withdrawal under section 17 of this chapter.

(K) Participating in the high school equivalency pilot program under IC 20-30-8.5, unless the student fails to successfully complete the high school equivalency pilot program in the two (2) year period. **This clause expires June 30, 2024.**

STEP FOUR: Determine the total number of students determined under STEP TWO who have graduated during the current reporting year or a previous reporting year.

STEP FIVE: Divide:

(A) the number determined under STEP FOUR; by

(B) the remainder determined under STEP THREE.

(b) This subsection applies to a high school in which:

(1) for a:

(A) cohort of one hundred (100) students or less, at least ten percent (10%) of the students left a particular cohort for a reason described in subsection (a) STEP THREE clause (B); or

(B) cohort of more than one hundred (100) students, at least five percent (5%) of the students left a particular cohort for a reason described in subsection (a) STEP THREE clause (B); and

(2) the students described in subdivision (1)(A) or (1)(B) are not on track to graduate with their cohort.

A high school must submit a request to the state board in a manner prescribed by the state board requesting that the students described in this subsection be included in the subsection (a) STEP THREE calculation. The state board shall review the request and may grant or deny the request. The state board shall deny the request unless the high school demonstrates good cause to justify that the students described in this subsection should be included in the subsection (a) STEP THREE calculation. If the state board denies the request the high school may not subtract the students described in this subsection under subsection (a) STEP THREE.

SECTION 54. IC 20-28-5.5-1, AS ADDED BY P.L.92-2020, SECTION 53, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. (a) The state board shall determine the timing, frequency, whether training requirements can be combined or merged, and the method of training, including whether the training should be required for purposes of obtaining or renewing a license under IC 20-28-5, or, in consultation with teacher preparation programs (as defined in IC 20-28-3-1(b)), as part of the completion requirements for a teacher preparation program for training required under the following sections:

IC 20-26-5-34.2.
IC 20-28-3-4.5.
IC 20-28-3-6.
IC 20-28-3-7.
IC 20-34-7-6.
IC 20-34-7-7.

However, nothing in this subsection shall be construed to authorize the state board to suspend or otherwise eliminate training requirements described in this subsection.

(b) In addition to the training described in subsection (a), the department shall, in a manner prescribed by the state board:

(1) ensure a teacher has training in:

(A) cardiopulmonary resuscitation that includes a test demonstration on a mannequin;

(B) removing a foreign body causing an obstruction in an airway;

(C) the Heimlich maneuver; and

(D) the use of an automated external defibrillator;

(2) ensure a teacher holds a valid certification in each of the procedures described in subdivision (1) issued by:

(A) the American Red Cross;

(B) the American Heart Association; or

(C) a comparable organization or institution approved by the state board; or

(3) determine if a teacher has physical limitations that make it impracticable to complete a course or certification described in subdivision (1) or (2).

The state board shall determine the timing, frequency, whether training requirements can be combined or merged, and the method of training or certification, including whether the training or certification should be required for purposes of obtaining or renewing a license under IC 20-28-5, or, in consultation with teacher preparation programs (as defined in IC 20-28-3-1(b)), as part of the completion requirements for a teacher preparation program. However, the frequency of the training may not be more frequent and the method of training may not be more stringent than required in IC 20-28-5-3(c) through IC 20-28-5-3(e), as in effect on January 1, 2020. Nothing in this subsection shall be construed to authorize the state board to suspend or otherwise eliminate training requirements described in this subsection.

(c) The state board may recommend to the general assembly, in a report in an electronic format under IC 5-14-6, to eliminate training requirements described in subsection (a) or (b).

(d) In determining the training requirements for a school corporation, charter school, or **state** accredited nonpublic school for training required under:

(1) IC 20-26-5-34.2;

(2) IC 20-28-3-4.5;

(3) IC 20-28-3-6; or

(4) IC 20-28-3-7;

the state board may consider whether a particular teacher received the training described in this subsection as part of the teacher's licensing requirements or at a teacher preparation program when determining whether the particular teacher is required to receive the training by the

school corporation, charter school, or **state** accredited nonpublic school.

SECTION 55. IC 20-30-5-5.7, AS AMENDED BY P.L.92-2020, SECTION 55, AND AS AMENDED BY P.L.76-2020, SECTION 1, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 5.7. (a) Not later than December 15, ~~*2018;*~~ *2020,* and each December 15 thereafter, each public school, including a charter school, and *state* accredited nonpublic school shall provide age appropriate: ~~*and*~~

(1) research and evidence based; *or*

(2) research or evidence based;

instruction on child abuse and child sexual abuse to students in kindergarten through grade 12.

(b) The department, in consultation with school safety specialists, ~~*and*~~ school counselors, *school social workers, or school psychologists,* shall identify outlines or materials for the instruction described in subsection (a) and incorporate the instruction in kindergarten through grade 12.

(c) Any outlines and materials identified under subsection (b) must be demonstrated to be effective and promising.

~~*(c)*~~ *(d)* Instruction on child abuse and child sexual abuse may be delivered by a school safety specialist, school counselor, or any other person with training and expertise in the area of child abuse and child sexual abuse.

SECTION 56. IC 20-30-5-7, AS AMENDED BY P.L.92-2020, SECTION 56, AND AS AMENDED BY P.L.86-2020, SECTION 6, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 7. (a) Each school corporation shall include in the school corporation's curriculum the following studies:

(1) Language arts, including:
  (A) English;
  (B) grammar;
  (C) composition;
  (D) speech; and
  (E) second languages.

(2) Mathematics.

(3) Social studies and citizenship, including the:
  (A) constitutions;
  (B) governmental systems; and
  (C) histories;

of Indiana and the United States, including an enhanced study of the Holocaust in each high school United States history course.

As part of the United States government credit awarded for the general, Core 40, Core 40 with academic honors, and Core 40 with technical honors designation, each high school shall administer the naturalization examination provided by the United States Citizenship and Immigration Services.

(4) Sciences, including, after June 30, 2021, computer science.

(5) Fine arts, including music and art.

(6) Health education, physical fitness, safety, and the effects of alcohol, tobacco, drugs, and other substances on the human body.

(7) Additional studies selected by each governing body, subject to revision by the state board.

(b) Each:

(1) school corporation;

(2) charter school; and

(3) *state* accredited nonpublic school;

shall offer the study of ethnic and racial groups as a one (1) semester elective course in its high school curriculum at least once every school year.

(c) The course described in subsection (b) may be offered by the school corporation, charter school, or *state* accredited nonpublic school through a course access program administered by the department.

(d) Not later than November 1, 2022, and not later than November 1 each year thereafter, the department shall report to the general assembly in an electronic format under IC 5-14-6 the following:

(1) The number of students who took the naturalization examination described in subsection (a)(3).

(2) The number of students who passed the naturalization examination described in subsection (a)(3) by a score of not less than sixty percent (60%) on their first attempt.

(3) The pass rate of the naturalization examination regarding the students who passed as described in subdivision (2).

(e) Not more than thirty (30) days after the department reports to the general assembly the information under subsection (d), the department shall post the pass rate under subsection (d)(3) on the department's Internet web site.

SECTION 57. IC 20-30-8.5-4, AS ADDED BY P.L.86-2020, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 4. As used in this chapter, "provider" ~~is~~ **means** a current grantee receiving WIOA Title II money from the department of workforce development and that provides academic instruction and education services at the elementary or high school level that:

(1) include adult education, literacy activities, workplace

activities, English language acquisition activities, integrated English literacy and civics education, workforce preparation activities, or integrated education and training;

(2) transition to postsecondary education and training; and

(3) provide an ability to obtain employment.

SECTION 58. IC 20-30-8.5-8, AS ADDED BY P.L.86-2020, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 8. In addition to successfully achieving ~~their~~ **the eligible student's** high school equivalency, an eligible student shall:

(1) demonstrate employability skills through a:

(A) project based learning experience;

(B) service based learning experience; or

(C) work based learning experience; and

(2) complete one (1) of the following:

(A) A certification class approved by the department of workforce development.

(B) Indiana specific college ready benchmarks set by the commission for higher education that meet or exceed college ready benchmarks set by the college board and ACT.

(C) Completion of the ASVAB and enlistment and service in one (1) of the branches of the armed forces of the United States.

(D) Entry into an apprenticeship program recognized by the state that includes a post secondary credential upon completion.

SECTION 59. IC 20-30-8.5-12, AS ADDED BY P.L.86-2020, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 12. Not later than July 1, 2021, and not later than July 1 of each year thereafter, participating school corporations shall submit a report to the general assembly in an electronic format under IC 5-14-6 concerning the program that includes the following:

(1) The number of students eligible for the program.

(2) The number of eligible students who participated in the program.

(3) The number of credits upon entry to the program.

(4) The number of eligible students who successfully achieved their high school equivalency through the program.

(5) A list of credentials earned upon completion of the program.

(6) ~~A report~~ **Information** concerning:

(A) eligible ~~students'~~ **student:**

(i) job placement outcomes; and

(ii) matriculation into higher education; and

(B) any other information concerning outcomes;

as of one (1) year and two (2) years after ~~an eligible student has successfully completed~~ **successful completion of** the program.

(7) Recommendations on improvements to the program.

(8) An estimated cost to each school corporation for the program.

(9) To the extent possible, the use of the funding received by the school corporation for an eligible student participating in the program during the previous school year and metrics of student achievement and demographics, including:

(A) the amount of funding received that was used for each course or program of instruction included in the program;

(B) the amount of funding received that was used for transportation costs for students who participate in the program;

(C) the amount of funding received that was used for any other purposes relating to the cost of education for an eligible student who participated in the program; and

(D) metrics of eligible student achievement and demographic information for those eligible students who participated in the program during the previous school year, including a comparison to the metrics of student achievement and demographic information for those students who were not participants in the program.

(10) Any other relevant consideration.

SECTION 60. IC 20-32-4-2, AS AMENDED BY P.L.192-2018, SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. This ~~subsection~~ **section** expires July 1, 2022. A student who does not meet the academic standards tested in the graduation examination shall be given the opportunity to be tested during each semester of each grade following the grade in which the student is initially tested until the student achieves a passing score or, after June 30, 2018, meets a graduation pathway requirement.

SECTION 61. IC 20-32-5.1-18.8, AS ADDED BY P.L.82-2020, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 18.8. (a) As used in this section, "school" means the following:

(1) A school maintained by a school corporation.

(2) A charter school.

(3) ~~An~~ **A state** accredited nonpublic school.

(b) The department, in consultation with The Arc of Indiana and the Indiana Council of Administrators of Special Education (ICASE), shall develop a notice for a parent of a student who:

(1) is enrolled in grade 3, 4, or 5; and

(2) has an accommodation that:

(A) is provided as part of the student's:

(i) individualized education program;

(ii) service plan developed under 511 IAC 7-34;

(iii) choice special education plan developed under 511 IAC 7-49; or

(iv) plan developed under Section 504 of the federal Rehabilitation Act of 1973, 29 U.S.C. 794; and

(B) the student is not allowed to use on all or part of the statewide assessment.

(c) The notice developed under subsection (b) must inform the parent of a student described in subsection (b) that the student is not allowed to use the accommodation described in subsection (b)(2) on all or part of the statewide assessment.

(d) The department shall distribute a copy of the notice to each school.

(e) Not later than February 1, 2021, and not later than February 1, 2022, each school shall do the following:

(1) Provide the notice developed under subsection (b) to a parent of a student described in subsection (b) at the annual review of the student's:

(A) individualized education program;

(B) service plan developed under 511 IAC 7-34;

(C) choice special education plan developed under 511 IAC 7-49; or

(D) plan developed under Section 504 of the federal Rehabilitation Act of 1973, 29 U.S.C. 794.

If a parent does not attend the annual review, the school shall provide a copy of the notice to the parent by certified mail or personal delivery.

(2) Discuss and determine, at the annual review described in subdivision (1) in which a parent of the student participates, whether the student may be eligible to opt out of any applicable section of the statewide assessment.

(f) This section expires July 1, 2022.

SECTION 62. IC 20-33-2-10, AS AMENDED BY P.L.92-2020, SECTION 75, AND AS AMENDED BY P.L.155-2020, SECTION 17, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) Each public school shall and each private school may require a student who initially enrolls in the school to provide:

(1) the name and address of the school the student last attended; and

(2) a certified copy of the student's birth certificate or other reliable proof of the student's date of birth.

(b) Each public school, charter school, and nonpublic school with at least one (1) employee shall provide upon request of another school a copy of a particular student's disciplinary records that are relevant to the safety of students, if the particular student currently attends the requesting school and is currently enrolled in the requesting school.

~~(b)~~ *(c)* Not more than fourteen (14) days after initial enrollment in a school, the school shall request the student's records from the school the student last attended.

