



DIGEST OF HB 1290 (Updated March 3, 2014 5:28 pm - DI 116)

Citations Affected: IC 16-18; IC 20-30; IC 20-34; IC 21-18; IC 25-1.

Synopsis: Health of student athletes. Adds athletic trainers to the definition of "health care provider" for purposes of laws concerning hospitals and public health measures. Requires the department of education to disseminate guidelines, information sheets, and forms to school corporations, charter schools, public schools, and accredited nonpublic schools to inform and educate coaches, student athletes, and parents and legal guardians of student athletes of the nature and risk of sudden cardiac arrest. Requires that a form acknowledging receipt of the information sheet must be returned to the student athlete's coach each year before beginning practice for an athletic activity. Requires that a student athlete who is suspected of experiencing a symptom of (Continued next page)

Effective: July 1, 2014.

Bacon, Dermody, McNamara, Pelath, Porter

(SENATE SPONSORS — KRUSE, BECKER, BREAUX, ARNOLD J, BRODEN, SKINNER)

January 15, 2014, read first time and referred to Committee on Education. January 28, 2014, amended, reported — Do Pass.
January 30, 2014, read second time, amended, ordered engrossed.
January 31, 2014, engrossed.
February 3, 2014, read third time, passed. Yeas 87, nays 9.

SENATE ACTION

February 10, 2014, read first time and referred to Committee on Education and Career Development.
February 27, 2014, reported favorably — Do Pass.
March 3, 2014, read second time, amended, ordered engrossed.



Digest Continued

sudden cardiac arrest must be removed from the athletic activity at the time the symptom is identified. Provides that the student athlete may not return to practice and play until the student athlete's parent or legal guardian has been informed and the parent or legal guardian has provided permission for the student to return to practice and play. Requires the commission on higher education to disseminate guidelines, information sheets, and forms to a postsecondary educational institution's athletic department to inform and educate coaches and student athletes of the nature and risk of sudden cardiac arrest. Requires that a form acknowledging receipt of the information must be returned to the student athlete's coach each year before beginning practice for an athletic activity. Requires that a student athlete who is suspected of experiencing a symptom of sudden cardiac arrest must be removed from the athletic activity at the time the symptom is identified. Provides that the student athlete may not return to practice and play until the student athlete has received permission to return to practice and play from the team's or postsecondary educational institution's athletic trainer or physician. Requires an applicant for an athletic trainer license to submit to a national criminal history background check. Provides that the athletic trainers board may conduct a random audit and require an individual seeking a renewal of an athletic trainer license to submit to a national criminal history background check. Requires that each school corporation and accredited nonpublic school shall include in the school corporation's or accredited nonpublic school's high school health education curriculum instruction in cardiopulmonary resuscitation and use of an automated external defibrillator for its students. Provides that a school administrator may waive the requirement that a student receive instruction if the student has a disability or is physically unable to perform the psychomotor skill component of the instruction. Provides that the department of education may grant schools a waiver of the psychomotor skill requirement.



Second Regular Session 118th General Assembly (2014)

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 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

ENGROSSED HOUSE BILL No. 1290

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

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

1	SECTION 1. IC 16-18-2-163, AS AMENDED BY P.L.232-2013,
2	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 163. (a) "Health care provider", for purposes of
4	IC 16-21 and IC 16-41, means any of the following:
5	(1) An individual, a partnership, a corporation, a professional
6	corporation, a facility, or an institution licensed or legally
7	authorized by this state to provide health care or professional
8	services as a licensed physician, a psychiatric hospital, a hospital,
9	a health facility, an emergency ambulance service (IC 16-31-3),
10	a dentist, a registered or licensed practical nurse, a midwife, an
11	optometrist, a pharmacist, a podiatrist, a chiropractor, a physical
12	therapist, a respiratory care practitioner, an occupational therapist,
13	a psychologist, a paramedic, an emergency medical technician, an
14	advanced emergency medical technician, an athletic trainer, or



