## SENATE BILL No. 405

#### DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 5-11-13-0.5; IC 16-18-2; IC 16-21-6-3; IC 16-22; IC 16-23-1; IC 16-28.

**Synopsis:** Regulation of hospitals and nursing homes. Repeals provisions that allow a county or city hospital to withhold from disclosure the individual salaries of hospital employees. Sets forth financial reporting requirements for hospitals concerning revenue generated from the ownership, operation, or management of a nursing facility. Requires the state department of health to: (1) jointly with the office of the secretary of family and social services, develop and finalize before July 1, 2024, quality metrics to improve clinical, administrative, and quality of life care for health facility residents; and (2) post on the state department's Internet web site certain information concerning a health facility's inspection reports, survey reports, and ownership information. Requires a health facility to disclose a description of the services provided by the facility and the rates charged for the services to prospective residents. Requires a health facility to: (1) post personnel and licensure classification information for on duty personnel; (2) retain personnel and licensure information for employees for public inspection; and (3) maintain a record of every inspection report and final citation issued to the health facility for public inspection. Prohibits a health facility from taking retaliatory action against an employee because the employee: (1) discloses or threatens to disclose actions or practices implemented by the health facility that the employee reasonably believes is in violation of federal or state law, rule, or regulation; (2) provides information or testifies in investigations or hearings; or (3) assists or participates in proceedings to enforce state law. Provides for relief to the employee.

Effective: July 1, 2022.

# **Qaddoura**

January 12, 2022, read first time and referred to Committee on Health and Provider Services.



#### 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. 405

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 5-11-13-0.5 IS REPEALED [EFFECTIVE JULY

2	1, 2022]. Sec. 0.5. This chapter does not apply to a hospital organized
3	under IC 16-22-2, IC 16-22-8, or IC 16-23-1.
4	SECTION 2. IC 16-18-2-253.7, AS ADDED BY P.L.229-2011,
5	SECTION 158, IS AMENDED TO READ AS FOLLOWS
6	[EFFECTIVE JULY 1, 2022]: Sec. 253.7. "Nursing facility", for
7	purposes of IC 16-21, IC 16-22, IC 16-23, and IC 16-28-15, has the
8	meaning set forth in IC 16-28-15-4.
9	SECTION 3. IC 16-18-2-319.5 IS ADDED TO THE INDIANA
10	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
11	[EFFECTIVE JULY 1, 2022]: Sec. 319.5. "Retaliatory action", for
12	purposes of IC 16-28-4-8, has the meaning set forth in

SECTION 4. IC 16-21-6-3, AS AMENDED BY P.L.2-2007, SECTION 190, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 3. (a) Each hospital shall file with the state department a report for the preceding fiscal year within one



1

13

14

15

16 17 IC 16-28-4-8(a).

1	hundred twenty (120) days after the end of the hospital's fiscal year.
2	The state department shall grant an extension of the time to file the
3	report if the hospital shows good cause for the extension. The report
4	must contain the following:
5	(1) A copy of the hospital's balance sheet, including a statement
6	describing the hospital's total assets and total liabilities.
7	(2) A copy of the hospital's income statement.
8	(3) A statement of changes in financial position.
9	(4) A statement of changes in fund balance.
10	(5) Accountant notes pertaining to the report.
11	(6) A copy of the hospital's report required to be filed annually
12	under 42 U.S.C. 1395g, and other appropriate utilization and
13	financial reports required to be filed under federal statutory law.
14	(7) Net patient revenue.
15	(8) A statement including:
16	(A) Medicare gross revenue;
17	(B) Medicaid gross revenue;
18	(C) other revenue from state programs;
19	(D) revenue from local government programs;
20	(E) local tax support;
21	(F) charitable contributions;
22	(G) other third party payments;
23	(H) gross inpatient revenue;
24	(I) gross outpatient revenue;
25	(J) contractual allowance;
26	(K) any other deductions from revenue;
27	(L) charity care provided;
28	(M) itemization of bad debt expense; and
29	(N) an estimation of the unreimbursed cost of subsidized
30	health services.
31	(9) A statement itemizing donations.
32	(10) A statement describing the total cost of reimbursed and
33	unreimbursed research.
34	(11) A statement describing the total cost of reimbursed and
35	unreimbursed education separated into the following categories:
36	(A) Education of physicians, nurses, technicians, and other
37	medical professionals and health care providers.
38	(B) Scholarships and funding to medical schools, and other
39	postsecondary educational institutions for health professions
40	education.
41	(C) Education of patients concerning diseases and home care
42	in response to community needs.