~~(c)~~ *(d)* If the document described in subsection (a)(2):

(1) is not provided to the school not more than thirty (30) days after the student's enrollment; or

(2) appears to be inaccurate or fraudulent;

the school shall notify the Indiana clearinghouse for information on missing children and missing endangered adults established under IC 10-13-5-5 and determine if the student has been reported missing.

~~(d)~~ *(e)* A school in Indiana receiving a request for records shall send the records promptly to the requesting school. However, if a request is received for records to which a notice has been attached under IC 31-36-1-5 (or IC 31-6-13-6 before its repeal), the school:

(1) shall immediately notify the Indiana clearinghouse for information on missing children and missing endangered adults;

(2) may not send the school records without the authorization of the clearinghouse; and

(3) may not inform the requesting school that a notice under IC 31-36-1-5 (or IC 31-6-13-6 before its repeal) has been attached to the records.

~~(e)~~ *(f)* Notwithstanding subsection ~~(d),~~ *(e),* if a parent of a child who has enrolled in ~~an~~ *a state* accredited nonpublic school is in breach of a contract that conditions release of student records on the payment of outstanding tuition and other fees, the *state* accredited nonpublic school shall provide a requesting school sufficient verbal information to permit the requesting school to make an appropriate placement decision regarding the child. *However, the* **state** *accredited nonpublic school must provide the information described in subsection (b) to the requesting school.*

SECTION 63. IC 22-3-3-10, AS AMENDED BY P.L.139-2020, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) With respect to injuries in the schedule set

forth in subsection (d) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not to exceed fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars ($125) average weekly wages, for the period stated for the injury.

(b) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the injury.

(c) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183) average weekly wages, for the period stated for the injury.

(d) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the injury.

(1) Amputation: For the loss by separation of the thumb, sixty (60) weeks, of the index finger forty (40) weeks, of the second finger thirty-five (35) weeks, of the third or ring finger thirty (30) weeks, of the fourth or little finger twenty (20) weeks, of the hand by separation below the elbow joint two hundred (200) weeks, or the arm above the elbow two hundred fifty (250) weeks, of the big toe sixty (60) weeks, of the second toe thirty (30) weeks, of the third toe twenty (20) weeks, of the fourth toe fifteen (15) weeks, of the fifth or little toe ten (10) weeks, for loss occurring on and after April 1, 1959, by separation of the foot below the knee joint, one hundred seventy-five (175) weeks and of the leg above the knee joint two hundred twenty-five (225) weeks. The loss of more than one (1) phalange of a thumb or toes shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire

finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) the period for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger, shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the period for the loss of the entire finger.

(2) For the loss by separation of both hands or both feet or the total sight of both eyes, or any two (2) such losses in the same accident, five hundred (500) weeks.

(3) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, one hundred seventy-five (175) weeks.

(4) For the permanent and complete loss of hearing in one (1) ear, seventy-five (75) weeks, and in both ears, two hundred (200) weeks.

(5) For the loss of one (1) testicle, fifty (50) weeks; for the loss of both testicles, one hundred fifty (150) weeks.

(e) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not exceeding fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages not to exceed one hundred twenty-five dollars ($125) average weekly wages for the period stated for the injury.

(f) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the injury.

(g) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183)

average weekly wages, for the period stated for the injury.

(h) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the injury.

(1) Loss of use: The total permanent loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid for the same period as for the loss thereof by separation.

(2) Partial loss of use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange, compensation shall be paid for the proportionate loss of the use of such arm, hand, thumb, finger, leg, foot, toe, or phalange.

(3) For injuries resulting in total permanent disability, five hundred (500) weeks.

(4) For any permanent reduction of the sight of an eye less than a total loss as specified in subsection (d)(3), compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then in such event compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses, plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).

(5) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection (d)(4), compensation shall be paid for a period proportional to the degree of such permanent reduction.

(6) In all other cases of permanent partial impairment, compensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation board, not exceeding five hundred (500) weeks.

(7) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation

shall be payable under this subdivision where compensation is payable elsewhere in this section.

(i) With respect to injuries in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the injury, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52) weeks immediately preceding the week in which the injury occurred.

(1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; by separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.

(2) Amputations: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, and for the loss by separation of any of the body parts described in subdivision (3), (5), or ~~(8),~~ **(7),** on or after July 1, 1999, the dollar values per degree applying on the date of the injury as described in subsection (j) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by separation.

(3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1)

phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.

(4) For the loss by separation of both hands or both feet or the total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent impairment.

(5) For the permanent and complete loss of vision by enucleation, thirty-five (35) degrees of permanent impairment.

(6) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.

(7) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.

(8) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.

(9) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange.

(10) For injuries resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.

(11) Visual impairments shall be based on the Functional Vision Score (FVS) assessing the visual acuity and visual field to evaluate any reduction in ability to perform vision-related Activities of Daily Living (ADL). Unless such loss is otherwise specified in subdivision (5), visual impairments shall be paid as a whole person rating.

(12) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection (h)(5), compensation shall be paid in an amount proportionate to the

degree of a permanent reduction.

(13) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.

(14) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(j) Compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the injury determined under subsection (i) and the following:

(1) With respect to injuries occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars ($500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars ($900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars ($1,500) per degree.

(2) With respect to injuries occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars ($500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars ($800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(3) With respect to injuries occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars ($500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars ($700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for

each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(4) With respect to injuries occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(5) With respect to injuries occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(6) With respect to injuries occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine hundred dollars ($900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars ($2,000) per degree.

(7) With respect to injuries occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars ($2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars ($2,500) per degree.

(8) With respect to injuries occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars

($1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars ($1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars ($2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars ($3,000) per degree.

(9) With respect to injuries occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred forty dollars ($1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars ($1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars ($2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars ($3,150) per degree.

(10) With respect to injuries occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars ($1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars ($1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars ($2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars ($3,200) per degree.

(11) With respect to injuries occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars ($1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred eighty-five dollars ($1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars ($2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars ($3,300) per degree.

(12) With respect to injuries occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred

dollars ($1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars ($2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars ($3,500) per degree.

(13) With respect to injuries occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent impairment from one (1) to ten (10), one thousand five hundred seventeen dollars ($1,517) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars ($1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars ($2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars ($3,687) per degree.

(14) With respect to injuries occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars ($1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars ($1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars ($3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars ($3,873) per degree.

(15) With respect to injuries occurring on and after July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars ($1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars ($1,952) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars ($3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars ($4,060) per degree.

(k) The average weekly wages used in the determination of compensation for permanent partial impairment under subsections (i) and (j) shall not exceed the following:

(1) With respect to injuries occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars ($492).

(2) With respect to injuries occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars ($540).

(3) With respect to injuries occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars ($591).
(4) With respect to injuries occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars ($642).
(5) With respect to injuries occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars ($672).
(6) With respect to injuries occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars ($702).
(7) With respect to injuries occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars ($732).
(8) With respect to injuries occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars ($762).
(9) With respect to injuries occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars ($822).
(10) With respect to injuries occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars ($882).
(11) With respect to injuries occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars ($900).
(12) With respect to injuries occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars ($930).
(13) With respect to injuries occurring on or after July 1, 2008, and before July 1, 2009, nine hundred fifty-four dollars ($954).
(14) With respect to injuries occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars ($975).
(15) With respect to injuries occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars ($1,040).
(16) With respect to injuries occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars ($1,105).
(17) With respect to injuries occurring on or after July 1, 2016, one thousand one hundred seventy dollars ($1,170).

SECTION 64. IC 22-3-7-16, AS AMENDED BY P.L.139-2020, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 16. (a) Compensation shall be allowed on account of disablement from occupational disease resulting in only temporary total disability to work or temporary partial disability to work beginning with the eighth day of such disability except for the medical benefits provided for in section 17 of this chapter. Compensation shall be allowed for the first seven (7) calendar days only as provided in this section. The first weekly installment of compensation for temporary disability is due fourteen (14) days after the disability begins. Not later than fourteen (14) days from the date that the first installment of

compensation is due, the employer or the employer's insurance carrier shall file a report of payment of compensation with the worker's compensation board electronically and tender to the employee or to the employee's dependents, with all compensation due, a properly prepared compensation agreement in a form prescribed by the board. The presentation to the employee or to the employee's dependents of the check, draft, or electronic payment from the employer or the employer's insurance carrier for the proper amount, drawn upon a bank in which money is on deposit to pay the same on demand, shall be sufficient tender of the compensation.

(b) Whenever an employer or the employer's insurance carrier denies or is not able to determine liability to pay compensation or benefits, the employer or the employer's insurance carrier shall notify the worker's compensation board and the employee in writing on a form prescribed by the worker's compensation board not later than thirty (30) days after the employer's knowledge of the claimed disablement. If a determination of liability cannot be made within thirty (30) days, the worker's compensation board may approve an additional thirty (30) days upon a written request of the employer or the employer's insurance carrier that sets forth the reasons that the determination could not be made within thirty (30) days and states the facts or circumstances that are necessary to determine liability within the additional thirty (30) days. More than thirty (30) days of additional time may be approved by the worker's compensation board upon the filing of a petition by the employer or the employer's insurance carrier that sets forth:

(1) the extraordinary circumstances that have precluded a determination of liability within the initial sixty (60) days;

(2) the status of the investigation on the date the petition is filed;

(3) the facts or circumstances that are necessary to make a determination; and

(4) a timetable for the completion of the remaining investigation.

An employer who fails to comply with this section is subject to a civil penalty under IC 22-3-4-15.

(c) Once begun, temporary total disability benefits may not be terminated by the employer unless:

(1) the employee has returned to work;

(2) the employee has died;

(3) the employee has refused to undergo a medical examination under section 20 of this chapter;

(4) the employee has received five hundred (500) weeks of temporary total disability benefits or has been paid the maximum compensation allowable under section 19 of this chapter; or

(5) the employee is unable or unavailable to work for reasons unrelated to the compensable disease.

In each instance, the employer must provide written notice to the injured worker on a form approved by the board. In all other cases the employer must notify the employee in writing of the employer's intent to terminate the payment of temporary total disability benefits, and of the availability of employment, if any, on a form approved by the board. In all instances, the employer must file an electronic notice of the termination with the board.

(d) If the employee disagrees with the termination or proposed termination, the employee must give written notice of disagreement to the board and the employer within seven (7) days after receipt of the notice of intent to terminate benefits. If the board and employer do not receive a notice of disagreement under this section, the employee's temporary total disability benefits shall be terminated. Upon receipt of the notice of disagreement, the board shall immediately contact the parties, which may be by telephone or other means and attempt to resolve the disagreement. If the board is unable to resolve the disagreement within ten (10) days of receipt of the notice of disagreement, the board shall immediately arrange for an evaluation of the employee by an independent medical examiner. The independent medical examiner shall be selected by mutual agreement of the parties or, if the parties are unable to agree, appointed by the board under IC 22-3-4-11. If the independent medical examiner determines that the employee is no longer temporarily disabled or is still temporarily disabled but can return to employment that the employer has made available to the employee, or if the employee fails or refuses to appear for examination by the independent medical examiner, temporary total disability benefits may be terminated. If either party disagrees with the opinion of the independent medical examiner, the party shall apply to the board for a hearing under section 27 of this chapter.

(e) An employer is not required to continue the payment of temporary total disability benefits for more than fourteen (14) days after the employer's proposed termination date unless the independent medical examiner determines that the employee is temporarily disabled and unable to return to any employment that the employer has made available to the employee.

(f) If it is determined that as a result of this section temporary total disability benefits were overpaid, the overpayment shall be deducted from any benefits due the employee under this section and, if there are no benefits due the employee or the benefits due the employee do not equal the amount of the overpayment, the employee shall be

responsible for paying any overpayment which cannot be deducted from benefits due the employee.

(g) For disablements occurring on and after July 1, 1976, from occupational disease resulting in temporary total disability for any work there shall be paid to the disabled employee during the temporary total disability weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages, as defined in section 19 of this chapter, for a period not to exceed five hundred (500) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days.

(h) For disablements occurring on and after July 1, 1974, from occupational disease resulting in temporary partial disability for work there shall be paid to the disabled employee during such disability a weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the difference between the employee's average weekly wages, as defined in section 19 of this chapter, and the weekly wages at which the employee is actually employed after the disablement, for a period not to exceed three hundred (300) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days. In case of partial disability after the period of temporary total disability, the latter period shall be included as a part of the maximum period allowed for partial disability.

(i) For disabilities occurring on and after July 1, 1979, and before July 1, 1988, from occupational disease in the schedule set forth in subsection (l), the employee shall receive in addition to disability benefits, not exceeding fifty-two (52) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars ($125) average weekly wages, for the period stated for the disabilities.