1	a person who is an officer, employee, or agent of the individual,
2	partnership, corporation, professional corporation, facility, or
3	institution acting in the course and scope of the person's
4	employment.
5	(2) A college, university, or junior college that provides health
6	care to a student, a faculty member, or an employee, and the
7	governing board or a person who is an officer, employee, or agent
8	of the college, university, or junior college acting in the course
9	and scope of the person's employment.
10	(3) A blood bank, community mental health center, community
11	mental retardation center, community health center, or migrant
12	health center.
13	(4) A home health agency (as defined in IC 16-27-1-2).
14	(5) A health maintenance organization (as defined in
15	IC 27-13-1-19).
16	(6) A health care organization whose members, shareholders, or
17	partners are health care providers under subdivision (1).
18	(7) A corporation, partnership, or professional corporation not
19	otherwise qualified under this subsection that:
20	(A) provides health care as one (1) of the corporation's.
21	partnership's, or professional corporation's functions;
22	(B) is organized or registered under state law; and
23	(C) is determined to be eligible for coverage as a health care
24	provider under IC 34-18 for the corporation's, partnership's, or
25	professional corporation's health care function.
26	Coverage for a health care provider qualified under this subdivision is
27	limited to the health care provider's health care functions and does not
28	extend to other causes of action.
29	(b) "Health care provider", for purposes of IC 16-35, has the
30	meaning set forth in subsection (a). However, for purposes of IC 16-35.
31	the term also includes a health facility (as defined in section 167 of this
32	chapter).
33	(c) "Health care provider", for purposes of IC 16-36-5 and
34	IC 16-36-6, means an individual licensed or authorized by this state to
35	provide health care or professional services as:
36	(1) a licensed physician;
37	(2) a registered nurse;
38	(3) a licensed practical nurse;
39	(4) an advanced practice nurse;
40	(5) a certified nurse midwife;
41	(6) a paramedic;



(7) an emergency medical technician;

1	(8) an advanced emergency medical technician; or
2	(9) an emergency medical responder, as defined by section 109.8
3	of this chapter.
4	The term includes an individual who is an employee or agent of a
5	health care provider acting in the course and scope of the individual's
6	employment.
7	(d) "Health care provider", for purposes of IC 16-40-4, means any
8	of the following:
9	(1) An individual, a partnership, a corporation, a professional
10	corporation, a facility, or an institution licensed or authorized by
11	the state to provide health care or professional services as a
12	licensed physician, a psychiatric hospital, a hospital, a health
13	facility, an emergency ambulance service (IC 16-31-3), an
14	ambulatory outpatient surgical center, a dentist, an optometrist, a
15	pharmacist, a podiatrist, a chiropractor, a psychologist, or a
16	person who is an officer, employee, or agent of the individual,
17	partnership, corporation, professional corporation, facility, or
18	institution acting in the course and scope of the person's
19	employment.
20	(2) A blood bank, laboratory, community mental health center,
21	community mental retardation center, community health center,
22	or migrant health center.
23	(3) A home health agency (as defined in IC 16-27-1-2).
24	(4) A health maintenance organization (as defined in
25	IC 27-13-1-19).
26	(5) A health care organization whose members, shareholders, or
27	partners are health care providers under subdivision (1).
28	(6) A corporation, partnership, or professional corporation not
29	otherwise specified in this subsection that:
30	(A) provides health care as one (1) of the corporation's,
31	partnership's, or professional corporation's functions;
32	(B) is organized or registered under state law; and
33	(C) is determined to be eligible for coverage as a health care
34	provider under IC 34-18 for the corporation's, partnership's, or
35	professional corporation's health care function.
36	(7) A person that is designated to maintain the records of a person
37	described in subdivisions (1) through (6).
38	(e) "Health care provider", for purposes of IC 16-45-4, has the
39	meaning set forth in 47 CFR 54.601(a).
40	SECTION 2. IC 20-30-5-20 IS ADDED TO THE INDIANA CODE
41	AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
42	1, 2014]: Sec. 20. (a) As used in this section, "psychomotor skills"



means skills	using hands	s on practi	ce to suppo	rt cognitive	learning.