1	(D) Community health advection through informational
1 2	(D) Community health education through informational
3	programs, publications, and outreach activities in response to community needs.
4	· ·
5	(E) Other educational services resulting in education related costs.
6	
7	(12) A statement including the revenue from the hospital's ownership, operation, or management of a nursing facility
8	and how the revenue is used or distributed by the hospital.
9	(b) The information in the report filed under subsection (a) must be
10	provided from reports or audits certified by an independent certified
11	public accountant or by the state board of accounts.
12	•
13	SECTION 5. IC 16-22-3-12, AS AMENDED BY P.L.208-2016,
	SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
14	JULY 1, 2022]: Sec. 12. (a) The state board of accounts:
15	(1) shall approve or prescribe the manner in which the hospital
16	records are kept;
17	(2) except as provided in subsection (c), shall audit the records of
18	the hospital; and
19	(3) may approve forms for use by all hospitals or groups of
20	hospitals.
21	(b) The governing board may use the calendar year or a fiscal year
22	for maintaining hospital financial records. A hospital that receives a
23	financial subsidy from the county for hospital operations, excluding
24	mental health or ambulance services, during the preceding calendar or
25	fiscal year must file with the county executive and the county fiscal
26	body an annual report showing the income and expenses of the
27	operating fund for the preceding calendar or fiscal year by major
28	classification according to the chart of accounts approved by the state
29	board of accounts. If the hospital uses a calendar year for maintaining
30	financial records, the report must be filed not later than the last
31	Monday in March of each year. If the hospital uses a fiscal year for
32	maintaining financial records, the report must be filed not later than
33	ninety (90) days after the close of the fiscal year. The annual report
34	shall be published one (1) time. Hospital financial records may be kept
35	in hard copy, on microfilm, or via another data system acceptable to the
36	state board of accounts.
37	(c) A hospital may elect to have an audit required under subsection
38	(a) performed by an independent certified public accounting firm that
39	is experienced in hospital matters. The audit report must be kept on file
40	at the hospital and a copy must be provided to the state board of
41	accounts. The audit engagement by a certified public accounting firm
42	must be performed pursuant to guidelines established by the state board



of accounts.

- (d) If a hospital elects to use an independent certified public accounting firm under subsection (c), the hospital shall provide written notice to the state board of accounts not less than one hundred eighty (180) days before the beginning of the hospital's fiscal year in which the hospital elects to be audited by an independent certified public accounting firm. For that hospital fiscal year, and each following fiscal year until the hospital terminates the hospital's use of an independent certified public accounting firm, the hospital shall use an independent certified public accounting firm under subsection (c). A hospital shall terminate its use of an independent certified public accounting firm under subsection (c) by providing written notice to the state board of accounts not less than one hundred eighty (180) days before the beginning of the hospital's fiscal year in which the hospital elects not to be audited by an independent certified public accounting firm. For that hospital fiscal year, and each following fiscal year until the hospital elects to use an independent certified public accounting firm as provided under this subsection, the hospital must be audited by the state board of accounts for purposes of section 12(a)(2) of this chapter. For any fiscal year in which the hospital does not use an independent certified public accounting firm under subsection (c), the hospital shall be audited by the state board of accounts.
- (e) Any information concerning the specific salaries paid to individual employees of a hospital may be withheld by the hospital from disclosure under IC 5-14-3. However, the information must be provided to the state board of accounts upon request. The state board of accounts shall maintain the confidentiality of the information as required under IC 5-14-3-6.5.
- (e) If a county hospital is the license holder for a nursing facility, the county hospital shall include in the county hospital financial records the following:
  - (1) The name of each nursing facility.
  - (2) Any intergovernmental transfer, federal upper payment limit, federal supplemental payment, or other payment mechanism that the county hospital implements or participates in as part of the county hospital's licensure of the nursing facility.
  - (3) The manner of distribution or use of any revenue, including federal funds, federal upper payment limits, and federal supplemental payments generated from the intergovernmental transfer or payment mechanism.
  - SECTION 6. IC 16-22-8-35.5 IS REPEALED [EFFECTIVE JULY