(j) For disabilities occurring on and after July 1, 1988, and before July 1, 1989, from occupational disease in the schedule set forth in subsection (l), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the disabilities.

(k) For disabilities occurring on and after July 1, 1989, and before July 1, 1990, from occupational disease in the schedule set forth in

subsection (l), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183) average weekly wages, for the period stated for the disabilities.

(l) For disabilities occurring on and after July 1, 1990, and before July 1, 1991, from occupational disease in the following schedule, the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the disabilities.

(1) Amputations: For the loss by separation, of the thumb, sixty (60) weeks; of the index finger, forty (40) weeks; of the second finger, thirty-five (35) weeks; of the third or ring finger, thirty (30) weeks; of the fourth or little finger, twenty (20) weeks; of the hand by separation below the elbow, two hundred (200) weeks; of the arm above the elbow joint, two hundred fifty (250) weeks; of the big toe, sixty (60) weeks; of the second toe, thirty (30) weeks; of the third toe, twenty (20) weeks; of the fourth toe, fifteen (15) weeks; of the fifth or little toe, ten (10) weeks; of the foot below the knee joint, one hundred fifty (150) weeks; and of the leg above the knee joint, two hundred (200) weeks. The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than two (2) phalanges of a finger shall be considered as the loss of one-half (1/2) the finger and compensation shall be paid for one-half (1/2) of the period for the loss of the entire finger.

(2) Loss of Use: The total permanent loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange and the compensation shall be paid for the same period as for the loss thereof by separation.

(3) Partial Loss of Use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange,

compensation shall be paid for the proportionate loss of the use of such arm, hand, thumb, finger, leg, foot, toe, or phalange.

(4) For disablements for occupational disease resulting in total permanent disability, five hundred (500) weeks.

(5) For the loss of both hands, or both feet, or the total sight of both eyes, or any two (2) of such losses resulting from the same disablement by occupational disease, five hundred (500) weeks.

(6) For the permanent and complete loss of vision by enucleation of an eye, or its ~~eduction~~ **reduction** to one-tenth (1/10) of normal vision with glasses, one hundred fifty (150) weeks, and for any other permanent reduction of the sight of an eye, compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).

(7) For the permanent and complete loss of hearing, two hundred (200) weeks.

(8) In all other cases of permanent partial impairment, compensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation board, not exceeding five hundred (500) weeks.

(9) In all cases of permanent disfigurement, which may impair the future usefulness or opportunities of the employee, compensation in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation shall be payable under this paragraph where compensation shall be payable under subdivisions (1) through (8). Where compensation for temporary total disability has been paid, this amount of compensation shall be deducted from any compensation due for permanent disfigurement.

(m) With respect to disablements in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the disablement, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52)

weeks immediately preceding the week in which the disablement occurred:

(1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; of separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.

(2) Amputations occurring on or after July 1, 1997: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, the dollar values per degree applying on the date of the injury as described in subsection (n) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by separation.

(3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.

(4) For the loss by separation of both hands or both feet or the

total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent impairment.
(5) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, thirty-five (35) degrees of permanent impairment.
(6) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.
(7) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.
(8) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.
(9) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange.
(10) For disablements resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.
(11) Visual impairments shall be based on the Functional Vision Score (FVS) assessing the visual acuity and visual field to evaluate any reduction in ability to perform vision-related Activities of Daily Living (ADL). Unless such loss is otherwise specified in subdivision (5), visual impairments shall be paid as a whole person rating.
(12) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subdivision (6), compensation shall be paid in an amount proportionate to the degree of a permanent reduction.
(13) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.
(14) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee,

compensation, in the discretion of the worker's compensation board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(n) With respect to disablements occurring on and after July 1, 1991, compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the disablement determined under subsection (m) and the following:

(1) With respect to disablements occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars ($500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars ($900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars ($1,500) per degree.

(2) With respect to disablements occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars ($500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars ($800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(3) With respect to disablements occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars ($500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars ($700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(4) With respect to disablements occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per

degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(5) With respect to disablements occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(6) With respect to disablements occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine hundred dollars ($900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars ($2,000) per degree.

(7) With respect to disablements occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars ($2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars ($2,500) per degree.

(8) With respect to disablements occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars ($1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars ($2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars ($3,000) per degree.

(9) With respect to disablements occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred forty dollars ($1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars ($1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars ($2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars ($3,150) per degree.

(10) With respect to disablements occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars ($1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars ($1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars ($2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars ($3,200) per degree.

(11) With respect to disablements occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars ($1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred eighty-five dollars ($1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars ($2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars ($3,300) per degree.

(12) With respect to disablements occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars ($2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars ($3,500) per degree.

(13) With respect to disablements occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent

impairment from one (1) to ten (10), one thousand five hundred seventeen dollars ($1,517) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars ($1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars ($2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars ($3,687) per degree.

(14) With respect to disablements occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars ($1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars ($1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars ($3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars ($3,873) per degree.

(15) With respect to disablements occurring on and after July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars ($1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars ($1,952) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars ($3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars ($4,060) per degree.

(o) The average weekly wages used in the determination of compensation for permanent partial impairment under subsections (m) and (n) shall not exceed the following:

(1) With respect to disablements occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars ($492).

(2) With respect to disablements occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars ($540).

(3) With respect to disablements occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars ($591).

(4) With respect to disablements occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars

($642).

(5) With respect to disablements occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars ($672).

(6) With respect to disablements occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars ($702).

(7) With respect to disablements occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars ($732).

(8) With respect to disablements occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars ($762).

(9) With respect to disablements occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars ($822).

(10) With respect to disablements occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars ($882).

(11) With respect to disablements occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars ($900).

(12) With respect to disablements occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars ($930).

(13) With respect to disablements occurring on or after July 1, 2008, and before July 1, 2009, nine hundred fifty-four dollars ($954).

(14) With respect to disablements occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars ($975).

(15) With respect to disablements occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars ($1,040).

(16) With respect to disablements occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars ($1,105).

(17) With respect to disablements occurring on or after July 1, 2016, one thousand one hundred seventy dollars ($1,170).

(p) If any employee, only partially disabled, refuses employment suitable to the employee's capacity procured for the employee, the employee shall not be entitled to any compensation at any time during the continuance of such refusal unless, in the opinion of the worker's compensation board, such refusal was justifiable. The employee must be served with a notice setting forth the consequences of the refusal

under this subsection. The notice must be in a form prescribed by the worker's compensation board.

(q) If an employee has sustained a permanent impairment or disability from an accidental injury other than an occupational disease in another employment than that in which the employee suffered a subsequent disability from an occupational disease, such as herein specified, the employee shall be entitled to compensation for the subsequent disability in the same amount as if the previous impairment or disability had not occurred. However, if the permanent impairment or disability resulting from an occupational disease for which compensation is claimed results only in the aggravation or increase of a previously sustained permanent impairment from an occupational disease or physical condition regardless of the source or cause of such previously sustained impairment from an occupational disease or physical condition, the board shall determine the extent of the previously sustained permanent impairment from an occupational disease or physical condition as well as the extent of the aggravation or increase resulting from the subsequent permanent impairment or disability, and shall award compensation only for that part of said occupational disease or physical condition resulting from the subsequent permanent impairment. An amputation of any part of the body or loss of any or all of the vision of one (1) or both eyes caused by an occupational disease shall be considered as a permanent impairment or physical condition.

(r) If an employee suffers a disablement from an occupational disease for which compensation is payable while the employee is still receiving or entitled to compensation for a previous injury by accident or disability by occupational disease in the same employment, the employee shall not at the same time be entitled to compensation for both, unless it be for a permanent injury, such as specified in subsection (m)(1), (m)(4), (m)(5), (m)(8), or (m)(9), but the employee shall be entitled to compensation for that disability and from the time of that disability which will cover the longest period and the largest amount payable under this chapter.

(s) If an employee receives a permanent disability from an occupational disease such as specified in subsection (m)(1), (m)(4), (m)(5), (m)(8), or (m)(9) after having sustained another such permanent disability in the same employment the employee shall be entitled to compensation for both such disabilities, but the total compensation shall be paid by extending the period and not by increasing the amount of weekly compensation and, when such previous and subsequent permanent disabilities, in combination result

in total permanent disability or permanent total impairment, compensation shall be payable for such permanent total disability or impairment, but payments made for the previous disability or impairment shall be deducted from the total payment of compensation due.

(t) When an employee has been awarded or is entitled to an award of compensation for a definite period from an occupational disease wherein disablement occurs on and after April 1, 1963, and such employee dies from other causes than such occupational disease, payment of the unpaid balance of such compensation not exceeding three hundred fifty (350) weeks shall be paid to the employee's dependents of the second and third class as defined in sections 11 through 14 of this chapter and compensation, not exceeding five hundred (500) weeks shall be made to the employee's dependents of the first class as defined in sections 11 through 14 of this chapter.

(u) Any payment made by the employer to the employee during the period of the employee's disability, or to the employee's dependents, which, by the terms of this chapter, was not due and payable when made, may, subject to the approval of the worker's compensation board, be deducted from the amount to be paid as compensation, but such deduction shall be made from the distal end of the period during which compensation must be paid, except in cases of temporary disability.

(v) When so provided in the compensation agreement or in the award of the worker's compensation board, compensation may be paid semimonthly, or monthly, instead of weekly.

(w) When the aggregate payments of compensation awarded by agreement or upon hearing to an employee or dependent under eighteen (18) years of age do not exceed one hundred dollars ($100), the payment thereof may be made directly to such employee or dependent, except when the worker's compensation board shall order otherwise.

(x) Whenever the aggregate payments of compensation, due to any person under eighteen (18) years of age, exceed one hundred dollars ($100), the payment thereof shall be made to a trustee, appointed by the circuit or superior court, or to a duly qualified guardian, or, upon the order of the worker's compensation board, to a parent or to such minor person. The payment of compensation, due to any person eighteen (18) years of age or over, may be made directly to such person.

(y) If an employee, or a dependent, is mentally incompetent, or a minor at the time when any right or privilege accrues to the employee under this chapter, the employee's guardian or trustee may, in the employee's behalf, claim and exercise such right and privilege.

(z) All compensation payments named and provided for in this

section, shall mean and be defined to be for only such occupational diseases and disabilities therefrom as are proved by competent evidence, of which there are or have been objective conditions or symptoms proven, not within the physical or mental control of the employee.

SECTION 65. IC 24-4.5-2-201, AS AMENDED BY P.L.85-2020, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 201. Credit Service Charge for Consumer Credit Sales — (1) Except as provided in subsections (8) and (11), with respect to a consumer credit sale, a seller may contract for and receive a credit service charge not exceeding that permitted by this section.

(2) The credit service charge, calculated according to the actuarial method, may not exceed the equivalent of the greater of:

(a) the total of:

(i) thirty-six percent (36%) per year on that part of the unpaid balances of the amount financed (as defined in section 111 of this chapter) which is two thousand dollars ($2,000) or less;

(ii) twenty-one percent (21%) per year on that part of the unpaid balances of the amount financed (as defined in section 111 of this chapter) which is more than two thousand dollars ($2,000) but does not exceed four thousand dollars ($4,000); and

(iii) fifteen percent (15%) per year on that part of the unpaid balances of the amount financed (as defined in section 111 of this chapter) which is more than four thousand dollars ($4,000); or

(b) twenty-five percent (25%) per year on the unpaid balances of the amount financed (as defined in section 111 of this chapter).

(3) In the case of a sale agreement entered into before July 1, 2020, this section does not limit or restrict the manner of contracting for the credit service charge, whether by way of add-on, discount, or otherwise, so long as the rate of the credit service charge does not exceed that permitted by this section. If the sale is precomputed:

(a) the credit service charge may be calculated on the assumption that all scheduled payments will be made when due; and

(b) the effect of prepayment is governed by the provisions on rebate upon prepayment in section 210 of this chapter.

(4) The following apply to a sale agreement for a consumer credit sale (or for the refinancing or consolidation of a consumer credit sale) that is entered into after June 30, 2020:

(a) The credit service charge authorized by this section must be:

(i) contracted for between the seller and the debtor; and

(ii) calculated by applying a rate not exceeding the rate set forth in subsection (2) to unpaid balances of the amount financed (as defined in section 111 of this chapter).

(b) A sale agreement for a precomputed consumer credit sale is prohibited.

(c) Subject to subsection (13), in addition to the credit service charge authorized by subsection (2) and to any other fees permitted by this chapter, and not subject to the rate set forth in subsection (2), the seller may contract for and receive as a condition for, or an incident to, the extension of credit a nonrefundable prepaid finance charge under subsection (11), whether the charge is:

(i) paid separately in cash or by check before or at consummation; or

(ii) withheld from the proceeds of the consumer credit sale.