- (b) Except as provided in subsection (e), each school corporation and accredited nonpublic school shall include in the school corporation's or accredited nonpublic school's high school health education curriculum instruction in cardiopulmonary resuscitation and use of an automated external defibrillator for its students. The instruction must incorporate the psychomotor skills necessary to perform cardiopulmonary resuscitation and use an automated external defibrillator and must include either of the following:
 - (1) An instructional program developed by the American Heart Association or the American Red Cross.
 - (2) An instructional program that is nationally recognized and is based on the most current national evidence based emergency cardiovascular care guidelines for cardiopulmonary resuscitation and the use of an automated external defibrillator.
- (c) A school corporation or an accredited nonpublic school may offer the instruction required in subsection (b) or may arrange for the instruction to be provided by available community based providers. The instruction is not required to be provided by a teacher. If instruction is provided by a teacher, the teacher is not required to be a certified trainer of cardiopulmonary resuscitation.
- (d) This section shall not be construed to require a student to become certified in cardiopulmonary resuscitation and the use of an automated external defibrillator. However, if a school corporation or accredited nonpublic school chooses to offer a course that results in certification being earned, the course must be taught by an instructor authorized to provide the instruction by the American Heart Association, the American Red Cross, or a similar nationally recognized association.
- (e) A school administrator may waive the requirement that a student receive instruction under subsection (b) if the student has a disability or is physically unable to perform the psychomotor skill component of the instruction required under subsection (b).
- (f) If a school is unable to comply with the psychomotor skill component of the instruction required under subsection (b), the governing body may submit a request to the state superintendent to waive the psychomotor skill component. The state superintendent shall take action on the waiver request within thirty (30) days of receiving the request for a waiver. A waiver request must:
 - (1) be in writing;



1	(2) include the reason or reasons that necessitated the waiver
2	request;
3	(3) indicate the extent to which the school attempted to
4	comply with the requirements under subsection (b); and
5	(4) be submitted each year for the school year the school
6	requests the waiver.
7	SECTION 3. IC 20-34-8 IS ADDED TO THE INDIANA CODE AS
8	A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
9	1, 2014]:
10	Chapter 8. Student Athletes: Sudden Cardiac Arrest
11	Sec. 1. As used in this chapter, "association" means an
12	organization that conducts, organizes, sanctions, or sponsors
13	interscholastic athletic events as the organization's primary
14	purpose.
15	Sec. 2. As used in this chapter, "athletic activity" includes the
16	following:
17	(1) An athletic contest or competition conducted between or
18	among schools.
19	(2) An intramural athletic contest or competition that is
20	sponsored by or associated with a school.
21	(3) Competitive and noncompetitive cheerleading that is
22	sponsored by or associated with a school.
23	Sec. 3. As used in this chapter, "school" refers to a public school
24	and an accredited nonpublic school.
25	Sec. 4. This chapter does not require information to be provided
26	to or consent to be received from the parent or legal guardian of a
27	student athlete if the student athlete is:
28	(1) at least eighteen (18) years of age; or
29	(2) an emancipated minor.
30	Sec. 5. (a) Before July 1, 2015, the department shall disseminate
31	guidelines, information sheets, and forms to each accredited
32	nonpublic school, charter school, and each school corporation for
33	distribution to schools to inform and educate coaches, student
34	athletes, and parents and legal guardians of student athletes of the
35	nature and risk of sudden cardiac arrest to student athletes.
36	(b) The department:
37	(1) may consult with an association, medical professionals,
38	and others with expertise in diagnosing and treating sudden
39	cardiac arrest; and
40	(2) may request the assistance of an association in
41	disseminating the guidelines, information sheets, and forms



required under subsection (a).

 $(c) \, The \, department \, may \, disseminate \, the \, guidelines, information \,$

2	sheets, and forms required under this section in an electronic
3	format.
4	Sec. 6. Each year, before beginning practice for an athletic
5	activity, a student athlete and the student athlete's parent or legal
6	guardian:
7	(1) must be given the information sheet and form described in
8	section 5 of this chapter; and
9	(2) shall sign and return the form acknowledging the receipt
10	of the information sheet to the student athlete's coach.
11	The coach shall maintain a file of the completed forms.
12	Sec. 7. If a student athlete is suspected of experiencing a
13	symptom of sudden cardiac arrest in a practice for an athletic
14	activity or in an athletic activity:
15	(1) the student athlete shall be removed from practice or play
16	at the time that the symptom is identified; and
17	(2) the parent or legal guardian of the student athlete shall be
18	notified of the student athlete's symptoms.
19	Sec. 8. A student athlete who has been removed from practice
20	or play under section 7 of this chapter may not return to practice
21	or play until the coach has received verbal permission from a
22	parent or legal guardian of the student athlete for the student
23	athlete to return to practice and play. Within twenty-four (24)
24	hours after giving verbal permission for the student athlete to
25	return to practice and play, the parent or legal guardian must
26	provide the coach with a written statement that the student athlete
27	has permission to return to practice and play.
28	SECTION 4. IC 21-18-13 IS ADDED TO THE INDIANA CODE
29	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
30	JULY 1, 2014]:
31	Chapter 13. Student Athletes: Sudden Cardiac Arrest
32	Sec. 1. This chapter applies to public and private postsecondary
33	educational institutions in Indiana that offer athletic activities.
34	Sec. 2. As used in this chapter, "association" means an
35	organization that conducts, organizes, sanctions, or sponsors
36	interscholastic athletic events as the organization's primary
37	purpose.
38	Sec. 3. As used in this chapter, "athletic activity" includes the
39	following:
40	(1) An athletic contest or competition conducted between or
41	among postsecondary educational institutions.
42	(2) An intramural athletic contest or competition that is



