



DIGEST OF HB 1542 (Updated April 15, 2019 8:23 pm - DI 133)

Citations Affected: IC 12-8; IC 12-15; IC 25-23.6; noncode.

Synopsis: Mental health and addiction services. Requires that the office of the secretary of family and social services prepare and submit a report that: (1) identifies certain administrative and reporting requirements that are unnecessary or overly burdensome; and (2) makes recommendations. Provides that a managed care organization may not require a licensed psychiatrist to be certified by the American Board of Psychiatry and Neurology for purposes of credentialing or contracting with the psychiatrist while the psychiatrist is practicing at a community mental health center. Requires the behavioral health and human services licensing board to meet monthly. Urges the legislative council to study the topic of whether behavior analysts should be licensed rather than certified in Indiana. Requires the office of Medicaid policy and planning to collaborate with the department of (Continued next page)

Effective: Upon passage; July 1, 2019.

Kirchhofer, Shackleford, Judy, Klinker

(SENATE SPONSORS — CRIDER, CHARBONNEAU, RANDOLPH LONNIE M)

January 17, 2019, read first time and referred to Committee on Public Health. January 31, 2019, amended, reported — Do Pass. February 4, 2019, read second time, ordered engrossed. February 5, 2019, engrossed. February 7, 2019, read third time, passed. Yeas 95, nays 1.

SENATE ACTION

March 4, 2019, read first time and referred to Committee on Health and Provider Services.

April 4, 2019, amended, reported favorably — Do Pass; reassigned to Committee on Appropriations.

April 11, 2019, amended, reported favorably — Do Pass.

April 15, 2019, read second time, amended, ordered engrossed.

EH 1542—LS 7497/DI 77



Digest Continued

insurance and report certain health care expenditure and cost information and recommendations to the legislative council concerning Medicaid. Requires the division of mental health and addiction, with the participation of the criminal justice institute, to provide an executive summary to the legislative council (and, to the extent possible, the standing committees concerning health) concerning the current health payment system and the legal system as each relates to mental health and addiction treatment services provided to individuals against whom criminal charges have been filed or who are incarcerated.



First Regular Session of the 121st General Assembly (2019)

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 2018 Regular and Special Session of the General Assembly.

ENGROSSED HOUSE BILL No. 1542

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:

SECTION 1. IC 12-8-1.5-17.5 IS ADDED TO THE INDIANA
CODE AS A NEW SECTION TO READ AS FOLLOWS
[EFFECTIVE JULY 1, 2019]: Sec. 17.5. (a) Before October 1, 2019,
the office of the secretary of family and social services shall
prepare and submit a report as described in subsection (b) to the
legislative council in an electronic format under IC 5-14-6.
(b) The office of the secretary shall conduct a comprehensive
study of the health programs that the office of the secretary
administers or oversees, including programs administered by
managed care programs under IC 12-15-12 and programs
contracted with the office of Medicaid policy and planning. The
report must:
(1) identify administrative and reporting requirements by
health providers under contract with the office of the
secretary that are unnecessary or overly burdensome; and
(2) include recommendations for reductions in administrative
burdens related to the administration and oversight described



1	in this subsection.
2	(c) This section expires July 1, 2020.
3	SECTION 2. IC 12-15-12-23 IS ADDED TO THE INDIANA
4	CODE AS A NEW SECTION TO READ AS FOLLOWS
5	[EFFECTIVE JULY 1, 2019]: Sec. 23. A managed care organization
6	may not require a psychiatrist who is licensed under IC 25-22.5 to
7	be certified by the American Board of Psychiatry and Neurology
8	for purposes of credentialing or contracting with the psychiatrist
9	while the psychiatrist is practicing at a community mental health
10	center.
11	SECTION 3. IC 25-23.6-2-6 IS AMENDED TO READ AS
12	FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 6. The board shall meet
13	at least one (1) time each year. monthly.
14	SECTION 4. [EFFECTIVE UPON PASSAGE] (a) The legislative
15	council is urged to assign to an appropriate interim study
16	committee, for study during the 2019 interim of the general
17	assembly, the topic of whether behavior analysts and assistant
18	behavior analysts should be licensed rather than certified in
19	Indiana.
20	(b) If the legislative council assigns the topic under subsection
21	(a), the study must include consideration of the following:
22	(1) The benefits to a behavior analyst or assistant behavior
23	analyst in changing from certification to licensure.
24	(2) The role of a nonstate entity in the testing and licensure of
25	a behavior analyst or assistant behavior analyst.
26	(3) Whether a separate board within the professional licensing
27	agency would be necessary in the licensure.
28	(c) If the legislative council makes the assignment described in
29	subsection (a), the interim study committee shall, not later than
30	November 1, 2019, report the results of the study and any
31	recommendations for legislation to the legislative council in an
32	electronic format under IC 5-14-6.
33	(d) This SECTION expires January 1, 2020.
34	SECTION 5. [EFFECTIVE JULY 1, 2019] (a) As used in this
35	SECTION, "Medicaid" means the Medicaid program under
36	IC 12-15.
37	(b) As used in this SECTION, "office" refers to the office of
38	Medicaid policy and planning.
39	(c) Not later than July 1, 2020, the office, in collaboration with
40	the department of insurance, shall do the following:

(1) Report to the legislative council, in an electronic format

under IC 5-14-6, the following information with respect to



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1	Medicaid:
2	(A) Health care expenditures by major categories for the
3	most recent five (5) years for which the information is
4	available.
5	(B) Key cost drivers and trends.
6	(2) Recommend, in the report under subdivision (1), any
7	legislation and pilot opportunities for a value based health
8	care system to reduce health care costs and enhance price
9	transparency and outcomes, including for long term care.
0	(d) This SECTION expires January 1, 2021.
l 1	SECTION 6. [EFFECTIVE JULY 1, 2019] (a) As used in this
12	SECTION, "division" refers to the division of mental health and
13	addiction established by IC 12-21-1-1.
14	(b) The division, with the participation of the criminal justice
15	institute established by IC 5-2-6-3, shall provide an executive
16	summary of the current health payment system and the legal
17	system as each relate to the provision of mental health and
18	addiction treatment services to individuals against whom criminal
19	charges are filed or who are incarcerated.
20	(c) The division shall, not later than December 1, 2020, report:
21	(1) to the legislative council in an electronic format under
22	IC 5-14-6; and
23	(2) to the extent possible, the house and senate standing
24	committees concerning health;
25	the results of the review conducted under this SECTION, including
26	any recommendations for legislation.
27	(d) This SECTION expires January 1, 2021.
28	SECTION 7. An emergency is declared for this act.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1542, 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 2, delete lines 3 through 42.

Page 3, delete lines 1 through 5.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1542 as introduced.)

KIRCHHOFER

Committee Vote: yeas 12, nays 0.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1542, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, line 1, delete "IC 12-8-1.5-19" and insert "IC 12-8-1.5-17.5".

Page 1, line 3, delete "19." and insert "17.5.".

Page 2, after line 29, begin a new paragraph and insert:

"SECTION 5. [EFFECTIVE UPON PASSAGE] (a) The legislative council is urged to assign to an appropriate interim study committee, for study during the 2019 interim of the general assembly, the topic of whether behavior analysts and assistant behavior analysts should be licensed rather than certified in Indiana.

- (b) If the legislative council assigns the topic under subsection (a), the study must include consideration of the following:
 - (1) The benefits to a behavior analyst or assistant behavior analyst in changing from certification to licensure.
 - (2) The role of a nonstate entity in the testing and licensure of a behavior analyst or assistant behavior analyst.
 - (3) Whether a separate board within the professional licensing



agency would be necessary in the licensure.

- (c) If the legislative council makes the assignment described in subsection (a), the interim study committee shall, not later than November 1, 2019, report the results of the study and any recommendations for legislation to the legislative council in an electronic format under IC 5-14-6.
 - (d) This SECTION expires January 1, 2020.

SECTION 6. An emergency is declared for this act.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass and be reassigned to the Senate Committee on Appropriations.

(Reference is to HB 1542 as printed February 1, 2019.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 8, Nays 0.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred House Bill No. 1542, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 2, delete lines 11 through 26.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to EHB 1542 as printed April 5, 2019.)

MISHLER, Chairperson

Committee Vote: Yeas 11, Nays 0.



SENATE MOTION

Madam President: I move that Engrossed House Bill 1542 be amended to read as follows:

Page 2, between lines 33 and 34, begin a new paragraph and insert: "SECTION 5. [EFFECTIVE JULY 1, 2019] (a) As used in this SECTION, "Medicaid" means the Medicaid program under IC 12-15.

- (b) As used in this SECTION, "office" refers to the office of Medicaid policy and planning.
- (c) Not later than July 1, 2020, the office, in collaboration with the department of insurance, shall do the following:
 - (1) Report to the legislative council, in an electronic format under IC 5-14-6, the following information with respect to Medicaid:
 - (A) Health care expenditures by major categories for the most recent five (5) years for which the information is available.
 - (B) Key cost drivers and trends.
 - (2) Recommend, in the report under subdivision (1), any legislation and pilot opportunities for a value based health care system to reduce health care costs and enhance price transparency and outcomes, including for long term care.
 - (d) This SECTION expires January 1, 2021.

SECTION 6. [EFFECTIVE JULY 1, 2019] (a) As used in this SECTION, "division" refers to the division of mental health and addiction established by IC 12-21-1-1.

- (b) The division, with the participation of the criminal justice institute established by IC 5-2-6-3, shall provide an executive summary of the current health payment system and the legal system as each relate to the provision of mental health and addiction treatment services to individuals against whom criminal charges are filed or who are incarcerated.
 - (c) The division shall, not later than December 1, 2020, report:
 - (1) to the legislative council in an electronic format under IC 5-14-6; and
 - (2) to the extent possible, the house and senate STANDING committees concerning health;



the results of the review conducted under this SECTION, including any recommendations for legislation.

(d) This SECTION expires January 1, 2021.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1542 as printed April 12, 2019.)

SPARTZ

