



February 18, 2020

ENGROSSED
SENATE BILL No. 238

DIGEST OF SB 238 (Updated February 18, 2020 10:49 am - DI 135)

Citations Affected: IC 8-15.5; IC 12-7; IC 12-12.7; IC 12-17.2; IC 12-24; IC 12-26.

Synopsis: Various human services matters. Removes obsolete references to Larue D. Carter Memorial Hospital. Amends the definition of "early intervention services" to include additional services and qualified personnel for purposes of the infants and toddlers with disabilities program. Requires child care ministries to have at least one individual who maintains a CPR certification present at all times that a child is in the care of the child care ministry and requires employees and volunteers who are caregivers to maintain current first aid certification.

Effective: July 1, 2020.

Brown L, Gaskill

(HOUSE SPONSOR — DEVON)

January 9, 2020, read first time and referred to Committee on Family and Children Services.

January 28, 2020, reported favorably — Do Pass.

January 30, 2020, read second time, ordered engrossed. Engrossed.

February 3, 2020, read third time, passed. Yeas 46, nays 1.

HOUSE ACTION

February 10, 2020, read first time and referred to Committee on Family, Children and Human Affairs.

February 18, 2020, reported — Do Pass.

ES 238—LS 6676/DI 104



February 18, 2020

Second Regular Session of the 121st General Assembly (2020)

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 2019 Regular Session of the General Assembly.

ENGROSSED SENATE BILL No. 238

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 8-15.5-1-2, AS AMENDED BY P.L.189-2018,
2 SECTION 85, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2020]: Sec. 2. (a) This article contains full and complete
4 authority for public-private agreements between the authority, a private
5 entity, and, where applicable, a governmental entity. Except as
6 provided in this article, no law, procedure, proceeding, publication,
7 notice, consent, approval, order, or act by the authority or any other
8 officer, department, agency, or instrumentality of the state or any
9 political subdivision is required for the authority to enter into a
10 public-private agreement with a private entity under this article, or for
11 a project that is the subject of a public-private agreement to be
12 constructed, acquired, maintained, repaired, operated, financed,
13 transferred, or conveyed.

14 (b) Before the authority or the department may issue a request for
15 proposals for or enter into a public-private agreement under this article
16 that would authorize an operator to impose tolls for the operation of
17 motor vehicles on all or part of a toll road project, the general assembly

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1 must adopt a statute authorizing the imposition of tolls. However,
2 during the period beginning July 1, 2011, and ending June 30, 2021,
3 and notwithstanding subsection (c), the general assembly is not
4 required to enact a statute authorizing the authority or the department
5 to issue a request for proposals or enter into a public-private agreement
6 to authorize an operator to impose tolls for the operation of motor
7 vehicles on all or part of the following projects:

8 (1) A project on which construction begins after June 30, 2011,
9 not including any part of Interstate Highway 69 other than a part
10 described in subdivision (4).

11 (2) The addition of toll lanes, including high occupancy toll lanes,
12 to a highway, roadway, or other facility in existence on July 1,
13 2011, if the number of nontolled lanes on the highway, roadway,
14 or facility as of July 1, 2011, does not decrease due to the addition
15 of the toll lanes.

16 (3) The Illiana Expressway, a limited access facility connecting
17 Interstate Highway 65 in northwestern Indiana with an interstate
18 highway in Illinois.

19 (4) A project that is located within a metropolitan planning area
20 (as defined by 23 U.S.C. 134) and that connects the state of
21 Indiana with the commonwealth of Kentucky.

22 However, neither the authority nor the department may issue a request
23 for proposals for a public-private agreement under this article that
24 would authorize an operator to impose tolls unless the budget
25 committee has reviewed the request for proposals.

26 (c) Before the authority or an operator may carry out any of the
27 following activities under this article, the general assembly must enact
28 a statute authorizing that activity:

29 (1) Imposing tolls on motor vehicles for use of Interstate Highway
30 69.

31 (2) Imposing tolls on motor vehicles for use of a nontolled
32 highway, roadway, or other facility in existence or under
33 construction on July 1, 2011, including nontolled interstate
34 highways, U.S. routes, and state routes.

35 (d) The general assembly is not required to enact a statute
36 authorizing the authority or the department to issue a request for
37 proposals or enter into a public-private agreement for a freeway
38 project.