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1	sponsored by or associated with a postsecondary educational
2	institution.
3	(3) Competitive and noncompetitive cheerleading that is
4	sponsored by or associated with a postsecondary educational
5	institution.
6	Sec. 4. (a) Before July 1, 2015, the commission shall disseminate
7	guidelines, information sheets, and forms to the athletic
8	department of each postsecondary educational institution to inform
9	and educate coaches and student athletes of the nature and risk of
10	sudden cardiac arrest to student athletes.
11	(b) The commission:
12	(1) may consult with an association, medical professionals,
13	and others with expertise in diagnosing and treating sudden
14	cardiac arrest; and
15	(2) may request the assistance of an association in
16	disseminating the guidelines, information sheets, and forms
17	required under subsection (a).
18	(c) The commission may disseminate the guidelines, information
19	sheets, and forms required under this section in an electronic
20	format.
21	Sec. 5. Each year, before beginning practice for an athletic
22	activity, a student athlete:
23	(1) must be given the information sheet and form described in
24	section 4 of this chapter; and
25	(2) shall sign and return the form acknowledging the receipt
26	of the information sheet to the student athlete's coach.
27	The coach shall maintain a file of the completed forms.
28	Sec. 6. If a student athlete is suspected of experiencing a
29	symptom of sudden cardiac arrest in a practice for an athletic
30	activity or in an athletic activity:
31	(1) the student athlete shall be removed from practice or play
32	at the time that the symptom is identified; and
33	(2) an athletic trainer or a physician associated with the team
34	or postsecondary educational institution shall be notified of
35	the student athlete's symptoms.
36	Sec. 7. A student athlete who has been removed from practice
37	or play under section 6 of this chapter may not return to practice
38	and play until the coach has received verbal permission from an
39	athletic trainer or a physician that the student athlete may return
40	to practice and play. Within twenty-four (24) hours after giving
41	verbal permission for the student athlete to return to practice and

play, the athletic trainer or physician must provide the coach with



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1	a written statement that the student athlete has permission to
2	return to practice and play.
3	SECTION 5. IC 25-1-1.1-4, AS AMENDED BY P.L.232-2013,
4	SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
5	JULY 1, 2014]: Sec. 4. (a) This section applies to an individual who is
6	applying for, or will be applying for, an initial license or an initial
7	certificate under one (1) of the following:
8	(1) IC 25-2.5 (acupuncturists).
9	(2) IC 25-5.1 (athletic trainers).
10	(2) (3) IC 25-10 (chiropractors).
11	(3) (4) IC 25-13 (dental hygienists).
12	(4) (5) IC 25-14 (dentists).
13	(5) (6) IC 25-14.5 (dietitians).
14	(6) (7) IC 25-17.3 (genetic counselors).
15	(7) (8) IC 25-19 (health facility and residential care facility
16	administrators).
17	(8) (9) IC 25-21.8 (massage therapists).
18	(9) (10) IC 25-22.5 (physicians).
19	(10) (11) IC 25-23 (nurses).
20	(11) (12) IC 25-23.4 (certified direct entry midwives).
21	(12) (13) IC 25-23.5 (occupational therapists).
22	(13) (14) IC 25-23.6 (social workers, marriage and family
23	therapists, and counselors).
24	(14) (15) IC 25-24 (optometrists).
25	(15) (16) IC 25-26 (pharmacists).
26	(16) (17) IC 25-27 (physical therapists).
27	(17) (18) IC 25-27.5 (physician assistants).
28	(18) (19) IC 25-29 (podiatrists).
29	(19) (20) IC 25-33 (psychologists).
30	(20) (21) IC 25-34.5 (respiratory care practitioners).
31	(21) (22) IC 25-35.6 (speech pathologists and audiologists).
32	(22) (23) IC 25-38.1 (veterinarians).
33	(b) As used in this chapter, "national criminal history background
34	check" means the criminal history record system maintained by the
35	Federal Bureau of Investigation based on fingerprint identification or
36	any other method of positive identification.
37	(c) An individual applying for an initial license or initial certificate
38	specified in subsection (a) shall submit to a national criminal history
39	background check at the cost of the individual.
40	(d) The state police department shall release the results of a national

criminal history background check conducted under this section to the



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Indiana professional licensing agency.

