



March 12, 2021

ENGROSSED HOUSE BILL No. 1225

DIGEST OF HB 1225 (Updated March 10, 2021 3:35 pm - DI 133)

Citations Affected: IC 12-23.

Synopsis: Opioid treatment programs. Requires an opioid treatment program to obtain prior authorization from the division of mental health and addiction (division) for patients receiving more than 14 days of opioid treatment medication from an opioid treatment program unless otherwise prescribed by the division. Allows the state opioid treatment authority (authority) to: (1) take certain remedial actions; and (2) impose a civil penalty of up to \$10,000; in response to certain violations concerning the operation of an opioid treatment program. Specifies that the authority may issue a civil penalty for each violation found by the authority. Requires the division to report certain findings to the general assembly not later than April 1 of each year. Requires certain information to be provided to the division for the purpose of completing specified reporting requirements.

Effective: July 1, 2021.

Vermilion, Clere, Davisson, Shackleford

(SENATE SPONSORS — CRIDER, CHARBONNEAU, BECKER, YODER)

January 14, 2021, read first time and referred to Committee on Public Health.
January 26, 2021, reported — Do Pass.
January 28, 2021, read second time, ordered engrossed. Engrossed.
February 1, 2021, read third time, passed. Yeas 96, nays 1.

SENATE ACTION

February 18, 2021, read first time and referred to Committee on Health and Provider Services.
March 11, 2021, reported favorably — Do Pass.

EH 1225—LS 6782/DI 123



March 12, 2021

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

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2020 Regular Session of the General Assembly.

ENGROSSED HOUSE BILL No. 1225

A BILL FOR AN ACT to amend the Indiana Code concerning human services.

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

1 SECTION 1. IC 12-23-18-5, AS AMENDED BY P.L.8-2016,
2 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2021]: Sec. 5. (a) The division shall adopt rules under
4 IC 4-22-2 to establish the following:
5 (1) Standards for operation of an opioid treatment program in
6 Indiana, including the following requirements:
7 (A) **Except as otherwise prescribed by the division**, an
8 opioid treatment program shall obtain prior authorization from
9 the division for any patient receiving more than ~~seven (7)~~
10 **fourteen (14)** days of opioid maintenance treatment
11 medications at one (1) time and the division may approve the
12 authorization only under the following circumstances:
13 (i) A physician licensed under IC 25-22.5 has issued an
14 order for the opioid treatment medication.
15 (ii) The patient has not tested positive under a drug test for
16 a drug for which the patient does not have a prescription for
17 a period of time set forth by the division.

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- 1 (iii) The opioid treatment program has determined that the
 2 benefit to the patient in receiving the take home opioid
 3 treatment medication outweighs the potential risk of
 4 diversion of the take home opioid treatment medication.
 5 (B) Minimum requirements for a licensed physician's regular:
 6 (i) physical presence in the opioid treatment facility; and
 7 (ii) physical evaluation and progress evaluation of each
 8 opioid treatment program patient.
 9 (C) Minimum staffing requirements by licensed and
 10 unlicensed personnel.
 11 (D) Clinical standards for the appropriate tapering of a patient
 12 on and off of an opioid treatment medication.
 13 (2) A requirement that, not later than February 28 of each year, a
 14 current diversion control plan that meets the requirements of 21
 15 CFR Part 290 and 42 CFR Part 8 be submitted for each opioid
 16 treatment facility.
 17 (3) Fees to be paid by an opioid treatment program for deposit in
 18 the fund for annual certification under this chapter as described
 19 in section 3 of this chapter.

20 The fees established under this subsection must be sufficient to pay the
 21 cost of implementing this chapter.

22 (b) The division shall conduct an annual onsite visit of each opioid
 23 treatment program facility to assess compliance with this chapter.

24 (c) Not later than April 1 of each year, the division shall report to
 25 the general assembly in electronic format under IC 5-14-6 the
 26 **following information:**

27 **(1) The number of prior authorizations that were approved under**
 28 **subsection (a)(1)(A) in the previous year and the:**

29 **(A) time frame for each approval; and**

30 **(B) duration of each approved treatment.**

31 **(2) The number of authorizations under subdivision (1) that**
 32 **were, in the previous year, revoked due to a patient's violation**
 33 **of an applicable term or condition.**

34 **(3) The number of each of the actions taken under section**
 35 **5.8(a) of this chapter in the previous year.**

36 **(4) The number and type of violations assessed for each action**
 37 **specified in section 5.8(a) of this chapter in the previous year.**

38 **(d) A facility shall report, in a manner prescribed by the**
 39 **division, all information required by the division to complete the**
 40 **report described in subsection (c).**

41 SECTION 2. IC 12-23-18-5.8, AS ADDED BY P.L.116-2008,
 42 SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



- 1 JULY 1, 2021]: Sec. 5.8. (a) The ~~director of the division~~ **state opioid**
2 **treatment authority** may take any of the following actions based on
3 any grounds described in subsection (b):
4 (1) Issue a letter of correction.
5 (2) Reinspect an opioid treatment program facility.
6 (3) Deny renewal of, or revoke, any of the following:
7 (A) Specific approval to operate as an opioid treatment
8 program.
9 (B) Certification of an opioid treatment facility.
10 (4) Impose a civil penalty in an amount not to exceed ten
11 thousand dollars (\$10,000) **per violation**.
12 (b) The ~~director of the division~~ **state opioid treatment authority**
13 may take action under subsection (a) based on any of the following
14 grounds:
15 (1) Violation of this chapter or rules adopted under this chapter.
16 (2) Permitting, aiding, or abetting the commission of any illegal
17 act in an opioid treatment program facility.
18 (3) Conduct or practice found by the ~~director~~ **state opioid**
19 **treatment authority** to be detrimental to the welfare of an opioid
20 treatment program patient.
21 (c) IC 4-21.5 applies to an action under this section.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1225, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

(Reference is to HB 1225 as introduced.)

BARRETT

Committee Vote: Yeas 13, Nays 0

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1225, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS.

(Reference is to HB 1225 as printed January 26, 2021.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 11, Nays 0