39 (e) The authority may enter into a public-private agreement for a
40 facility project if the general assembly, by statute, authorizes the
41 authority to enter into a public-private agreement for the facility
42 project.



1 (f) As permitted by subsection (e), the general assembly authorizes
 2 the authority to enter into public-private agreements for ~~the following~~
 3 ~~facility projects:~~

4 ~~(1) a state park inn and related improvements in an existing state~~
 5 ~~park located in a county with a population of more than two~~
 6 ~~hundred thousand (200,000) and less than three hundred thousand~~
 7 ~~(300,000).~~

8 ~~(2) Earue D: Carter Memorial Hospital in Indianapolis:~~

9 SECTION 2. IC 8-15.5-2-3.2, AS AMENDED BY P.L.189-2018,
 10 SECTION 86, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 11 JULY 1, 2020]: Sec. 3.2. "Facility project" means a project to plan,
 12 design, acquire, construct, reconstruct, equip, improve, extend, expand,
 13 lease, operate, repair, manage, maintain, or finance ~~any of the following~~
 14 **a state park inn and related improvements in an existing state park**
 15 **located in a county with a population of more than two hundred**
 16 **thousand (200,000) and less than three hundred thousand (300,000)**
 17 ~~that are is~~ or will be owned by or leased in the name of the state or the
 18 authority and ~~are is~~ the subject of a public-private agreement under this
 19 article.

20 ~~(1) A state park inn and related improvements in an existing state~~
 21 ~~park located in a county with a population of more than two~~
 22 ~~hundred thousand (200,000) and less than three hundred thousand~~
 23 ~~(300,000).~~

24 ~~(2) Earue D: Carter Memorial Hospital in Indianapolis:~~

25 SECTION 3. IC 12-7-2-184, AS AMENDED BY P.L.19-2017,
 26 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 27 JULY 1, 2020]: Sec. 184. (a) "State institution" means an institution:

28 (1) owned or operated by the state;

29 (2) for the observation, care, treatment, or detention of an
 30 individual; and

31 (3) under the administrative control of a division.

32 (b) The term includes the following:

33 (1) Evansville State Hospital.

34 (2) Evansville State Psychiatric Treatment Center for Children.

35 ~~(3) Earue D: Carter Memorial Hospital:~~

36 ~~(4) (3) Logansport State Hospital.~~

37 ~~(5) (4) Madison State Hospital.~~

38 ~~(6) (5) Richmond State Hospital.~~

39 ~~(7) (6) The Neurodiagnostic Institute and Advanced Treatment~~
 40 ~~Center.~~

41 SECTION 4. IC 12-12.7-2-3, AS AMENDED BY P.L.210-2015,
 42 SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



1 JULY 1, 2020]: Sec. 3. (a) As used in this chapter, "early intervention
2 services" means developmental services that meet the following
3 conditions:

4 (1) Are provided under public supervision.

5 **(2) Are selected in collaboration with the parents.**

6 **(3) Are provided at no cost, except when federal or state law
7 provides for a system of payments by the families, including
8 a sliding fee schedule.**

9 ~~(2)~~ **(4) Are designed to meet the:**

10 (A) developmental needs of infants and toddlers with
11 disabilities in at least one (1) of the areas specified in section
12 4(a)(1) of this chapter; **and**

13 **(B) needs of the family to assist appropriately the
14 development of the infant or toddler as identified by the
15 individualized family service plan adopted in accordance
16 with 20 U.S.C. 1436.**

17 ~~(3)~~ **(5) Meet all required state and federal standards.**

18 ~~(4)~~ **(6) Are provided by qualified personnel, including the
19 following:**

20 (A) Early childhood special educators, early childhood
21 educators, and special educators, **including teachers of
22 children with:**

23 **(i) hearing impairments, including deafness; and**

24 **(ii) vision impairments, including blindness.**

25 (B) Speech and language pathologists and audiologists.

26 (C) Occupational therapists.

27 (D) Physical therapists.

28 (E) Psychologists.

29 (F) Social workers.

30 (G) Nurses.

31 (H) Nutritionists.

32 (I) Family therapists.

33 (J) Orientation and mobility specialists.

