

January 24, 2014

SENATE BILL No. 139

DIGEST OF SB 139 (Updated January 22, 2014 1:44 pm - DI 104)

Citations Affected: IC 16-18; IC 16-19.

Synopsis: Health matters. Amends the definition of "attendant care services" to include providing assistance for the taking of medications that include controlled substances and prescription drugs. Removes the July 1, 2014, expiration date of the anatomical gift promotion fund. Extends the office of minority health until July 1, 2016.

Effective: Upon passage; June 30, 2014; July 1, 2014.

Becker, Breaux

January 8, 2014, read first time and referred to Committee on Health and Provider Services. January 23, 2014, amended, reported favorably — Do Pass.



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January 24, 2014

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.

SENATE BILL No. 139

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

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

1	SECTION 1. IC 16-18-2-28.5, AS AMENDED BY P.L.212-2005,
2	SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 28.5. (a) "Attendant care services", for purposes
4	of IC 16-27-1 and IC 16-27-4, means services:
5	(1) that could be performed by an impaired individual for whom
6	the services are provided if the individual were not impaired; and
7	(2) that enable the impaired individual:
8	(A) to live in the individual's home and community rather than
9	in an institution; and
10	(B) to carry out functions of daily living, self-care, and
11	mobility.
12	(b) The term includes the following:
13	(1) Assistance in getting in and out of beds, wheelchairs, and
14	motor vehicles.
15	(2) Assistance with routine bodily functions, including:
16	(A) bathing and personal hygiene;

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1 (B) using the toilet; 2 (C) dressing and grooming; and 3 (D) feeding, including preparation and cleanup. 4 (3) The provision of assistance: 5 (A) through providing reminders or cues to take medication, 6 the opening of preset medication containers, and providing 7 assistance in the handling or ingesting of noncontrolled 8 substance medications, including controlled substances, 9 prescription drugs, eye drops, herbs, supplements, and over-the-counter medications; and 10 (B) to an individual who is unable to accomplish the task due 11 12 to an impairment and who is: 13 (i) competent and has directed the services; or 14 (ii) incompetent and has the services directed by a competent individual who may consent to health care for the 15 16 impaired individual. 17 SECTION 2. IC 16-19-3-26, AS AMENDED BY P.L.154-2012, 18 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 19 UPON PASSAGE]: Sec. 26. (a) The anatomical gift promotion fund is 20 established. The fund consists of amounts distributed to the fund by the 21 auditor of state under IC 9-18-2-16. 22 (b) The treasurer of state shall invest the money in the fund not 23 currently needed to meet the obligations of the fund in the same 24 manner as other public funds are invested. Interest that accrues from 25 these investments shall be deposited in the fund. 26 (c) The state department shall administer the fund. Any expenses 27 incurred in administering the fund shall be paid from the fund. 28 (d) The money in the fund shall be distributed quarterly to the 29 Indiana Donation Alliance Foundation and Donate Life Indiana for the 30 purpose of implementing an organ, tissue, and marrow registry and to 31 promote organ, tissue, and marrow donation. However, money in the 32 fund may not be distributed under this subsection for any quarter of a 33 year until the annual report for the previous year has been submitted 34 under subsection (f). 35 (e) The Indiana Donation Alliance Foundation and Donate Life 36 Indiana shall keep information regarding the identity of an individual 37 who has indicated a desire to make an organ or tissue donation 38 confidential. 39 (f) The Indiana Donation Alliance Foundation and Donate Life 40 Indiana shall submit an annual audited report, including a list of all 41 expenditures, to the: 42 (1) speaker of the house of representatives;

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1 (2) president pro tempore of the senate; 2 (3) senate health and provider services committee; and 3 (4) house public health committee; 4 before February 1. The report must be in an electronic format under 5 IC 5-14-6. 6 (g) Money in the fund at the end of a state fiscal year does not revert 7 to the state general fund. 8 (h) This subsection applies if the Indiana Donation Alliance 9 Foundation or Donate Life Indiana loses its status as an organization 10 exempt from federal income taxation under Section 501(c)(3) of the 11 Internal Revenue Code. The Indiana Donation Alliance Foundation and 12 Donate Life Indiana shall report in an electronic format under 13 IC 5-14-6 to the chairpersons of the senate standing committee, as 14 determined by the president pro tempore of the senate, and the house 15 standing committee, as determined by the speaker of the house of representatives, that have subject matter jurisdiction over health issues. 16 17 The chairpersons shall review the report and recommend to the state 18 department whether to continue distributions under subsection (d). 19 (i) Any annual reports that were not submitted by the Indiana 20 Donation Alliance Foundation or Donate Life Indiana before March 15, 21 2011, under subsection (f) must be submitted before August 1, 2012. 22 (j) This section expires July 1, 2014. 23 SECTION 3. IC 16-19-14-7, AS ADDED BY P.L.38-2010, 24 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 25 JUNE 30, 2014]: Sec. 7. This chapter expires July 1, 2014. July 1, 26 2016. 27 SECTION 4. An emergency is declared for this act.



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 139, 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 3, line 26, delete "2018." and insert "2016.".

and when so amended that said bill do pass.

(Reference is to SB 139 as introduced.)

MILLER PATRICIA, Chairperson

Committee Vote: Yeas 10, Nays 0.



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