(5) For the purposes of this section, the term of a sale agreement commences with the date the credit is granted or, if goods are delivered or services performed more than thirty (30) days after that date, with the date of commencement of delivery or performance except as set forth below:

(a) Delays attributable to the customer. Where the customer requests delivery after the thirty (30) day period or where delivery occurs after the thirty (30) day period for a reason attributable to the customer (including but not limited to failure to close on a residence or failure to obtain lease approval), the term of the sale agreement shall commence with the date credit is granted.

(b) Partial Deliveries. Where any portion of the order has been delivered within the thirty (30) day period, the term of the sale agreement shall commence with the date credit is granted.

Differences in the lengths of months are disregarded and a day may be counted as one-thirtieth (1/30) of a month. Subject to classifications and differentiations the seller may reasonably establish, a part of a month in excess of fifteen (15) days may be treated as a full month if periods of fifteen (15) days or less are disregarded and that procedure is not consistently used to obtain a greater yield than would otherwise be permitted.

(6) With respect to a consumer credit sale made pursuant to a revolving charge account, the parties to the sale may contract for the payment by the buyer of a credit service charge not exceeding that permitted in this section, subject to the following:

(a) The credit service charge contracted for and received may not exceed a charge in each monthly billing cycle which is ~~either~~ two

and eighty-three thousandths percent (2.083%) of an amount not greater than:

(i) the average daily balance of the account;

(ii) the unpaid balance of the account on the same day of the billing cycle; or

(iii) subject to subsection (7), the median amount within a specified range within which the average daily balance of the account or the unpaid balance of the account, on the same day of the billing cycle, is included.

For purposes of clauses (ii) and (iii), a variation of not more than four (4) days from month to month is "the same day of the billing cycle".

(b) If the billing cycle is not monthly, the maximum charge is that percentage which bears the same relation to the applicable monthly maximum percentage as the number of days in the billing cycle bears to thirty (30).

(c) Notwithstanding subdivision (a), if there is an unpaid balance on the date as of which the credit service charge is applied, the seller may contract for and receive a charge not exceeding fifty cents ($0.50) if the billing cycle is monthly or longer, or the pro rata part of fifty cents ($0.50) which bears the same relation to fifty cents ($0.50) as the number of days in the billing cycle bears to thirty (30) if the billing cycle is shorter than monthly. However, a seller may not contract for or receive a charge under this subdivision if the seller has made an annual charge for the same period as permitted by the provisions on additional charges in section 202(1)(e) of this chapter.

(7) Subject to classifications and differentiations the seller may reasonably establish, the seller may make the same credit service charge on all amounts financed within a specified range. A credit service charge so made does not violate subsection (2) if:

(a) when applied to the median amount within each range, it does not exceed the maximum permitted by subsection (2); and

(b) when applied to the lowest amount within each range, it does not produce a rate of credit service charge exceeding the rate calculated according to subdivision (a) by more than eight percent (8%) of the rate calculated according to subdivision (a).

(8) Notwithstanding subsection (2), with respect to a consumer sale other than a sale under a revolving charge account, the seller may contract for and receive a minimum credit service charge of not more than thirty dollars ($30). The minimum credit service charge allowed under this subsection may be imposed only if the seller does not

contract for or receive a nonrefundable prepaid finance charge under subsection (11) and:

(a) the debtor prepays in full a consumer credit sale, refinancing, or consolidation, regardless of whether the sale, refinancing, or consolidation is precomputed;

(b) the sale, refinancing, or consolidation prepaid by the debtor is subject to a credit service charge that:

(i) is contracted for by the parties; and

(ii) does not exceed the rate prescribed in subsection (2); and

(c) the credit service charge earned at the time of prepayment is less than the minimum credit service charge contracted for under this subsection.

(9) The amounts of two thousand dollars ($2,000) and four thousand dollars ($4,000) in subsection (2) are subject to change pursuant to the provisions on adjustment of dollar amounts (IC 24-4.5-1-106). However, notwithstanding IC 24-4.5-1-106(1), the Reference Base Index to be used under this subsection is the Index for October 2012.

(10) The amount of thirty dollars ($30) in subsection (8) is subject to change under the provisions on adjustment of dollar amounts (IC 24-4.5-1-106). However, notwithstanding IC 24-4.5-1-106(1), the Reference Base Index to be used under this subsection is the Index for October 1992.

(11) This subsection applies to a sale agreement entered into after June 30, 2020. Except as provided in subsection (8), and subject to subsection (13), in addition to the credit service charge authorized by subsection (2), and to any other fees permitted by this chapter, a seller may contract for and receive a nonrefundable prepaid finance charge in an amount which is not more than:

(a) seventy-five dollars ($75) for an amount financed (as defined in section 111 of this chapter) which is two thousand dollars ($2,000) or less;

(b) one hundred fifty dollars ($150) for an amount financed (as defined in section 111 of this chapter) which is more than two thousand dollars ($2,000) but does not exceed four thousand dollars ($4,000); and

(c) two hundred dollars ($200) for an amount financed (as defined in section 111 of this chapter) which is more than four thousand dollars ($4,000).

The nonrefundable prepaid finance charge is not subject to refund or rebate. However, any amount charged by the seller, other than by a seller that is a depository institution (as defined in IC 24-4.5-1-301.5(12)), under this subsection that exceeds the

applicable amount permitted by this subsection constitutes a violation of this article under IC 24-4.5-6-107.5(l) and is subject to refund. Any amount charged by a depository institution (as defined in IC 24-4.5-1-301.5(12)) under this subsection that exceeds the applicable amount set forth in this subsection is subject to refund. The amounts in this subsection are not subject to change under IC 24-4.5-1-106.

(12) If the director determines that a seller's accrual method of accounting as applied to a consumer credit sale under this section involves the application of subterfuge for the purpose of circumventing this chapter, the director may conform the credit service charge and fees for the transaction to the limitations set forth in this section and may require a refund of overcharges under IC 24-4.5-6-106(2)(a). A determination by the director under this subsection:

(a) must be in writing;

(b) shall be delivered to all parties in the transaction; and

(c) is subject to IC 4-21.5-3.

(13) At the time of consummation of a consumer credit sale:

(a) the credit service charge authorized by subsection (2); and

(b) the nonrefundable prepaid finance charge authorized by subsection (11) (including any amount charged by a depository institution (as defined in IC 24-4.5-1-301.5(12)) that exceeds the applicable amount set forth in subsection (11)) in the case of a sale agreement entered into after June 30, 2020;

are subject to IC 35-45-7 and, when combined, may not exceed the rate set forth in IC 35-45-7-2.

SECTION 66. IC 24-9-4-7, AS AMENDED BY P.L.1-2006, SECTION 415, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 7. A creditor may not make a high cost home loan without first providing the borrower information to facilitate contact with a nonprofit counseling agency certified by:

(1) the United States Department of Housing and Urban Development; or

(2) the Indiana housing and community development authority under ~~IC 5-20-1-4(g);~~ **IC 5-20-1-4(d);**

at the same time as the good faith estimates are provided to the borrower in accordance with the requirements of the federal Real Estate Settlement Procedures Act (12 U.S.C. 2601 et ~~seq. As~~ **seq.) as** amended.

SECTION 67. IC 25-1-7-3, AS AMENDED BY P.L.170-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 3. (a) Except as provided in subsections (b) and

(c), the division is responsible for the investigation of complaints concerning licensees.

(b) The medical licensing board of Indiana shall investigate a complaint concerning a physician licensed under IC 25-22.5 and a violation specified in IC 25-22.5-2-8. The division shall forward a complaint concerning a physician licensed under IC 25-22.5 and a violation specified in IC 25-22.5-2-8 to the medical licensing board of Indiana for investigation by the board. However, if the complaint includes a violation in addition to a violation specified in IC 25-22.5-2-8, the division shall investigate the complaint in its entirety and notify the medical licensing board of Indiana of the investigation.

(c) The state board of cosmetology and barber examiners shall investigate complaints under IC 25-8-14-5, IC 25-8-4-13, IC 25-8-4-29, ~~IC 25-8-9-10,~~ IC 25-8-9-14, and IC 25-8-15.4-5. The division shall forward a complaint concerning the practice of beauty culture under IC 25-8 to the state board of cosmetology and barber examiners for investigation by the state board of cosmetology and barber examiners. However, if the complaint includes a violation in addition to a violation specified in IC 25-8-14-5, IC 25-8-4-13, IC 25-8-4-29, ~~IC 25-8-9-10,~~ IC 25-8-9-14, and IC 25-8-15.4-5, the division shall investigate the complaint in its entirety and notify the state board of cosmetology and barber examiners of the investigation.

SECTION 68. IC 25-1-9-23, AS ADDED BY P.L.93-2020, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 23. (a) This section does not apply to emergency services.

(b) As used in this section, "covered individual" means an individual who is entitled to be provided health care services at a cost established according to a network plan.

(c) As used in this section, "emergency services" means services that are:

(1) furnished by a provider qualified to furnish emergency services; and

(2) needed to evaluate or stabilize an emergency medical condition.

(d) As used in this section, "in network practitioner" means a practitioner who is required under a network plan to provide health care services to covered individuals at not more than a preestablished rate or amount of compensation.

(e) As used in this section, "network plan" means a plan under which facilities and practitioners are required by contract to provide

health care services to covered individuals at not more than a preestablished rate or amount of compensation.

(f) As used in this section, "practitioner" means the following:

(1) An individual licensed under IC 25 who provides professional health care services to individuals in a facility.

(2) An organization:

(A) that consists of practitioners described in subdivision (1); and

(B) through which practitioners described in subdivision (1) provide health care services.

(3) An entity that:

(A) is not a facility; and

(B) employs practitioners described in subdivision (1) to provide health care services.

(g) An in network practitioner who provides covered health care services to a covered individual may not charge more for the covered health care services than allowed according to the rate or amount of compensation established by the individual's network plan.

(h) This subsection is effective beginning July 1, 2021. Except as provided in subsection ~~(l),~~ **(m),** a practitioner shall provide to a covered individual, at least five (5) days before the health care service is scheduled to be provided to the covered individual, a good faith estimate of the amount that the practitioner intends to charge the covered individual for the health care service and in compliance with IC 25-1-9.8-14(a).

(i) An out of network practitioner who provides health care services at an in network facility to a covered individual may not be reimbursed more for the health care services than allowed according to the rate or amount of compensation established by the covered individual's network plan unless all of the following conditions are met:

(1) At least five (5) days before the health care services are scheduled to be provided to the covered individual, the practitioner provides to the covered individual, on a form separate from any other form provided to the covered individual by the practitioner, a statement in conspicuous type at least as large as 14 point type that meets the following requirements:

(A) Includes a notice reading substantially as follows: "[Name of practitioner] intends to charge you more for [name or description of health care services] than allowed according to the rate or amount of compensation established by the network plan applying to your coverage. [Name of practitioner] is not entitled to charge this much for [name or description of health

care services] unless you give your written consent to the charge.".

(B) Sets forth the practitioner's good faith estimate of the amount that the practitioner intends to charge for the health care services provided to the covered individual.

(C) Includes a notice reading substantially as follows concerning the good faith estimate set forth under clause (B): "The estimate of our intended charge for [name or description of health care services] set forth in this statement is provided in good faith and is our best estimate of the amount we will charge. If our actual charge for [name or description of health care services] exceeds our estimate, we will explain to you why the charge exceeds the estimate.".

(2) The covered individual signs the statement provided under subdivision (1), signifying the covered individual's consent to the charge for the health care services being greater than allowed according to the rate or amount of compensation established by the network plan.

(j) If an out of network practitioner does not meet the requirements of subsection (i), the out of network practitioner shall include on any bill remitted to a covered individual a written statement in 14 point type stating that the covered individual is not responsible for more than the rate or amount of compensation established by the covered individual's network plan plus any required copayment, deductible, or coinsurance.

(k) If a covered individual's network plan remits reimbursement to the covered individual for health care services subject to the reimbursement limitation of subsection (i), the network plan shall provide with the reimbursement a written statement in 14 point type that states that the covered individual is not responsible for more than the rate or amount of compensation established by the covered individual's network plan and that is included in the reimbursement plus any required copayment, deductible, or coinsurance.

(l) If the charge of a practitioner for health care services provided to a covered individual exceeds the estimate provided to the covered individual under subsection (i)(1)(B), the facility or practitioner shall explain in a writing provided to the covered individual why the charge exceeds the estimate.

(m) An in network practitioner is not required to provide a covered individual with the good faith estimate required under subsection (h) if the nonemergency health care service is scheduled to be performed by the practitioner within five (5) business days after the health care

service is ordered.

(n) The department of insurance shall adopt emergency rules under IC 4-22-2-37.1 to specify the requirements of the notifications set forth in subsections (j) and (k).

