

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.

SENATE ENROLLED ACT No. 359

AN ACT to amend the Indiana Code concerning health.

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

SECTION 1. IC 12-21-5-6 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE JULY 1, 2019]: **Sec. 6. (a) The division shall establish a standard format for an individualized mental health safety plan that may be disclosed without a patient's consent under IC 16-39-2-6(b).**

(b) An individualized mental health safety plan format approved by the division under this section must:

- (1) provide that a mental health provider develop the individualized mental health safety plan collaboratively with the patient; and**
- (2) include the following:**
 - (A) The patient's name, address, and contact information.**
 - (B) Early warning signs that a crisis may be developing.**
 - (C) Internal coping strategies.**
 - (D) Contact information for individuals and social settings that may provide distraction for the patient.**
 - (E) Contact information for persons from whom the patient can ask for help.**
 - (F) Contact information for professionals or agencies that the patient can contact at the onset of or during a crisis.**
 - (G) A plan for making the environment safe for the patient.**

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(H) The one (1) thing that matters most to the patient and for which the patient considers life worth living.

(I) Other information identified by the division.

SECTION 2. IC 16-39-2-5.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: **Sec. 5.5. Each psychiatric crisis center, psychiatric inpatient unit, and psychiatric residential treatment provider shall do the following:**

(1) Collaboratively develop an individualized mental health safety plan with each patient.

(2) Explain the benefits of coordinating care and sharing individualized mental health safety plans with mental health providers in the community that can help with the patient's safe transition back into the community.

(3) Make a good faith effort before a patient leaves the facility at which the patient is receiving care to obtain the patient's consent to disclose the patient's individualized mental health safety plan with mental health providers, integrated school based mental health providers, and mental health community paramedicine programs that will be supporting the patient's safe transition back into the community and, if applicable, school.

SECTION 3. IC 16-39-2-6, AS AMENDED BY P.L.233-2015, SECTION 28, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: **Sec. 6. (a) Without the consent of the patient, the patient's mental health record may only be disclosed as follows:**

(1) To individuals who meet the following conditions:

(A) Are employed by:

(i) the provider at the same facility or agency;

(ii) a managed care provider (as defined in IC 12-7-2-127);
or

(iii) a health care provider or mental health care provider, if the mental health records are needed to provide health care or mental health services to the patient.

(B) Are involved in the planning, provision, and monitoring of services.

(2) To the extent necessary to obtain payment for services rendered or other benefits to which the patient may be entitled, as provided in IC 16-39-5-3.

(3) To the patient's court appointed counsel and to the Indiana protection and advocacy services commission.

(4) For research conducted in accordance with IC 16-39-5-3 and



the rules of the division of mental health and addiction, the rules of the division of disability and rehabilitative services, or the rules of the provider.

(5) To the division of mental health and addiction for the purpose of data collection, research, and monitoring managed care providers (as defined in IC 12-7-2-127) who are operating under a contract with the division of mental health and addiction.

(6) To the extent necessary to make reports or give testimony required by the statutes pertaining to admissions, transfers, discharges, and guardianship proceedings.

(7) To a law enforcement agency if any of the following conditions are met:

(A) A patient escapes from a facility to which the patient is committed under IC 12-26.

(B) The superintendent of the facility determines that failure to provide the information may result in bodily harm to the patient or another individual.

(C) A patient commits or threatens to commit a crime on facility premises or against facility personnel.

(D) A patient is in the custody of a law enforcement officer or agency for any reason and:

(i) the information to be released is limited to medications currently prescribed for the patient or to the patient's history of adverse medication reactions; and

(ii) the provider determines that the release of the medication information will assist in protecting the health, safety, or welfare of the patient.

Mental health records released under this clause must be maintained in confidence by the law enforcement agency receiving them.

(8) To a coroner or medical examiner, in the performance of the individual's duties.

(9) To a school in which the patient is enrolled if the superintendent of the facility determines that the information will assist the school in meeting educational needs of the patient.

(10) To the extent necessary to satisfy reporting requirements under the following statutes:

(A) IC 12-10-3-10.

(B) IC 12-24-17-5.

(C) IC 16-41-2-3.

(D) IC 31-25-3-2.

(E) IC 31-33-5-4.



- (F) IC 34-30-16-2.
- (G) IC 35-46-1-13.
- (11) To the extent necessary to satisfy release of information requirements under the following statutes:
 - (A) IC 12-24-11-2.
 - (B) IC 12-24-12-3, IC 12-24-12-4, and IC 12-24-12-6.
 - (C) IC 12-26-11.
- (12) To another health care provider in a health care emergency.
- (13) For legitimate business purposes as described in IC 16-39-5-3.
- (14) Under a court order under IC 16-39-3.
- (15) With respect to records from a mental health or developmental disability facility, to the United States Secret Service if the following conditions are met:
 - (A) The request does not apply to alcohol or drug abuse records described in 42 U.S.C. 290dd-2 unless authorized by a court order under 42 U.S.C. 290dd-2(b)(2)(c).
 - (B) The request relates to the United States Secret Service's protective responsibility and investigative authority under 18 U.S.C. 3056, 18 U.S.C. 871, or 18 U.S.C. 879.
 - (C) The request specifies an individual patient.
 - (D) The director or superintendent of the facility determines that disclosure of the mental health record may be necessary to protect a person under the protection of the United States Secret Service from serious bodily injury or death.
 - (E) The United States Secret Service agrees to only use the mental health record information for investigative purposes and not disclose the information publicly.
 - (F) The mental health record information disclosed to the United States Secret Service includes only:
 - (i) the patient's name, age, and address;
 - (ii) the date of the patient's admission to or discharge from the facility; and
 - (iii) any information that indicates whether or not the patient has a history of violence or presents a danger to the person under protection.
- (16) To the statewide waiver ombudsman established under IC 12-11-13, in the performance of the ombudsman's duties.
 - (b) If a licensed mental health professional or licensed paramedic, in the course of rendering a treatment intervention, determines that a patient may be a harm to himself or herself or others, the licensed mental health professional or licensed**



paramedic may request a patient's individualized safety plan from a psychiatric crisis center, psychiatric inpatient unit, or psychiatric residential treatment provider. Each psychiatric crisis center, psychiatric inpatient unit, and psychiatric residential treatment provider shall, upon request and without the consent of the patient, share a patient's individualized mental health safety plan that is in the standard format established by the division of mental health and addiction under IC 12-21-5-6 to the following individuals who demonstrate proof of licensure and commit to protecting the information in compliance with state and federal privacy laws:

- (1) A licensed mental health professional.
- (2) A licensed paramedic.

An individualized mental health safety plan disclosed under this subsection may be used only to support a patient's welfare and safety and is considered otherwise confidential information under applicable state and federal laws.

~~(b)~~ (c) After information is disclosed under subsection (a)(15) and if the patient is evaluated to be dangerous, the records shall be interpreted in consultation with a licensed mental health professional on the staff of the United States Secret Service.

~~(c)~~ (d) A person who discloses information under subsection (a)(7), ~~or~~ (a)(15), or subsection (b) in good faith is immune from civil and criminal liability.

SECTION 4. IC 34-30-2-77.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 77.5. IC 16-39-2-6 (Concerning a person who releases mental health records or mental health safety plans under certain circumstances).



President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date: _____ Time: _____

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