34 (K) Pediatricians and other physicians **for diagnostic and
35 evaluation purposes.**

36 **(L) Registered dietitians.**

37 **(M) Vision specialists, including ophthalmologists and
38 optometrists.**

39 ~~(5)~~ **(7) To the maximum extent appropriate, are provided in
40 natural environments, including the home and community settings
41 in which children without disabilities participate.**

42 ~~(6)~~ **(8) Are provided in conformity with an individualized family**



- 1 service plan adopted in accordance with 20 U.S.C. 1436.
- 2 (b) The term includes the following services:
- 3 (1) Family training, counseling, and home visits.
- 4 (2) Special instruction.
- 5 (3) Speech and language pathology, audiology, and sign language
- 6 and cued language services.
- 7 (4) Occupational therapy.
- 8 (5) Physical therapy.
- 9 (6) Psychological services.
- 10 (7) Service coordination services.
- 11 (8) Medical services only for diagnostic, evaluation, or
- 12 consultation purposes.
- 13 (9) Early identification, screening, and assessment services.
- 14 (10) Other health services necessary for an infant or a toddler to
- 15 benefit from the services.
- 16 (11) Vision services.
- 17 (12) Supportive technology services.
- 18 (13) Transportation and related costs that are necessary to enable
- 19 an infant or a toddler and the infant's or toddler's family to receive
- 20 early intervention services.
- 21 **(14) Assistive technology devices and services.**
- 22 **(15) Nursing services.**
- 23 **(16) Nutrition services.**
- 24 **(17) Social work services.**
- 25 **(c) This section does not provide an exhaustive list of the**
- 26 **services that may constitute early intervention services or the**
- 27 **qualified personnel that may provide early intervention services.**
- 28 **Nothing in this section prohibits an individualized family service**
- 29 **plan from including another type of:**
- 30 **(1) service as an early intervention service if the service meets**
- 31 **the criteria set forth in subsection (a); or**
- 32 **(2) personnel that may provide early intervention services as**
- 33 **long as the personnel meet the requirements of 34 CFR**
- 34 **303.31.**
- 35 SECTION 5. IC 12-17.2-6-7.5 IS ADDED TO THE INDIANA
- 36 CODE AS A NEW SECTION TO READ AS FOLLOWS
- 37 [EFFECTIVE JULY 1, 2020]: **Sec. 7.5. (a) At least one (1) adult**
- 38 **individual who maintains annual certification in a course of**
- 39 **cardiopulmonary resuscitation applicable to all age groups of**
- 40 **children cared for by the child care ministry shall be present at all**
- 41 **times when a child is in the care of a child care ministry.**
- 42 **(b) An individual who:**



1 **(1) is employed; or**
 2 **(2) volunteers;**
 3 **as a caregiver at a child care ministry shall maintain current**
 4 **certification in first aid applicable to all age groups of children**
 5 **cared for by the child care ministry.**

6 SECTION 6. IC 12-24-1-3, AS AMENDED BY P.L.168-2018,
 7 SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 8 JULY 1, 2020]: Sec. 3. (a) The director of the division of mental health
 9 and addiction has administrative control of and responsibility for the
 10 state institution network operating as an integrated mental health
 11 system, including the following:

- 12 (1) Evansville State Hospital.
 13 (2) Evansville State Psychiatric Treatment Center for Children.
 14 ~~(3) Larue D. Carter Memorial Hospital.~~
 15 ~~(4)~~ **(3)** Logansport State Hospital.
 16 ~~(5)~~ **(4)** Madison State Hospital.
 17 ~~(6)~~ **(5)** Richmond State Hospital.
 18 ~~(7)~~ **(6)** The Neurodiagnostic Institute and Advanced Treatment
 19 Center.
 20 ~~(8)~~ **(7)** Any other state owned or operated mental health
 21 institution, including a freestanding facility or satellite facility.

22 (b) Subject to the approval of the director of the budget agency and
 23 the governor, the director of the division of mental health and addiction
 24 may contract for the management and clinical operation of any state
 25 institution, including contracting with a nonstate entity for services.

26 SECTION 7. IC 12-26-6-8, AS AMENDED BY P.L.161-2018,
 27 SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 28 JULY 1, 2020]: Sec. 8. (a) If, upon the completion of the hearing and
 29 consideration of the record, the court finds that the individual is
 30 mentally ill and either dangerous or gravely disabled, the court may
 31 order the individual to:

- 32 (1) be committed to an appropriate facility; or
 33 (2) enter an outpatient treatment program under IC 12-26-14 for
 34 a period of not more than ninety (90) days.