SECTION 69. IC 25-1-9.8-16, AS ADDED BY P.L.93-2020, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 16. (a) A practitioner that has ordered ~~the~~ **for an** individual ~~for~~ a nonemergency health care service shall provide to the individual an electronic or paper copy of a written notice that states the following, or words to the same effect: "A patient may at any time ask a health care provider for an estimate of the price the health care providers and health facility will charge for providing a nonemergency medical service. The law requires that the estimate be provided within 5 business days.".

(b) The appropriate board (as defined in IC 25-1-9-1) may adopt rules under IC 4-22-2 to establish requirements for practitioners to provide additional charging information under this section.

SECTION 70. IC 25-6.1-4 IS REPEALED [EFFECTIVE JULY 1, 2021]. (Suspension and Revocation of Licenses of Auctioneers).

SECTION 71. IC 25-23.4-3-1, AS AMENDED BY P.L.78-2017, SECTION 16, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. (a) This section does not apply to an individual who has a license under IC 25-23-1-13.1 to practice midwifery as a certified nurse midwife and is practicing within the scope of that license.

(b) After July 1, 2018, an individual may not engage in the practice of midwifery unless:

(1) the individual is issued a certificate by a board under IC 25-1-5 and is acting within the scope of the person's license; or

(2) the individual has a certified direct entry midwife certificate under this article and has a collaborative agreement with a physician as set forth in this article.

(c) To become certified as a certified direct entry midwife, an applicant must satisfy the following requirements:

(1) Be at least twenty-one (21) years of age.

(2) Possess at least:

(A) an associate degree in nursing, associate degree in midwifery accredited by the Midwifery Education Accreditation Council (MEAC), or other similar science related associate degree; or

(B) a bachelor's degree;

from a postsecondary educational institution.

(3) Satisfactorily complete educational curriculum approved by:

(A) the Midwifery Education Accreditation Council (MEAC) or a successor organization; or

(B) the educational equivalent of a Midwifery Education Accreditation Council curriculum approved by the board.

(4) Acquire and document practical experience as outlined in the Certified Professional Midwife credentialing process in accordance with the standards of the North American Registry of Midwives or a successor organization.

(5) Obtain certification by an accredited association in adult cardiopulmonary resuscitation that is approved by the board.

(6) Complete the program sponsored by the American Academy of Pediatrics in neonatal resuscitation, excluding endotracheal intubation and the administration of drugs.

(7) Comply with the birth requirements of the Certified Professional Midwife credentialing process, observe an additional twenty (20) births, attend twenty (20) births conducted by a physician, assist with an additional twenty (20) births, and act as the primary attendant for an additional twenty (20) births.

(8) Provide proof to the board that the applicant has obtained the Certified Professional Midwife credential as administered by the North American Registry of Midwives or a successor organization.

(9) Present additional documentation or certifications required by the board. The board may adopt standards that require more training than required by the North American Registry of Midwives.

(10) Maintain sufficient liability insurance.

~~(d) The board may exempt an applicant from the following:~~

~~(1) The education requirements in subsection (c)(2) if the applicant provides proof to the board that the applicant is enrolled in a program that will satisfy the requirements of subsection (c)(2). An exemption under this subdivision applies for an individual for not more than two (2) years. This subdivision expires June 30, 2018.~~

~~(2) The education requirements in subsection (c)(3) if the applicant provides:~~

~~(A) proof to the board that the applicant has delivered over one hundred (100) births as a primary attendant; and~~

~~(B) a letter of reference from a licensed physician with whom the applicant has informally collaborated.~~

~~This subdivision expires June 30, 2018.~~

~~(3) The requirement that a physician directly supervise twenty (20) births in subsection (c)(7) if the applicant provides:~~

~~(A) proof to the board that the applicant has delivered over one hundred (100) births as a primary attendant; and~~

~~(B) a letter of reference from a licensed physician with whom the applicant has informally collaborated.~~

~~This subdivision expires June 30, 2018.~~

SECTION 72. IC 26-1-2.1-103, AS AMENDED BY P.L.143-2007, SECTION 19, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 103. (1) Unless the context otherwise requires, in IC 26-1-2.1:

(a) "Buyer in ordinary course of business" means a person who in good faith and without knowledge that the sale to the person is in violation of the ownership rights or security interest or leasehold interest of a third party in the goods, buys in ordinary course from a person in the business of selling goods of that kind but does not include a pawnbroker. "Buying" may be for cash or by exchange of other property or on secured or unsecured credit and includes acquiring goods or documents of title under a pre-existing contract for sale but does not include a transfer in bulk or as security for or in total or partial satisfaction of a money debt.

(b) "Cancellation" occurs when either party puts an end to the lease contract for default by the other party.

(c) "Commercial unit" means such a unit of goods as by commercial usage is a single whole for purposes of lease and division of which materially impairs its character or value on the market or in use. A commercial unit may be a single article, as a machine, or a set of articles, as a suite of furniture or a line of machinery, or a quantity, as a gross or carload, or any other unit treated in use or in the relevant market as a single whole.

(d) "Conforming" goods or performance under a lease contract means goods or performance that are in accordance with the obligations under the lease contract.

(e) "Consumer lease" means a lease that a lessor regularly engaged in the business of leasing or selling makes to a lessee who is an individual and who takes under the lease primarily for a personal, family, or household purpose if the total payments to be made under the lease contract, excluding payments for options to renew or buy, do not exceed twenty-five thousand dollars ($25,000).

(f) "Fault" means wrongful act, omission, breach, or default.

(g) "Finance lease" means a lease with respect to which:

(i) the lessor does not select, manufacture, or supply the goods;
(ii) the lessor acquires the goods or the right to possession and use of the goods in connection with the lease; and
(iii) one (1) of the following occurs:
(A) the lessee receives a copy of the contract by which the lessor acquired the goods or the right to possession and use of the goods before signing the lease contract;
(B) the lessee's approval of the contract by which the lessor acquired the goods or the right to possession and use of the goods is a condition to effectiveness of the lease contract;
(C) the lessee, before signing the lease contract, receives an accurate and complete statement designating the promises and warranties, and any disclaimers of warranties, limitations, or modifications of remedies, or liquidated damages, including those of a third party, such as the manufacturer of the goods, provided to the lessor by the person supplying the goods in connection with or as part of the contract by which the lessor acquired the goods or the right to possession and use of the goods; or
(D) if the lease is not a consumer lease, the lessor, before the lessee signs the lease contract, informs the lessee in writing:
(a) of the identity of the person supplying the goods to the lessor, unless the lessee has selected that person and directed the lessor to acquire the goods or the right to possession and use of the goods from that person; (b) that the lessee is entitled under IC 26-1-2.1 to the promises and warranties, including those of any third party, provided to the lessor by the person supplying the goods in connection with or as part of the contract by which the lessor acquired the goods or the right to possession and use of the goods; and (c) that the lessee may communicate with the person supplying the goods to the lessor and receive an accurate and complete statement of those promises and warranties, including any disclaimers and limitations of them or of remedies.

(h) "Goods" means all things that are movable at the time of identification to the lease contract, or are fixtures (IC 26-1-2.1-309), but the term does not include money, documents, instruments, accounts, chattel paper, general intangibles, or minerals or the like, including oil and gas, before extraction. The term also includes the unborn young of animals.

(i) "Installment lease contract" means a lease contract that

authorizes or requires the delivery of goods in separate lots to be separately accepted, even though the lease contract contains a clause "each delivery is a separate lease" or its equivalent.

(j) "Lease" means a transfer of the right to possession and use of goods for a term in return for consideration, but a sale, including a sale on approval or a sale or return, or retention or creation of a security interest is not a lease. Unless the context clearly indicates otherwise, the term includes a sublease.

(k) "Lease agreement" means the bargain, with respect to the lease, of the lessor and the lessee in fact as found in their language or by implication from other circumstances including course of dealing or usage of trade or course of performance as provided in IC 26-1-2.1. Unless the context clearly indicates otherwise, the term includes a sublease agreement.

(l) "Lease contract" means the total legal obligation that results from the lease agreement as affected by IC 26-1-2.1 and any other applicable rules of law. Unless the context clearly indicates otherwise, the term includes a sublease contract.

(m) "Leasehold interest" means the interest of the lessor or the lessee under a lease contract.

(n) "Lessee" means a person who acquires the right to possession and use of goods under a lease. Unless the context clearly indicates otherwise, the term includes a sublessee.

(o) "Lessee in ordinary course of business" means a person who in good faith and without knowledge that the lease to the person is in violation of the ownership rights or security interest or leasehold interest of a third party in the goods leases in ordinary course from a person in the business of selling or leasing goods of that kind but does not include a pawnbroker. "Leasing" may be for cash or by exchange of other property or on secured or unsecured credit and includes acquiring goods or documents of title under a pre-existing lease contract but does not include a transfer in bulk or as security for or in total or partial satisfaction of a money debt.

(p) "Lessor" means a person who transfers the right to possession and use of goods under a lease. Unless the context clearly indicates otherwise, the term includes a sublessor.

(q) "Lessor's residual interest" means the lessor's interest in the goods after expiration, termination, or cancellation of the lease contract.

(r) "Lien" means a charge against or interest in goods to secure payment of a debt or performance of an obligation, but the term does not include a security interest.

(s) "Lot" means a parcel or a single article that is the subject matter of a separate lease or delivery, whether or not it is sufficient to perform the lease contract.

(t) "Merchant lessee" means a lessee that is a merchant with respect to goods of the kind subject to the lease.

(u) "Present value" means the amount as of a date certain of one (1) or more sums payable in the future, discounted to the date certain. The discount is determined by the interest rate specified by the parties if the rate was not manifestly unreasonable at the time the transaction was entered into; otherwise, the discount is determined by a commercially reasonable rate that takes into account the facts and circumstances of each case at the time the transaction was entered into.

(v) "Purchase" includes taking by sale, lease, mortgage, security interest, pledge, gift, or any other voluntary transaction creating an interest in goods.

(w) "Sublease" means a lease of goods the right to possession and use of which was acquired by the lessor as a lessee under an existing lease.

(x) "Supplier" means a person from whom a lessor buys or leases goods to be leased under a finance lease.

(y) "Supply contract" means a contract under which a lessor buys or leases goods to be leased.

(z) "Termination" occurs when either party pursuant to a power created by agreement or law puts an end to the lease contract otherwise than for default.

(2) Other definitions applying to IC 26-1-2.1 and the sections in which they appear are:

"Accessions". IC 26-1-2.1-310(1).

"Construction mortgage". IC 26-1-2.1-309(1)(d).

"Encumbrance". IC 26-1-2.1-309(1)(e).

"Fixtures". IC 26-1-2.1-309(1)(a).

"Fixture filing". IC 26-1-2.1-309(1)(b).

"Purchase money lease". IC 26-1-2.1-309(1)(c).

(3) The following definitions in other chapters apply to IC 26-1-2.1:

"Account". IC 26-1-9.1-102(a)(2).

"Between merchants". IC 26-1-2-104(3).

"Buyer". IC 26-1-2-103(1)(a).

"Chattel paper". IC 26-1-9.1-102(a)(11).

"Consumer goods". IC 26-1-9.1-102(a)(23).

"Document". IC 26-1-9.1-102(a)(30).

"Entrusting". IC 26-1-2-403(3).

"General intangibles". IC 26-1-9.1-102(a)(42).
"Good faith". IC 26-1-2-103(1)(b).
"Instrument". IC 26-1-9.1-102(a)(47).
"Merchant". IC 26-1-2-104(1).
"Mortgage". IC 26-1-9.1-102(a)(55).
"Pursuant to commitment". ~~IC 26-1-9.1-102(a)(68).~~ **IC 26-1-9.1-102(a)(69).**
"Receipt". IC 26-1-2-103(1)(c).
"Sale". IC 26-1-2-106(1).
"Sale on approval". IC 26-1-2-326.
"Sale or return". IC 26-1-2-326.
"Seller". IC 26-1-2-103(1)(d).

(4) In addition, IC 26-1-1 contains general definitions and principles of construction and interpretation applicable throughout IC 26-1-2.1.

SECTION 73. IC 26-4-1-8 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 8. "Deferred pricing" means a purchase by a buyer where title to the grain passes to the buyer, in which the actual dollar price to be paid to the seller is not to be determined at the time the grain is received by the buyer or less than twenty-one (21) days of that receipt.~~

SECTION 74. IC 26-4-1-25 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 25. "Warehouse receipt" means any of the following:~~

~~(1) A warehouse receipt issued under the Public Grain Warehouse and Warehouse Receipts Act in accordance with the Uniform Commercial Code.~~

~~(2) A warehouse receipt issued under IC 26-3-7.~~

~~(3) A warehouse receipt issued under the United States Warehouse Act.~~

SECTION 75. IC 26-4-2 IS REPEALED [EFFECTIVE JULY 1, 2021]. (Grain Buyers Registration).