1, 2022]. Sec. 35.5. Any information concerning the specific salaries
paid to individual employees of a hospital may be withheld by the
hospital from disclosure under IC 5-14-3. However, the information
must be provided to the state board of accounts upon request. The state
board of accounts shall maintain the confidentiality of the information
as required under IC 5-14-3-6.5.

SECTION 7. IC 16-22-8-39 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 39. (a) A hospital owned, operated, or managed by the corporation shall be for the benefit of the residents of the county and of every person who becomes sick, injured, or maimed within the county.

- (b) A patient who is able to pay shall pay to the corporation a reasonable compensation for medicine or hospital services according to the rules prescribed by the board. The board or the board's authorized representative may exclude from the hospital a person who willfully violates the rules. On terms and conditions the board prescribes, the corporation may:
  - (1) extend the privileges and use of the hospital, the corporation's health care programs, and health care facilities to persons residing outside of the county; and
  - (2) own or operate nursing facilities located inside or outside of the county.
- (c) There may not be discrimination against practitioners of any school of medicine holding unlimited licenses to practice medicine recognized in Indiana. The licensed practitioners are entitled to equal privileges in treating patients in the hospital.
- (d) If the corporation owns, holds the license to, operates, or manages a nursing facility, regardless of whether the nursing facility is located inside or outside of the county, the corporation shall, before March 31 of each year, submit a report to the state board of accounts that includes the following:
  - (1) The name of each nursing facility owned, operated, or managed by the corporation.
  - (2) Each intergovernmental transfer or other payment mechanism that the corporation implements or participates in the licensure, ownership, operation, or management of a nursing facility and the amount of federal financial participation that the corporation obtains through the intergovernmental transfer, federal upper payment limit, federal supplemental payment, or other payment mechanism.
  - (3) The manner in which the federal funds received through an intergovernmental transfer, federal upper payment limit,



	1
	2
	3
	3 4
	4
	5
	6
	7
	5 6 7 8
	Ω
1	) N
1	U
1	9 0 1
1	2
1	3
1	4
1	5
1	6
1	7
1	/
1	8
1	9
$\overline{}$	^
2	0
2	0 1
2 2 2	0 1 2
2 2 2	0 1 2 3
2 2 2 2	0 1 2 3
2 2 2 2 2	0 1 2 3 4
2 2 2 2 2	0 1 2 3 4 5
2 2 2 2 2 2 2	0 1 2 3 4 5
2 2 2 2 2 2 2 2 2	0 1 2 3 4 5 6 7
2 2 2 2 2 2 2 2 2	0 1 2 3 4 5 6 7 8
2 2 2 2 2 2 2 2 2 2	0 1 2 3 4 5 6 7 8 9
222222223	0 1 2 3 4 5 6 7 8 9 0
2222222233	0 1 2 3 4 5 6 7 8 9 0
22222222333	0 1 2 3 4 5 6 7 8 9 0 1
22222222333	0 1 2 3 4 5 6 7 8 9 0 1 2
222222223333	0 1 2 3 4 5 6 7 8 9 0 1 2 3
3	01 23 45 67 89 01 23 45 67 89 01 23 4
3	0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5
3	4
3 3 3	4 5 6
3 3 3	4 5 6 7
3 3 3 3	4 5 6

federal supplemental payment, or other payment mechanism described in subdivision (2) are distributed or used by the corporation.

