

SENATE BILL No. 392

DIGEST OF SB 392 (Updated January 26, 2022 1:13 pm - DI 133)

Citations Affected: IC 16-27.

Synopsis: Home health care associations. Provides that home health agencies may enter into cooperative agreements to carry out the following activities: (1) To form and operate, either directly or indirectly, one or more networks of home health agencies, hospitals, skilled nursing facilities, physicians, and other health care providers and to arrange for the provision of health care services through such networks. (2) To contract, either directly or through such networks, with the office of the secretary of family and social services, or the office's contractors to provide: (A) services to Medicaid beneficiaries; and (B) health care services in an efficient and cost effective manner on a prepaid, capitation, or other reimbursement basis. (3) To undertake other managed health care activities. Provides that a home health agency may authorize an association, corporation, or other person to undertake or effectuate any of these activities. Requires the secretary of family and social services to oversee and supervise these activities.

Effective: July 1, 2022.

Becker, Leising

January 11, 2022, read first time and referred to Committee on Health and Provider Services.

January 27, 2022, reported favorably — Do Pass.



Second Regular Session of the 122nd General Assembly (2022)

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 2021 Regular Session of the General Assembly.

SENATE BILL No. 392

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

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

SECTION 1. IC 16-27-5 IS ADDED TO THE INDIANA CODE AS

2	A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
3	1, 2022]:
4	Chapter 5. Home Health Agency Cooperative Agreements
5	Sec. 1. (a) It is the public policy of Indiana to facilitate the
6	provision of quality, cost-efficient health care services to its
7	residents.
8	(b) The general assembly recognizes the importance and
9	necessity of home health services and home health agencies to
10	promote and protect the public's general health, safety, and
11	welfare.
12	(c) The general assembly finds it necessary and appropriate to
13	encourage home health agencies to cooperate and enter into

agreements that will facilitate improved quality of care and

to supplant state and federal antitrust laws with a process

(d) The general assembly believes it is in Indiana's best interest



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increase access to home health services.

1	described in this chapter and with active supervision by the
2	secretary as provided in this chapter.
3	(e) It is the intent of the general assembly that this chapter
4	immunize, to the fullest extent possible, from all federal and state
5	antitrust laws all actions approved and supervised under this
6	chapter.
7	Sec. 2. The definitions in IC 16-27-1 apply throughout this
8	chapter.
9	Sec. 3. As used in this chapter, "office" refers to the office of the
10	secretary of family and social services established by IC 12-8-1.5-1.
11	Sec. 4. As used in this chapter, "secretary" refers to the
12	secretary of family and social services appointed under
13	IC 12-8-1.5-2.
14	Sec. 5. Home health agencies may enter into cooperative
15	agreements to carry out the following activities:
16	(1) To form and operate, either directly or indirectly, one (1)
17	or more networks of home health agencies, hospitals, skilled
18	nursing facilities, physicians, and other health care providers
19	and to arrange for the provision of health care services
20	through such networks.
21	(2) To contract, either directly or through such networks, with
22	the office, or the office's contractors, to provide:
23	(A) services to Medicaid beneficiaries; and
24	(B) health care services in an efficient and cost effective
25	manner on a prepaid, capitation, or other reimbursement
26	basis.
27	(3) To undertake other managed health care activities.
28	Sec. 6. (a) Any health care provider licensed under this title or
29	IC 25 may apply to become a participating provider in the
30	networks described in this chapter provided the services the
31	provider contracts for are within the lawful scope of the provider's
32	practice.
33	(b) This section does not require a plan or network to provide
34	coverage for any specific health care service.
35	Sec. 7. A home health agency may authorize any of the
36	following, or any combination of the following, to undertake or
37	effectuate any of the activities identified in this chapter:
38	(1) The Indiana Association for Home and Hospice Care, Inc.

(2) Any subsidiary of the corporation named in subdivision

(3) Any other association, corporation, or other person



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approved by the secretary.

(1).

1	Sec. 8. The secretary or the secretary's designee shall supervise
2	and oversee the activities described in this chapter and may take
3	the following actions:
4	(1) Gather relevant facts, collect data, conduct public
5	hearings, invite and receive public comments, investigate
6	market conditions, conduct studies, and review documentary
7	evidence or require the home health agencies or their third
8	party designee to do the same.
9	(2) Evaluate the substantive merits of any action to be taken
10	by the home health agencies and assess whether the action
11	comports with the standards established by the general
12	assembly.
13	(3) Issue written decisions approving, modifying, or
14	disapproving the recommended action, and explaining the
15	reasons and rationale for the decision.
16	(4) Require home health agencies or their third party
17	designees to report annually on the extent of the benefits
18	realized by the actions taken under this chapter.
19	Sec. 9. The secretary may adopt rules under IC 4-22-2 to
20	implement this chapter.



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 392, 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 392 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 12, Nays 0