SECTION 76. IC 27-1-24.5-7, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 7. As used in this chapter, "maximum allowable cost" means the maximum amount that a pharmacy benefit manager will reimburse a pharmacy for the cost of a generic ~~prescription~~ drug. The term does not include a dispensing fee or professional fee.

SECTION 77. IC 27-1-24.5-12, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 12. (a) As used in this chapter, "pharmacy benefit manager" means an entity that, on behalf of a health ~~benefits~~ plan, state agency, insurer, managed care organization, or other third party payor:

(1) contracts directly or indirectly with pharmacies to provide prescription drugs to individuals;

(2) administers a prescription drug benefit;

(3) processes or pays pharmacy claims;

(4) creates or updates prescription drug formularies;

(5) makes or assists in making prior authorization determinations on prescription drugs;

(6) administers rebates on prescription drugs; or

(7) establishes a pharmacy network.

(b) The term does not include the following:

(1) A person licensed under IC 16.

(2) A health provider who is:

(A) described in IC 25-0.5-1; and

(B) licensed or registered under IC 25.

(3) A consultant who only provides advice concerning the selection or performance of a pharmacy benefit manager.

SECTION 78. IC 27-1-24.5-19, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 19. (a) A pharmacy benefit manager shall provide equal access and incentives to all pharmacies within the pharmacy benefit **manager's** network.

(b) A pharmacy benefit manager may not do any of the following:

(1) Condition participation in any network on accreditation, credentialing, or licensing of a pharmacy, ~~provider that,~~ other than a license or permit required by the Indiana board of pharmacy or other state or federal regulatory authority for the services provided by the pharmacy. However, nothing in this subdivision precludes the department from providing credentialing or accreditation standards for pharmacies.

(2) Discriminate against any pharmacy. ~~provider.~~

(3) Directly or indirectly retroactively deny a claim or aggregate of claims after the claim or aggregate of claims has been adjudicated, unless any of the following apply:

(A) The original claim was submitted fraudulently.

(B) The original claim payment was incorrect because the pharmacy or pharmacist had already been paid for the drug.

(C) The pharmacist services were not properly rendered by the pharmacy or pharmacist.

(4) Reduce, directly or indirectly, payment to a pharmacy for pharmacist services to an effective rate of reimbursement, including permitting an insurer or plan sponsor to make such a reduction.

(5) Reimburse a pharmacy that is affiliated with the pharmacy benefit manager, other than solely being included in the pharmacy

benefit manager's network, at a greater reimbursement rate than other pharmacies in the same network.

A violation of this subsection by a pharmacy benefit manager constitutes an unfair or deceptive act or practice in the business of insurance under IC 27-4-1-4.

SECTION 79. IC 27-1-24.5-22, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 22. (a) A pharmacy benefit manager shall do the following:

(1) Identify to contracted:

(A) pharmacy ~~service administration~~ **services administrative** organizations; or

(B) pharmacies if the pharmacy benefit manager contracts directly with pharmacies;

the sources used by the pharmacy benefit manager to calculate the drug product reimbursement paid for covered drugs available under the pharmacy health ~~benefit~~ plan administered by the pharmacy benefit manager.

(2) Establish an appeal process for contracted pharmacies, pharmacy services administrative organizations, or group purchasing organizations to appeal and resolve disputes concerning the maximum allowable cost pricing.

(3) Update and make available to pharmacies:

(A) at least every forty-five (45) days; or

(B) in a different time frame if contracted between a pharmacy benefit manager and a pharmacy;

the pharmacy benefit manager's maximum allowable cost list.

(b) The appeal process required by subsection (a)(2) must include the following:

(1) The right to appeal a claim not to exceed sixty (60) days following the initial filing of the claim.

(2) The investigation and resolution of a filed appeal by the pharmacy benefit manager in a time frame determined by the commissioner.

(3) If an appeal is denied, a requirement that the pharmacy benefit manager provide the reason for the denial.

(4) If an appeal is approved, a requirement that the pharmacy benefit manager do the following:

(A) Change the maximum allowable cost of the drug for the pharmacy that filed the appeal as of the initial date of service that the appealed drug was dispensed.

(B) Adjust the maximum allowable cost of the drug for the

appealing pharmacy and for all other contracted pharmacies in the same network of the pharmacy benefit manager that filled a prescription for patients covered under the same health ~~benefit~~ plan beginning on the initial date of service the appealed drug was dispensed.

(C) Adjust the drug product reimbursement for contracted pharmacies that resubmit claims to reflect the adjusted maximum allowable cost, if applicable.

(D) Allow the appealing pharmacy and all other contracted pharmacies in the network that filled the prescriptions for patients covered under the same health ~~benefit~~ plan to reverse and resubmit claims and receive payment based on the adjusted maximum allowable cost from the initial date of service the appealed drug was dispensed.

(E) Make retroactive price adjustments in the next payment cycle unless otherwise agreed to by the pharmacy.

(5) The establishment of procedures for auditing submitted claims by a ~~contract~~ **contracted** pharmacy in a manner established by administrative rules under IC 4-22-2 by the department. The auditing procedures:

(A) may not use extrapolation or any similar methodology;

(B) may not allow for recovery by a pharmacy benefit manager of a submitted claim due to clerical or other error where the patient has received the drug for which the claim was submitted;

(C) must allow for recovery by a ~~contract~~ **contracted** pharmacy for underpayments by the pharmacy benefit manager; and

(D) may only allow for the pharmacy benefit manager to recover overpayments on claims that are actually audited and discovered to include a recoverable error.

(c) The department must approve the manner in which a pharmacy benefit manager may respond to an appeal filed under this section. The department shall establish a process for a pharmacy benefit manager to obtain approval from the department under this section.

SECTION 80. IC 27-1-24.5-23, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 23. (a) For every drug for which the pharmacy benefit manager establishes a maximum allowable cost to determine the drug product reimbursement, the pharmacy benefit manager shall make available to a contracted pharmacy services ~~administration~~ **administrative** organization to make available to the pharmacies, or to

a pharmacy if the pharmacy benefit manager contracts directly with a pharmacy, in a manner established by the department by administrative rule described in subsection (b) the following:

(1) Information identifying the national drug pricing compendia or sources used to obtain the drug price data.

(2) The comprehensive list of drugs subject to maximum allowable cost and the actual maximum allowable cost for each drug.

(b) The department shall adopt rules under IC 4-22-2 concerning the manner in which a pharmacy benefit manager shall communicate the following to contracted pharmacy services ~~administration~~ **administrative** organizations:

(1) Drug price data should be used to establish drug reimbursements by pharmacy benefit managers as described in subsection (a)(1).

(2) The comprehensive list of drugs described in subsection (a)(2).

(c) The department may, concerning a maximum allowable cost list, consider whether a drug is:

(1) obsolete;

(2) ~~temporary~~ **temporarily** unavailable;

(3) to be included on a drug shortage list; or

(4) unable to be lawfully substituted.

SECTION 81. IC 27-1-24.5-25, AS ADDED BY P.L.68-2020, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 25. (a) A party that has contracted with a pharmacy benefit manager to provide services may, at least one (1) time in a calendar year, request an audit of compliance with the contract. The audit may include full disclosure of rebate amounts secured on prescription drugs, whether product specific or general rebates, that were provided by a pharmaceutical manufacturer and any other revenue and fees derived by the pharmacy benefit manager from the contract. A contract may not contain provisions that impose unreasonable fees or conditions that would severely restrict a party's right to conduct an audit under this subsection.

(b) A pharmacy benefit manager shall disclose, upon request from a party that has contracted with a pharmacy benefit manager, to the party the actual amounts paid by the pharmacy benefit manager to any pharmacy.

(c) A pharmacy benefit manager shall provide notice to a party contracting with the pharmacy benefit manager **of** any consideration that the pharmacy benefit manager receives from a pharmacy

manufacturer for any name brand dispensing of a prescription when a generic or biologically similar product is available for the prescription.

(d) The commissioner may establish a procedure to release information from an audit performed by the department to a party that has requested an audit under this section in a manner that does not violate confidential or proprietary information laws.

(e) Any provision of a contract entered into, issued, or renewed after June 30, 2020, that violates this section is unenforceable.

SECTION 82. IC 27-1-24.5-27.5, AS ADDED BY P.L.114-2020, SECTION 16, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 27.5. A pharmacy ~~benefits~~ **benefit** manager may not require a pharmacy or pharmacist to collect a higher copayment for a prescription drug from a customer than the pharmacy ~~benefits~~ **benefit** manager allows the pharmacy or pharmacist to retain.

SECTION 83. IC 27-1-28-19, AS AMENDED BY P.L.130-2020, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 19. (a) Except as provided in subsection (b), an individual who holds a license under this chapter shall, every two (2) years, satisfactorily complete a minimum of twenty-four (24) hours of continuing education courses and report the completion of the courses to the commissioner.

(b) This section does not apply to the following:

(1) An individual who is licensed for less than twelve (12) months before the end of the applicable continuing education biennium.

(2) A licensed nonresident independent adjuster who has met the continuing education requirements of the licensed nonresident independent adjuster's designated home state.

(3) An individual holding a current claims certification if:

(A) the claims certification is issued by a national or state claims association whose certification program is approved by the department for purposes of this section;

(B) the number of hours of study required to complete the certification program described in clause (A) is not less than the number of hours of continuing education that an individual is required to complete every two (2) years under subsection (a);

(C) the content of the certification program described in clause (A):

(i) includes the content of the prelicensing course of study required by section 12(b)(5) of this chapter for the line of authority in which the individual has applied for or obtained licensing under this chapter; and

(ii) is made available for review and audit by the commissioner through an electronic portal maintained by the **claims** association;

(D) the claims association referred to in clause (A) is approved as a continuing education provider in Indiana;

(E) the claims association referred to in clause (A) reports the individual's completion of the certification program described in clause (A) to the commissioner through an electronic portal maintained by the commissioner; and

(F) the **claims** association **referred to in clause (A),** through an electronic portal maintained by the **claims** association, provides the commissioner access to the individual's transcript showing the individual's completion of the certification program described in clause (A).

SECTION 84. IC 27-1-44.5-2, AS ADDED BY P.L.50-2020, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. As used in this chapter, "health payer" includes the following:

(1) Medicare.

(2) Medicaid or a managed care organization (as defined in IC 12-7-2-126.9) that has contracted with Medicaid to provide services to a Medicaid recipient.

(3) An insurer that issues a policy of accident and sickness insurance (as defined in IC 27-8-5-1).

(4) A health maintenance organization (as defined in IC 27-13-1-19).

(5) A pharmacy benefit manager (as defined in ~~IC 27-1-24.8-3).~~ **IC 27-1-24.5-12).**

(6) A third party administrator.

(7) An insurer (as defined in IC 27-1-26-1), excluding insurers of life insurance.

(8) Any other person identified by the commissioner for participation in the data base described in this chapter.

SECTION 85. IC 28-7-5-10, AS AMENDED BY P.L.129-2020, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) Whenever a licensee:

(1) closes an existing branch; or

(2) intends to open a new branch or relocate an existing branch;

the licensee shall give written notice to the department. A licensee shall give written notice to the department of the closing of an existing branch under subdivision (1) not later than thirty (30) days after the date of the closing of the branch. Not later than thirty (30) days before

the intended relocation or addition of one (1) or more branches under subdivision (2), the licensee shall provide to the department the written notice of its intention required by this section and shall request approval in a form prescribed by the director to add or relocate one (1) or more branches.

(b) A person that is licensed under this chapter, or a person that seeks a license or a renewal of a license under this chapter, in accordance with sections 4, 5, and 8 of this chapter, shall notify the department not later than thirty (30) days after any of the following occurs:

(1) The person has a change in name, address, or principals.

(2) The person files for bankruptcy or reorganization.

~~(4)~~ **(3)** The person is notified by a state or governmental authority that the person is subject to revocation or suspension proceedings with respect to the person's activities related to the business of pawnbroking or the provision of other similar services.

~~(5)~~ **(4)** An individual described in section 8(a)(2) or 8(a)(3) of this chapter has been convicted of a felony involving fraud, deceit, or misrepresentation under the laws of Indiana or any other jurisdiction.

SECTION 86. IC 28-8-4-19.5, AS AMENDED BY P.L.129-2020, SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 19.5. As used in this chapter, "stored value account" or "stored value card" means any account, card, or device that:

(1) may be used by a holder to:

(A) perform financial transactions; or

(B) obtain, purchase, or receive money, goods, or services;

in an amount or having a value that does not exceed the dollar value of the account, card, or device; and

(2) either:

(A) in the case of a card or similar device, has a magnetic stripe or computer chip that enables dollar values to be electronically added to or deducted from the dollar value of the card; or

(B) in the case of an account, uses an account number unique to the holder for the purposes set forth in ~~subsection~~ **subdivision** (1).