SECTION 8. IC 16-23-1-31 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 31. (a) If the annual budget and appropriations, or any additional appropriations or transfers of money, made or proposed by the board of directors, excluding any cumulative building money:

- (1) is not based upon or derived in part from a tax levy on property in the county or city; and
- (2) involves only the funds of the hospital derived wholly from other sources than property taxes;

the board only needs to adopt a resolution for the approval of the budget appropriations, additional appropriations, or transfers and file a true copy of the budget appropriations, additional appropriations, or transfers and the resolution in the offices of the county auditor and city clerk-treasurer within seven (7) days after board action for the information of the public.

- (b) If the funds are not derived from taxation, the city fiscal body may review, consider, and file objections and take an appeal to the department of local government finance upon the following:
  - (1) An annual budget and any appropriations in the budget and request the reduction or elimination of any item.
  - (2) Additional appropriations or transfers of funds, or any part of additional appropriations or transfers of funds, within ten (10) days after the certificate has been filed in the clerk-treasurer's office.

The ruling and action of the department of local government finance is final and conclusive.

- (c) The annual budget and appropriations may be revised by the board of directors by increasing or decreasing items in the budget based on revenues derived from sources other than property taxes and by transfer from any items of the budget and appropriations to other items of the budget, without giving legal notice or any public hearing. However, a copy of each resolution changing the budget or any appropriations or transfers of funds shall be filed with the city clerk-treasurer and county auditor within seven (7) days after the passage of each resolution. The resolution is subject to appeal by the city fiscal body to the department of local government finance for final action in the manner and within the period provided in this section.
- (d) The governing board shall annually file a condensed annual report of receipts and expenditures of all hospital funds. Expenses or



40

41

1
income items may be summarized in a fair and an accurate manner for the information of all taxpayers and citizens. A copy of the annual report covering the preceding calendar year shall be filed in the city clerk-treasurer's office and in the county auditor's office on or before the first Monday in March. Detailed information on the items must be available for inspection by the public at the hospital administrator's
office.
(e) If the board of directors owns, holds the license to, operates, or manages a nursing facility, the board of directors shall include the following information in the report required under subsection (d):
(1) The name of each nursing facility owned, operated.

- (1) The name of each nursing facility owned, operated, managed, or for which a license is held by the board of directors.
- (2) Each intergovernmental transfer, federal upper payment limit, federal supplemental payment, or other payment mechanism that the board of directors implements or participates in the ownership, licensure, operation, or management of a nursing facility and the amount of federal financial participation that the board of directors obtains through the intergovernmental transfer, federal upper payment limit, federal supplemental payment, or other payment mechanism.
- (3) The manner in which the federal funds received through an intergovernmental transfer, federal upper payment limit, federal supplemental payment, or other payment mechanism described in subdivision (2) are distributed or used by the board of directors.

SECTION 9. IC 16-23-1-33.5 IS REPEALED [EFFECTIVE JULY 1, 2022]. Sec. 33.5. Any information concerning the specific salaries paid to individual employees of a hospital may be withheld by the hospital from disclosure under IC 5-14-3. However, the information must be provided to the entities described in section 33 of this chapter. Any entity shall maintain the confidentiality of the information as required under IC 5-14-3-6.5.

SECTION 10. IC 16-28-1-7, AS AMENDED BY P.L.141-2014, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 7. The state department shall do the following:

- (1) Adopt rules under IC 4-22-2 governing the following:
  - (A) Health and sanitation standards necessary to protect the health, safety, security, rights, and welfare of patients.
  - (B) Qualifications of applicants for licenses issued under this