1	(e) A board, a commission, or a committee may conduct a random
2	audit and require an individual seeking a renewal of a license or a
3	certificate specified in subsection (a) to submit to a national criminal
4	history background check at the cost of the individual.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Education, to which was referred House Bill 1290, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 3, between lines 39 and 40, begin a new paragraph and insert: "SECTION 2. IC 20-30-5-20 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 20. (a)** As used in this section, "psychomotor skills" means skills using hands on practice to support cognitive learning.

- (b) Except as provided in subsection (e), each school corporation and accredited nonpublic school shall include in the school corporation's or accredited nonpublic school's high school health education curriculum instruction in cardiopulmonary resuscitation and use of an automated external defibrillator for its students. The instruction must incorporate the psychomotor skills necessary to perform cardiopulmonary resuscitation and use an automated external defibrillator and must include either of the following:
 - (1) An instructional program developed by the American Heart Association or the American Red Cross.
 - (2) An instructional program that is nationally recognized and is based on the most current national evidence based emergency cardiovascular care guidelines for cardiopulmonary resuscitation and the use of an automated external defibrillator.
- (c) A school corporation or an accredited nonpublic school may offer the instruction required in subsection (b) or may arrange for the instruction to be provided by available community based providers. The instruction is not required to be provided by a teacher. If instruction is provided by a teacher, the teacher is not required to be a certified trainer of cardiopulmonary resuscitation.
- (d) This section shall not be construed to require a student to become certified in cardiopulmonary resuscitation and the use of an automated external defibrillator. However, if a school corporation or accredited nonpublic school chooses to offer a course that results in certification being earned, the course must be taught by an instructor authorized to provide the instruction by the American Heart Association, the American Red Cross, or a similar nationally recognized association.
- (e) A school administrator may waive the requirement that a student receive instruction under subsection (b) if the student has a disability or is physically unable to perform the psychomotor



skill component of the instruction required under subsection (b).

(f) Except as provided in subsection (e), a student shall receive the instruction required under subsection (b) at least once before graduation."

Page 4, line 15, after "and" insert "an accredited".

Page 4, line 22, after "each" insert "accredited".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1290 as introduced.)

BEHNING, Chair

Committee Vote: yeas 11, nays 1.

HOUSE MOTION

Mr. Speaker: I move that House Bill 1290 be amended to read as follows:

Page 6, line 2, delete "arrest, including fainting, difficulty" and insert "arrest".

Page 6, line 3, delete "breathing, chest pains, dizziness, or an abnormal racing heart,".

Page 7, line 19, delete "arrest, including fainting, difficulty" and insert "arrest".

Page 7, line 20, delete "breathing, chest pains, dizziness, or an abnormal racing heart,".

(Reference is to HB 1290 as printed January 28, 2014.)

BACON



COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred House Bill No. 1290, 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 1290 as printed January 31, 2014.)

Committee Vote: Yeas 8, Nays 3

Senator Kruse, Chairperson

SENATE MOTION

Madam President: I move that Engrossed House Bill 1290 be amended to read as follows:

Page 4, delete lines 35 through 37, begin a new paragraph and insert:

- "(f) If a school is unable to comply with the psychomotor skill component of the instruction required under subsection (b), the governing body may submit a request to the state superintendent to waive the psychomotor skill component. The state superintendent shall take action on the waiver request within thirty (30) days of receiving the request for a waiver. A waiver request must:
 - (1) be in writing;
 - (2) include the reason or reasons that necessitated the waiver request;
 - (3) indicate the extent to which the school attempted to comply with the requirements under subsection (b); and
 - (4) be submitted each year for the school year the school requests the waiver.".

(Reference is to EHB 1290 as printed February 28, 2014.)

LEISING