35 (b) The court's order must require that the superintendent of the
 36 facility or the attending physician file a treatment plan with the court
 37 within fifteen (15) days of the individual's admission to the facility
 38 under a commitment order.

39 (c) If the commitment ordered under subsection (a) is to a state
 40 institution administered by the division of mental health and addiction,
 41 the record of commitment proceedings must include a report from a
 42 community mental health center stating both of the following:



- 1 (1) That the community mental health center has evaluated the
 2 individual.
- 3 (2) That commitment to a state institution administered by the
 4 division of mental health and addiction under this chapter is
 5 appropriate.
- 6 (d) The physician who makes the statement required by section 2(c)
 7 of this chapter may be affiliated with the community mental health
 8 center that submits to the court the report required by subsection (c).
- 9 ~~(e) If the commitment is of an adult to a research bed at Earle D.~~
 10 ~~Carter Memorial Hospital as set forth in IC 12-21-2-3, the report from~~
 11 ~~a community mental health center is not required.~~
- 12 ~~(f)~~ (e) If a commitment ordered under subsection (a) is to a state
 13 institution administered by the division of disability and rehabilitative
 14 services, the record of commitment proceedings must include a report
 15 from a service coordinator employed by the division of disability and
 16 rehabilitative services stating that, based on a diagnostic assessment of
 17 the individual, commitment to a state institution administered by the
 18 division of disability and rehabilitative services under this chapter is
 19 appropriate.
- 20 ~~(g)~~ (f) If the court makes a finding under subsection (a) (including
 21 a finding in reference to a child under IC 31-37-18-3), the court shall
 22 transmit any information required by the office of judicial
 23 administration to the office of judicial administration for transmission
 24 to the NICS (as defined in IC 35-47-2.5-2.5) in accordance with
 25 IC 33-24-6-3.
- 26 SECTION 8. IC 12-26-7-3, AS AMENDED BY P.L.141-2006,
 27 SECTION 68, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 28 JULY 1, 2020]: Sec. 3. (a) A petition filed under section 2 of this
 29 chapter must include a physician's written statement that states both of
 30 the following:
- 31 (1) The physician has examined the individual within the past
 32 thirty (30) days.
- 33 (2) The physician believes that the individual is:
- 34 (A) mentally ill and either dangerous or gravely disabled; and
 35 (B) in need of custody, care, or treatment in a facility for a
 36 period expected to be more than ninety (90) days.
- 37 (b) ~~Except as provided in subsection (d)~~; If the commitment is to a
 38 state institution administered by the division of mental health and
 39 addiction, the record of the proceedings must include a report from a
 40 community mental health center stating both of the following:
- 41 (1) The community mental health center has evaluated the
 42 individual.



- 1 (2) Commitment to a state institution administered by the division
2 of mental health and addiction under this chapter is appropriate.
- 3 (c) The physician who makes the statement required by subsection
4 (a) may be affiliated with the community mental health center that
5 makes the report required by subsection (b).
- 6 ~~(d) If the commitment is of an adult to a research bed at Larue D.~~
7 ~~Carter Memorial Hospital, as set forth in IC 12-21-2-3, the report from~~
8 ~~a community mental health center is not required.~~
- 9 ~~(e)~~ (d) If a commitment ordered under subsection (a) is to a state
10 institution administered by the division of disability and rehabilitative
11 services, the record of commitment proceedings must include a report
12 from a service coordinator employed by the division of disability and
13 rehabilitative services stating that, based on a diagnostic assessment of
14 the individual, commitment to a state institution administered by the
15 division of disability and rehabilitative services under this chapter is
16 appropriate.



COMMITTEE REPORT

Madam President: The Senate Committee on Family and Children Services, to which was referred Senate Bill No. 238, 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 SB 238 as introduced.)

GROOMS, Chairperson

Committee Vote: Yeas 9, Nays 0

COMMITTEE REPORT

Mr. Speaker: Your Committee on Family, Children and Human Affairs, to which was referred Senate Bill 238, 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 SB 238 as printed January 29, 2020.)

DEVON

Committee Vote: Yeas 11, Nays 0