1	article to assure the proper care of patients.
2	(C) Operation, maintenance, management, equipment, and
3	construction of facilities required to be licensed under this
4	article if jurisdiction is not vested in any other state agency.
5	(D) Manner, form, and content of the license, including rules
6	governing disclosure of ownership interests.
7	(E) Levels of medical staffing and medical services in
8	cooperation with the office of Medicaid policy and planning
9	division of family resources, and other agencies authorized to
10	pay for the services.
l 1	(2) Recommend to the fire prevention and building safety
12	commission fire safety rules necessary to protect the health
13	safety, security, rights, and welfare of patients.
14	(3) Classify health facilities in health care categories.
15	(4) Develop and finalize:
16	(A) before July 1, 2024; and
17	(B) jointly with the office of the secretary of family and
18	social services;
19	quality metrics to improve clinical, administrative, and
20	quality of life care for health facility residents.
21	SECTION 11. IC 16-28-1-14 IS AMENDED TO READ AS
22	FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 14. (a) The division
23	shall provide, on the request of any person and payment of a fee to
24	cover the direct and indirect costs of complying with the request:
25	(1) a copy of a report of an inspection from the public file of a
26	health facility;
27	(2) a brief descriptive summary of the annual survey report of a
28	health facility; or
29	(3) both.
30	(b) Reports of all inspections under this chapter shall be maintained
31	by each health facility for two (2) five (5) years and shall be made
32	available for inspection by any member of the public upon request.
33	(c) The state department shall post on the state department's
34	Internet web site the following concerning each health facility:
35	(1) The health facility's inspection reports for the previous
36	five (5) calendar years after the inspection reports have been
37	finalized and any appeal process concerning the report is
38	complete.
39 10	(2) Any final citation issued to the health facility, including
10 11	any plans of correction and enforcement remedies.
11 12	(3) A brief descriptive summary of the annual survey report
tZ	of the health facility.



1	(4) The health facility's disclosure of ownership interests in
2	accordance with rules adopted under section 7 of this chapter.
3	SECTION 12. IC 16-28-2-6.5, AS ADDED BY P.L.173-2019,
4	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
5	JULY 1, 2022]: Sec. 6.5. (a) A health facility shall disclose the
6	following to each prospective resident in writing:
7	(1) Information concerning the long term care ombudsman
8	program (IC 12-10-13), including information on how to contact
9	the long term care ombudsman and the state department
10	concerning a health facility.
11	(2) Any policy of the health facility under which, regardless of
12	whether the resident resides at the health facility for the full
13	month or for a partial month, the health facility charges the
14	resident the full monthly rate.
15	(3) A description of the services provided by the health facility
16	and the rates charged for the services, including any items or
17	services that a resident may be charged separately and in
18	addition to a resident's monthly charge.
19	(b) A health facility shall retain the following for public
20	inspection:
21	(1) A record of the personnel employed or retained by the
22	health facility, including any licensure, certification, or
	<b>g</b> . <b>y</b> ,
23	registration held by each personnel.
	• • • • • • • • • • • • • • • • • • • •
23	registration held by each personnel.
23 24 25 26	registration held by each personnel. (2) Inspection reports, survey reports, and final citations issued by the state department. SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS
23 24 25 26 27	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each
23 24 25 26 27 28	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident,
23 24 25 26 27 28 29	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated
23 24 25 26 27 28 29 30	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each
23 24 25 26 27 28 29 30 31	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated
23 24 25 26 27 28 29 30 31 32	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each
23 24 25 26 27 28 29 30 31 32 33	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure,
23 24 25 26 27 28 29 30 31 32 33 34	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty
23 24 25 26 27 28 29 30 31 32 33 34 35	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:
23 24 25 26 27 28 29 30 31 32 33 34 35 36	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or (3) other area as routinely designated by the health facility;
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or (3) other area as routinely designated by the health facility; where the resident resides.  (b) The notice required under subsection (a) must meet the
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or (3) other area as routinely designated by the health facility; where the resident resides.  (b) The notice required under subsection (a) must meet the following conditions:
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or (3) other area as routinely designated by the health facility; where the resident resides.  (b) The notice required under subsection (a) must meet the following conditions: (1) Be posted in a conspicuous place that is readily accessible to
23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39	registration held by each personnel.  (2) Inspection reports, survey reports, and final citations issued by the state department.  SECTION 13. IC 16-28-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 8. (a) Each comprehensive care health facility shall post a notice that a resident, the legal representative of the resident, or another individual designated by the resident may request from the licensed nurse in charge of each shift information that designates the names and licensure, certification, or registration, if any, of all nursing personnel on duty by job classification for the:  (1) wing; (2) unit; or (3) other area as routinely designated by the health facility; where the resident resides.  (b) The notice required under subsection (a) must meet the following conditions:



1	(11) inches wide and seventeen (17) inches long.
2	(3) Contain the:
3	(A) business telephone number of the administrator of the
4	health facility; and
5	(B) toll free telephone number for filing complaints with the
6	state department.
7	(4) State that if a resident, the legal representative of the resident,
8	or another individual designated by the resident is unable to
9	obtain the information described in subsection (a) from the
10	licensed nurse in charge of each shift, the resident, the legal
11	representative of the resident, or another individual designated by
12	the resident may do any of the following:
13	(A) Contact the administrator of the health facility.
14	(B) File a complaint with the state department by using the
15	state department's toll free telephone number.
16	(c) The state department may adopt rules under IC 4-22-2 to carry
17	out this section.
18	SECTION 14. IC 16-28-4-8 IS ADDED TO THE INDIANA CODE
19	AS A <b>NEW</b> SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
20	1, 2022]: Sec. 8. (a) As used in this section, "retaliatory action"
21	means the reprimand, discharge, suspension, demotion, denial of
22	promotion or transfer, or change in the terms and conditions of
23	employment of an employee of a health facility that is taken in
24	retaliation for the employee's involvement in a protected activity
25	as set forth in this section.
26	(b) A health facility may not take any retaliatory action against
27	an employee of the health facility because the employee does any
28	of the following:
29	(1) Discloses or threatens to disclose to a supervisor or to the
30	public an activity, inaction, policy, or practice implemented
31	by a health facility that the employee reasonably believes is in
32	violation of a federal or state law, rule, or regulation.
33	(2) Provides information to or testifies before any law
34	enforcement or governmental entity conducting an
35	investigation, hearing, or inquiry into any violation of a
36	federal or state law, rule, or regulation.
37	(3) Assists or participates in a proceeding to enforce the
38	provisions of this article.
39	(c) A violation of this section occurs only if there is a finding
40	that:
41	(1) the employee of the health facility engaged in conduct

described in subsection (b); and



42

1	(2) the employee's conduct was a contributing factor in the
2	retaliatory action alleged by the employee.
3	However, a health facility has not violated this section if the health
4	facility demonstrates, by clear and convincing evidence, that the
5	health facility would have taken the unfavorable employment
6	action against the employee in the absence of the conduct described
7	in subsection (b).
8	(d) If a court finds that a health facility has taken retaliatory
9	action against an employee in violation of this section, the employee
10	may be awarded all relief necessary to make the employee whole
11	and to prevent future violations of this section. Relief may include
12	any of the following:
13	(1) Reinstatement of the individual to the same or equivalent
14	position held before the retaliatory action was taken.
15	(2) Two (2) times the amount of back pay that is owed to the
16	individual.
17	(3) Interest on the back pay that is owed to the individual.
18	(4) Compensation for any special damages sustained by the
19	individual as a result of the retaliatory action being taken,
20	including costs and expenses of litigation and reasonable
21	attorney's fees.
22	(e) Nothing in this section shall be deemed to diminish the rights,
23	privileges, or remedies of the individual under any other federal or
24	state law, rule, regulation, or employment contract.
25	SECTION 15. IC 16-28-5-3.5 IS ADDED TO THE INDIANA
26	CODE AS A NEW SECTION TO READ AS FOLLOWS
27	[EFFECTIVE JULY 1, 2022]: Sec. 3.5. A health facility shall
28	maintain a record of every final citation issued to the health facility
29	and make the record available for inspection by any member of the
30	public upon request.