SECTION 87. IC 30-4-8-16, AS AMENDED BY P.L.56-2020, SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 16. (a) Nothing in this chapter shall be construed to prohibit a lender from enforcing its rights in property identified in

section 1(b) of this chapter and, to the extent necessary, naming the legacy trust or trustee of the trust as a defendant to the action or proceeding.

(b) If an asset described in section 1(b)(1) of this chapter is transferred to a legacy trust or trustee of a legacy trust, the transferor of that asset must send written notice of the transfer to the pertinent lender within fifteen (15) days after that transfer. The transferor must send the notice by certified mail, return receipt requested, to the registered agent for the lender. If there is no registered agent for the lender, the transferor must send notice to one (1) of the following:

(1) The last known address of the lender.

(2) The last address specified by the lender for mailing payments on the obligations.

(3) The address specified by the lender for general inquiries by customers.

The notice must include the name of the transferor, a description of the asset transferred, the name of the trustee, and the date that the transfer was completed. Upon request, the transferor or trustee shall provide the lender with a certification of the trust under IC 30-4-4-5, the names and addresses of the qualified beneficiaries of the trust, and copies of the pages from the trust instrument that identify the current trustee and describe the trustee's administrative powers and duties.

(c) Nothing in this chapter shall be construed to authorize any disposition that is prohibited by the terms of any agreements, notes, guaranties, mortgages, indentures, instruments, undertakings, or other documents. Any provisions that prohibit such transfer or disposition shall be binding and shall make this chapter inapplicable, so long as any indebtedness remains outstanding in connection with such agreements, notes, guaranties, mortgages, indentures, instruments, ~~undertakes,~~ **undertakings,** or other similar documents.

(d) In the event of a conflict between this section and any other provision of this chapter, this section shall control.

SECTION 88. IC 30-5-5-17 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 17. (a) If the attorney in fact has the authority to consent to or refuse health care under section ~~16(2)~~ **16(b)(2)** of this chapter, the attorney in fact may be empowered to ask in the name of the principal for health care to be withdrawn or withheld when it is not beneficial or when any benefit is outweighed by the demands of the treatment and death may result. To empower the attorney in fact to act under this section, the following language must be included in an appointment under IC 16-36-1 in substantially the same form set forth below:

I authorize my health care representative to make decisions in my best interest concerning withdrawal or withholding of health care. If at any time based on my previously expressed preferences and the diagnosis and prognosis my health care representative is satisfied that certain health care is not or would not be beneficial or that such health care is or would be excessively burdensome, then my health care representative may express my will that such health care be withheld or withdrawn and may consent on my behalf that any or all health care be discontinued or not instituted, even if death may result.

My health care representative must try to discuss this decision with me. However, if I am unable to communicate, my health care representative may make such a decision for me, after consultation with my physician or physicians and other relevant health care givers. To the extent appropriate, my health care representative may also discuss this decision with my family and others to the extent they are available.

(b) Nothing in this section may be construed to authorize euthanasia.

SECTION 89. IC 31-9-2-122.5, AS ADDED BY P.L.190-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 122.5. "STEVE system", for purposes of IC 31-19-20, ~~IC 31-19-22,~~ IC 31-19-25, and IC 31-19-25.5, refers to the State and Territorial Exchange of Vital Events Exchange System, administered by the National Association for Public Health Statistics and Information Systems.

SECTION 90. IC 33-33-87-21 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 21. Each superior court shall appoint a bailiff, a court reporter, and the additional personnel necessary to carry out the business of the court. The duties, salaries, and terms of the bailiff and ~~recorder~~ **reporter** shall be regulated in the same manner as provided for the circuit court.

SECTION 91. IC 33-37-5-2, AS AMENDED BY P.L.149-2016, SECTION 85, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 2. (a) Each clerk shall establish a clerk's record perpetuation fund. The clerk shall deposit all the following in the fund:

(1) Revenue received by the clerk for transmitting documents by facsimile machine to a person under IC 5-14-3.

(2) Document storage fees required under section 20 of this chapter.

(3) The late payment fees imposed under section 22 of this chapter that are authorized for deposit in the clerk's record

perpetuation fund under IC 33-37-7-2.

(4) The fees required under IC 29-1-7-3.1 for deposit of a will.

(5) Fees for preparing a transcript or copy of any record under section 1 of this chapter.

(b) The clerk may use any money in the fund for the following purposes:

(1) The preservation of records.

(2) The improvement of record keeping systems and equipment.

(3) **The operation of a** case management system.

SECTION 92. IC 34-30-2-70.5, AS ADDED BY P.L.3-2020, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 70.5. IC 16-31.5-10-10 (Concerning the interstate commission for EMS personnel ~~and~~ practice).

SECTION 93. IC 34-30-2-99.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: **Sec. 99.9. IC 25-24-1-4.7 (Concerning certain prescribers for damage or injury to an individual resulting from the packaging, manufacturing, or dispensing of contact lenses or prescription eye glasses).**

SECTION 94. IC 35-40.5-1-1, AS ADDED BY P.L.58-2020, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. The following definitions apply throughout this article:

(1) "Law enforcement officer" means any of the following:

(A) A law enforcement officer (as defined in IC 35-31.5-2-185).

(B) A state educational institution police officer appointed under IC 21-39-4.

(C) A school corporation **police** officer appointed under IC 20-26-16.

(D) A school resource officer (as defined in IC 20-26-18.2-1).

(E) A police officer of a private postsecondary educational institution whose governing board has appointed the police officer under IC 21-17-5-2.

(2) "Provider" has the meaning set forth in IC 16-21-8-0.2.

(3) "Relative" has the meaning set forth in IC 35-42-2-1(b).

(4) "Sexual assault forensic evidence" means the results collected from a forensic medical examination of a victim by a provider.

(5) "State sexual assault response team" means the statewide sexual assault response team coordinated by the Indiana prosecuting attorneys council and the Indiana criminal justice institute.

(6) "Victim" means an individual:

(A) who is a victim of sexual assault (as defined in IC 5-26.5-1-8); or

(B) who:

(i) is a relative of or a person who has had a close personal relationship with the individual described under clause (A); and

(ii) is designated by the individual described under clause (A) as a representative.

The term does not include an individual who is accused of committing an act of sexual assault (as defined in IC 5-26.5-1-8) against the individual described under clause (A).

(7) "Victim advocate" has the meaning set forth in IC 35-37-6-3.5.

(8) "Victim service provider" has the meaning set forth in IC 35-37-6-5.

SECTION 95. IC 35-43-4-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. (a) As used in this chapter, "exert control over property" means to obtain, take, carry, drive, lead away, conceal, abandon, sell, convey, encumber, or possess property, or to secure, transfer, or extend a right to property.

(b) Under this chapter, a person's control over property of another person is "unauthorized" if it is exerted:

(1) without the other person's consent;

(2) in a manner or to an extent other than that to which the other person has consented;

(3) by transferring or encumbering other property while failing to disclose a lien, adverse claim, or other legal impediment to the enjoyment of that other property;

(4) by creating or confirming a false impression in the other person;

(5) by failing to correct a false impression that the person knows is influencing the other person, if the person stands in a relationship of special trust to the other person;

(6) by promising performance that the person knows will not be performed;

(7) by expressing an intention to damage the property or impair the rights of any other person; or

(8) by transferring or reproducing:

(A) recorded sounds; or

(B) a live performance;

~~without consent of the owner of the master recording or the live~~

~~performance, with intent to distribute the reproductions for a profit.~~

without consent of the owner of the master recording or the live performance, with intent to distribute the reproductions for a profit.

(c) As used in this chapter, "receiving" means acquiring possession or control of or title to property, or lending on the security of property.

SECTION 96. IC 35-44.1-3-1, AS AMENDED BY P.L.133-2020, SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 1. (a) A person who knowingly or intentionally:

(1) forcibly resists, obstructs, or interferes with a law enforcement officer or a person assisting the officer while the officer is lawfully engaged in the execution of the officer's duties;

(2) forcibly resists, obstructs, or interferes with the authorized service or execution of a civil or criminal process or order of a court; or

(3) flees from a law enforcement officer after the officer has, by visible or audible means, including operation of the law enforcement officer's siren or emergency lights, identified himself or herself and ordered the person to stop;

commits resisting law enforcement, a Class A misdemeanor, except as provided in subsection (c).

(b) A person who, having been denied entry by an emergency medical services provider or a law enforcement officer, knowingly or intentionally enters an area that is marked off with barrier tape or other physical barriers, commits interfering with public safety, a Class B misdemeanor, except as provided in subsection (c) or (k).

(c) The offense under subsection (a) or (b) is a:

(1) Level 6 felony if:

(A) the person uses a vehicle to commit the offense; or

(B) while committing the offense, the person draws or uses a deadly weapon, inflicts bodily injury on or otherwise causes bodily injury to another person, or operates a vehicle in a manner that creates a substantial risk of bodily injury to another person;

(2) Level 5 felony if, while committing the offense, the person operates a vehicle in a manner that causes serious bodily injury to another person;

(3) Level 3 felony if, while committing the offense, the person operates a vehicle in a manner that causes the death or catastrophic injury of another person; and

(4) Level 2 felony if, while committing any offense described in subsection (a), the person operates a vehicle in a manner that

causes the death or catastrophic injury of an emergency medical services provider or a law enforcement officer while the emergency medical services provider or law enforcement officer is engaged in the emergency medical services provider's or officer's official duties.

(d) The offense under subsection (a) is a Level 6 felony if, while committing an offense under:

(1) subsection (a)(1) or (a)(2), the person:

(A) creates a substantial risk of bodily injury to the person or another person; and

(B) has two (2) or more prior unrelated convictions under subsection (a); or

(2) subsection (a)(3), the person has two (2) or more prior unrelated convictions under subsection (a).

(e) If a person uses a vehicle to commit a felony offense under subsection (c)(1)(B), (c)(2), (c)(3), or (c)(4), as part of the criminal penalty imposed for the offense, the court shall impose a minimum executed sentence of at least:

(1) thirty (30) days, if the person does not have a prior unrelated conviction under this section;

(2) one hundred eighty (180) days, if the person has one (1) prior unrelated conviction under this section; or

(3) one (1) year, if the person has two (2) or more prior unrelated convictions under this section.

(f) Notwithstanding IC 35-50-2-2.2 and IC 35-50-3-1, the mandatory minimum sentence imposed under subsection (e) may not be suspended.

(g) If a person is convicted of an offense involving the use of a motor vehicle under:

(1) subsection (c)(1)(A), if the person exceeded the speed limit by at least twenty (20) miles per hour while committing the offense;

(2) subsection (c)(2); or

(3) subsection (c)(3);

the court may notify the bureau of motor vehicles to suspend or revoke the person's driver's license and all certificates of registration and license plates issued or registered in the person's name in accordance with ~~IC 9-30-4-6.1(b)(3)~~ **IC 9-30-4-6.1(b)** for the period described in IC 9-30-4-6.1(d)(1) or IC 9-30-4-6.1(d)(2). The court shall inform the bureau whether the person has been sentenced to a term of incarceration. At the time of conviction, the court may obtain the person's current driver's license and return the license to the bureau of motor vehicles.

(h) A person may not be charged or convicted of a crime under subsection (a)(3) if the law enforcement officer is a school resource officer acting in the officer's capacity as a school resource officer.

(i) A person who commits an offense described in subsection (c) commits a separate offense for each person whose bodily injury, serious bodily injury, catastrophic injury, or death is caused by a violation of subsection (c).

(j) A court may order terms of imprisonment imposed on a person convicted of more than one (1) offense described in subsection (c) to run consecutively. Consecutive terms of imprisonment imposed under this subsection are not subject to the sentencing restrictions set forth in IC 35-50-1-2(c) through IC 35-50-1-2(d).

(k) As used in this subsection, "family member" means a child, grandchild, parent, grandparent, or spouse of the person. It is a defense to a prosecution under subsection (b) that the person reasonably believed that the person's family member:

(1) was in the marked off area; and

(2) had suffered bodily injury or was at risk of suffering bodily injury;

if the person is not charged as a defendant in connection with the offense, if applicable, that caused the area to be secured by barrier tape or other physical barriers.

SECTION 97. IC 35-46-1-10, AS AMENDED BY P.L.49-2020, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10. (a) A person may not be charged with a violation under this section and a violation under IC 7.1-7-6-5.

(b) A person who knowingly:

(1) sells or distributes tobacco, an e-liquid, or an electronic cigarette to a person less than twenty-one (21) years of age; or

(2) purchases tobacco, an e-liquid, or an electronic cigarette for delivery to another person who is less than twenty-one (21) years of age;

commits a Class C infraction. For a sale to take place under this section, the buyer must pay the seller for the tobacco, ~~product, the~~ e-liquid, or ~~the~~ electronic cigarette.

(c) It is not a defense that the person to whom the tobacco, ~~the~~ e-liquid, or electronic cigarette was sold or distributed did not smoke, chew, inhale, or otherwise consume the tobacco, e-liquid, or ~~the~~ electronic cigarette.

(d) The following defenses are available to a person accused of selling or distributing tobacco, an e-liquid, or an electronic cigarette to a person who is less than twenty-one (21) years of age:

(1) The buyer or recipient produced a driver's license bearing the purchaser's or recipient's photograph, showing that the purchaser or recipient was of legal age to make the purchase.

(2) The buyer or recipient produced a photographic identification card issued under IC 9-24-16-1, or a similar card issued under the laws of another state or the federal government, showing that the purchaser or recipient was of legal age to make the purchase.

(3) The appearance of the purchaser or recipient was such that an ordinary prudent person would believe that the purchaser or recipient was not less than thirty (30) years of age.

(e) It is a defense that the accused person sold or delivered the tobacco, e-liquid, or electronic cigarette to a person who acted in the ordinary course of employment or a business concerning tobacco, an e-liquid, or electronic cigarettes including the following activities:

(1) Agriculture.

(2) Processing.

(3) Transporting.

(4) Wholesaling.

(5) Retailing.

(f) As used in this section, "distribute" means to give tobacco, an e-liquid, or an electronic cigarette to another person as a means of promoting, advertising, or marketing the tobacco, e-liquid, or electronic cigarette to the general public.

(g) Unless the person buys or receives tobacco, an e-liquid, or an electronic cigarette under the direction of a law enforcement officer as part of an enforcement action, a person who sells or distributes tobacco, an e-liquid, or an electronic cigarette is not liable for a violation of this section unless the person less than twenty-one (21) years of age who bought or received the tobacco, e-liquid, or electronic cigarette is issued a citation or summons under section 10.5 of this chapter.

(h) Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund (IC 7.1-6-2-6).

SECTION 98. IC 35-46-1-10.2, AS AMENDED BY P.L.49-2020, SECTION 31, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 10.2. (a) A person may not be charged with a violation under this section and a violation under IC 7.1-7-6-5.

(b) A retail establishment that sells or distributes tobacco, an e-liquid, or an electronic cigarette to a person less than twenty-one (21) years of age commits a Class C infraction. For a sale to take place under this section, the buyer must pay the retail establishment for the tobacco, ~~product, an~~ e-liquid, or electronic cigarette.

(c) Notwithstanding IC 34-28-5-4(c), a civil judgment for an infraction committed under this section must be imposed as follows:

(1) If the retail establishment at that specific business location has not been issued a citation or summons for a violation of this section in the previous one (1) year, a civil penalty of up to four hundred dollars ($400).

(2) If the retail establishment at that specific business location has had one (1) citation or summons issued for a violation of this section in the previous one (1) year, a civil penalty of up to eight hundred dollars ($800).

(3) If the retail establishment at that specific business location has had two (2) citations or summonses issued for a violation of this section in the previous one (1) year, a civil penalty of up to one thousand four hundred dollars ($1,400).

(4) If the retail establishment at that specific business location has had three (3) or more citations or summonses issued for a violation of this section in the previous one (1) year, a civil penalty of up to two thousand dollars ($2,000).

A retail establishment may not be issued a citation or summons for a violation of this section more than once every twenty-four (24) hours for each specific business location.

(d) It is not a defense that the person to whom the tobacco, ~~an~~ e-liquid, or electronic cigarette was sold or distributed did not smoke, chew, inhale, or otherwise consume the tobacco, e-liquid, or electronic cigarette.

(e) The following defenses are available to a retail establishment accused of selling or distributing tobacco, an e-liquid, or an electronic cigarette to a person who is less than twenty-one (21) years of age:

(1) The buyer or recipient produced a driver's license bearing the purchaser's or recipient's photograph showing that the purchaser or recipient was of legal age to make the purchase.

(2) The buyer or recipient produced a photographic identification card issued under IC 9-24-16-1 or a similar card issued under the laws of another state or the federal government showing that the purchaser or recipient was of legal age to make the purchase.

(3) The appearance of the purchaser or recipient was such that an ordinary prudent person would believe that the purchaser or recipient was not less than thirty (30) years of age.

(f) It is a defense that the accused retail establishment sold or delivered the tobacco, e-liquid, or electronic cigarette to a person who acted in the ordinary course of employment or a business concerning tobacco, an e-liquid, or electronic cigarettes for the following activities:

(1) Agriculture.
(2) Processing.
(3) Transporting.
(4) Wholesaling.
(5) Retailing.

(g) As used in this section, "distribute" means to give tobacco, an e-liquid, or an electronic cigarette to another person as a means of promoting, advertising, or marketing the tobacco or electronic cigarette to the general public.

(h) Unless a person buys or receives tobacco, an e-liquid, or an electronic cigarette under the direction of a law enforcement officer as part of an enforcement action, a retail establishment that sells or distributes tobacco, an e-liquid, or an electronic cigarette is not liable for a violation of this section unless the person less than twenty-one (21) years of age who bought or received the tobacco, ~~an~~ e-liquid, or electronic cigarette is issued a citation or summons under section 10.5 of this chapter.

(i) Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund (IC 7.1-6-2-6).

(j) A person who violates subsection (b) at least six (6) times in any one (1) year commits habitual illegal sale of tobacco, a Class B infraction.

SECTION 99. IC 35-52-23-20.5 IS REPEALED [EFFECTIVE JULY 1, 2021]. ~~Sec. 20.5. IC 23-16-12-7 defines a crime concerning false documents.~~

SECTION 100. IC 36-7-14.5-12.3, AS ADDED BY P.L.190-2005, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 12.3. (a) This section applies to a redevelopment commission in a county having a United States government military base that is scheduled for closing or is completely or partially inactive or closed.

(b) The county executive body may adopt an ordinance to elect to allow the authority for the county to exercise the powers described in section ~~11(5)~~ **11(a)(5)** of this chapter. An ordinance adopted under this section may also do any of the following:

(1) Establish or change the:
(A) number of members on the board of the authority; or
(B) name of the authority;
that would otherwise apply under this chapter.

(2) Provide for any other matter that is necessary or appropriate to carry out the powers described in section ~~11(5)~~ **11(a)(5)** or 12.5

of this chapter.

The county executive may amend or rescind an ordinance adopted under this section if the rights of holders of bonded indebtedness, leases, or other obligations (as defined under IC 5-1-3-1) of the authority are not adversely affected.

SECTION 101. IC 36-7-32-22, AS AMENDED BY P.L.158-2019, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 22. (a) The treasurer of state shall establish an incremental tax financing fund for each certified technology park designated under this chapter. The fund shall be administered by the treasurer of state. Money in the fund does not revert to the state general fund at the end of a state fiscal year.

(b) Subject to subsection (c), the following amounts shall be deposited during each state fiscal year in the incremental tax financing fund established for a certified technology park under subsection (a):

(1) The aggregate amount of state gross retail and use taxes that are remitted under IC 6-2.5 by businesses operating in the certified technology park, until the amount of state gross retail and use taxes deposited equals the gross retail incremental amount for the certified technology park.

(2) Except as provided in subdivision (3), the aggregate amount of the following taxes paid by employees employed in the certified technology park with respect to wages earned for work in the certified technology park, until the amount deposited equals the income tax incremental amount as defined in section 8.5(1) of this chapter:

(A) The adjusted gross income tax.

(B) The local income tax (IC 6-3.6).

(3) In the case of a certified technology park to which subsection (e) applies, the amount determined under subsection (e), if any.

(c) Except as provided in subsections (d) and (e), not more than a total of five million dollars ($5,000,000) may be deposited in a particular incremental tax financing fund for a certified technology park over the life of the certified technology park.

(d) Except as provided in subsection (e), in the case of a certified technology park that is operating under a written agreement entered into by two (2) or more redevelopment commissions, and subject to section 26(b)(4) of this chapter:

(1) not more than a total of five million dollars ($5,000,000) may be deposited over the life of the certified technology park in the incremental tax financing fund of each redevelopment commission participating in the operation of the certified

technology park; and

(2) the total amount that may be deposited in all incremental tax financing funds, over the life of the certified technology park, in aggregate, may not exceed the result of:

(A) five million dollars ($5,000,000); multiplied by

(B) the number of redevelopment commissions that have entered into a written agreement for the operation of the certified technology park.

(e) If a certified technology park maintains its certification under section 11(c) of this chapter and the limit on deposits under subsection (c) or (d) has been reached for a period, an additional annual deposit amount shall, if applicable, be deposited in the incremental tax financing fund for the certified technology park equal to the following:

(1) For a certified technology park to which subsection (c) applies, the lesser of:

~~(1)~~ **(A)** the income tax incremental amount as defined in section 8.5(2) of this chapter; or

~~(2)~~ **(B)** one hundred thousand dollars ($100,000).

(2) For a certified technology park to which subsection (d) applies, the lesser of:

~~(1)~~ **(A)** the aggregate income tax incremental amounts as defined in section 8.5(2) of this chapter attributable to each redevelopment commission that has entered into a written agreement for the operation of the certified technology park; or

~~(2)~~ **(B)** one hundred thousand dollars ($100,000) multiplied by the number of redevelopment commissions that have entered into a written agreement for the operation of the certified technology park.

(f) On or before the twentieth day of each month, all amounts held in the incremental tax financing fund established for a certified technology park shall be distributed to the redevelopment commission for deposit in the certified technology park fund established under section 23 of this chapter.

SECTION 102. IC 36-8-10.5-11, AS ADDED BY P.L.72-2020, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 11. (a) The education board must establish best practices to improve safety and health outcomes for full-time firefighters and volunteer firefighters not later than July 1, 2021.

(b) The best practices must include:

(1) a proactive health and safety risk management system consisting of a joint employer and employee governance structure

to oversee a continuous process of identification, evaluation, monitoring and controlling, and reporting of safety and health hazards in the workplace;

(2) ways to reduce firefighter risk of exposure to carcinogens; and

(3) ways to prevent or reduce the risk of injuries and illness with particular focus on causes of compensable worker's compensation or disability claims.

(c) The education board shall:

(1) review programs established by political subdivisions and volunteer fire departments implementing best practices under this section; and

(2) provide a political subdivision or volunteer fire department with a letter for submission to an insurance company for consideration in a premium or rate discount toward the purchase or procurement of worker's compensation insurance under IC 22-3-2-2 **or IC 36-8-12-10** that states that the political subdivision or volunteer fire department has implemented best practices under this section.

SECTION 103. [EFFECTIVE UPON PASSAGE] **(a) This act may be referred to as the "technical corrections bill of the 2021 general assembly".**

(b) The phrase "technical corrections bill of the 2021 general assembly" may be used in the lead-in line of an act other than this act to identify provisions added, amended, or repealed by this act that are also amended or repealed in the other act.

(c) This SECTION expires December 31, 2021.

SECTION 104. [EFFECTIVE UPON PASSAGE] **(a) This SECTION applies if a provision of the Indiana Code is:**

(1) added or amended by this act; and

(2) repealed by another act without recognizing the existence of the amendment made by this act by an appropriate reference in the lead-in line of the SECTION of the other act repealing the same provision of the Indiana Code.

(b) As used in this SECTION, "other act" refers to an act enacted in the 2021 session of the general assembly other than this act. "Another act" has a corresponding meaning.

(c) Except as provided in subsections (d) and (e), a provision repealed by another act shall be considered repealed, regardless of whether there is a difference in the effective date of the provision added or amended by this act and the provision repealed by the other act. Except as provided in subsection (d), the lawful compilers of the Indiana Code, in publishing the affected Indiana

Code provision, shall publish only the version of the Indiana Code provision that is repealed by the other act. The history line for an Indiana Code provision that is repealed by the other act must reference that act.

(d) This subsection applies if a provision described in subsection (a) that is added or amended by this act takes effect before the corresponding provision repeal in the other act. The lawful compilers of the Indiana Code, in publishing the provision added or amended in this act, shall publish that version of the provision and note that the provision is effective until the effective date of the corresponding provision repeal in the other act. On and after the effective date of the corresponding provision repeal in the other act, the provision repealed by the other act shall be considered repealed, regardless of whether there is a difference in the effective date of the provision added or amended by this act and the provision repealed by the other act. The lawful compilers of the Indiana Code, in publishing the affected Indiana Code provision, shall publish the version of the Indiana Code provision that is repealed by the other act, and shall note that this version of the provision is effective on the effective date of the repealed provision of the other act.

(e) If, during the same year, two (2) or more other acts repeal the same Indiana Code provision as the Indiana Code provision added or amended by this act, the lawful compilers of the Indiana Code, in publishing the Indiana Code provision, shall follow the principles set forth in this SECTION.

(f) This SECTION expires December 31, 2021.

SECTION 105. **An emergency is declared for this act.**

Speaker of the House of Representatives

President of the Senate

President Pro Tempore

Governor of the State of Indiana

Date: _____ Time: _____