

## **ENGROSSED** SENATE BILL No. 406

DIGEST OF SB 406 (Updated February 24, 2014 2:26 pm - DI 104)

**Citations Affected:** IC 5-11; IC 12-7; IC 12-8; IC 12-10; IC 12-15; IC 16-18; IC 16-19; IC 16-21; IC 16-25; IC 16-27; IC 16-28; IC 16-29; IC 16-36; IC 16-37; IC 16-38; IC 16-41; IC 16-42; noncode.

Synopsis: Health and human services matters. Makes certain procedural changes to the false claims act and Medicaid false claims act to remove inconsistencies and comply with federal law. Beginning January 1, 2015, changes asset limitations within the community and home options to institutional care for the elderly and disabled program (program) from \$500,000 to \$250,000 and specifies certain exemptions. Beginning January 1, 2015, requires annual adjustment of the asset limitation using the federal Consumer Price Index. Beginning January 1, 2015, allows a participant who is unable to perform at least one activity to participate in the program under specified circumstances. Requires the division of aging (division) and the area agencies on aging to jointly establish specified procedures. Beginning January 1, 2015, allows the division to: (1) annually redetermine program eligibility; and (2) place a lien to recoup the cost of program services that exceed \$20,000. Requires the division to exclude \$20,000 of countable assets in determining cost participation for the program of countable assets in determining cost participation for the program. (Continued next page)

Effective: Upon passage; July 1, 2014; January 1, 2015.

# Mishler, Charbonneau, Hershman, Mrvan, Randolph

(HOUSE SPONSORS — CLERE, BROWN T)

January 14, 2014, read first time and referred to Committee on Health and Provider

January 23, 2014, reported favorably — Do Pass.
January 27, 2014, read second time, ordered engrossed.
January 28, 2014, engrossed.
February 3, 2014, read third time, passed. Yeas 48, nays 0.

HOUSE ACTION

February 10, 2014, read first time and referred to Committee on Public Health. February 24, 2014, amended, reported — Do Pass.



### Digest Continued

Designates the office of the secretary of family and social services as the single state agency for the administration of the Medicaid program and removes the designation from the office of Medicaid policy and planning. Repeals the law concerning the health care facility advisory council. Transfers certain duties of the council to the state department of health. Changes the amount of time from four years after birth to twelve months after birth that a birth certificate presented for filing is considered a delayed certificate of birth. Requires a diagnosis of autism at any age to be reported to the birth problems registry. (Current law provides for the reporting of an autism diagnosis made before a child's fifth birthday). Adds certain visual impairments to the definition of birth problems for purposes of reporting to the birth problems registry. Allows not more than 50% of the monies in the spinal cord and brain injury fund to be used to develop a statewide trauma system. Adds insulin to the definition of "legend drug". Provides that insulin may be sold for retail sale by a pharmacy only to an individual who possesses a prescription from certain practitioners. Requires, before September 1, 2014, the state department of health to: (1) adopt rules concerning the regulation of facilities for treatment of traumatic brain injuries; and (2) make recommendations to the legislative council and health finance commission concerning food handling law changes.



### 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.

# ENGROSSED SENATE BILL No. 406

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 5-11-5.5-2, AS ADDED BY P.L.222-2005,

2	SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 2. (a) This section does not apply to:
4	(1) a claim, record, or statement concerning income tax (IC 6-3)
5	or
6	(2) a claim, request, demand, statement, record, act, or
7	omission made or submitted after June 30, 2014, in relation to
8	the Medicaid program described in IC 12-15.
9	(b) A person who knowingly or intentionally:
0	(1) presents a false claim to the state for payment or approval;
1	(2) makes or uses a false record or statement to obtain payment or
2	approval of a false claim from the state;
3	(3) with intent to defraud the state, delivers less money or
4	property to the state than the amount recorded on the certificate
5	or receipt the person receives from the state;
6	(4) with intent to defraud the state, authorizes issuance of a



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1	receipt without knowing that the information on the receipt is
2	true;
3	(5) receives public property as a pledge of an obligation on a debt
4	from an employee who is not lawfully authorized to sell or pledge
5	the property;
6	(6) makes or uses a false record or statement to avoid an
7	obligation to pay or transmit property to the state;
8	(7) conspires with another person to perform an act described in
9	subdivisions (1) through (6); or
0	(8) causes or induces another person to perform an act described
1	in subdivisions (1) through (6);
2	is, except as provided in subsection (c), liable to the state for a civil
3	penalty of at least five thousand dollars (\$5,000) and for up to three (3)
4	times the amount of damages sustained by the state. In addition, a
5	person who violates this section is liable to the state for the costs of a
6	civil action brought to recover a penalty or damages.
7	(c) If the factfinder determines that the person who violated this
8	section:
9	(1) furnished state officials with all information known to the
20	person about the violation not later than thirty (30) days after the
21	date on which the person obtained the information;
.2	(2) fully cooperated with the investigation of the violation; and
23	(3) did not have knowledge of the existence of an investigation,
22 23 24	a criminal prosecution, a civil action, or an administrative action
25	concerning the violation at the time the person provided
26	information to state officials;
27	the person is liable for a penalty of not less than two (2) times the
28	amount of damages that the state sustained because of the violation. A
.9	person who violates this section is also liable to the state for the costs
0	of a civil action brought to recover a penalty or damages.
1	SECTION 2. IC 5-11-5.7-1, AS ADDED BY P.L.197-2013,
2	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 1. (a) This chapter applies only to claims,
4	requests, demands, statements, records, acts, and omissions made or
5	submitted in relation to the Medicaid program described in IC 12-15.
6	Sections 3 through 18 of this chapter apply to claims, requests,
7	demands, statements, records, acts, and omissions made or
8	submitted in relation to the Medicaid program described in
9	IC 12-15 in violation of IC 5-11-5.5-2 or IC 5-11-5.7-2.
-0	(b) The following definitions apply throughout this chapter:
-1	(1) "Claim" means a request or demand for money or property,

whether under a contract or otherwise, and whether or not the



1	state has title to the money or property, that:
2	(A) is presented to an officer, employee, or agent of the state;
2 3	or
4	(B) is made to a contractor, grantee, or other recipient, if the
5	money or property is to be spent or used on the state's behalf
6	or to advance a state program or interest, and if the state:
7	(i) provides or has provided any part of the money or
8	property that is requested or demanded; or
9	(ii) will reimburse the contractor, grantee, or other recipient
10	for any part of the money or property that is requested or
11	demanded.
12	(2) "Documentary material" "Document", "electronically
13	stored information", or "tangible thing" includes: means:
14	(A) the original or a copy of a book, record, report,
15	memorandum, paper, communication, tabulation, chart, or
16	other document; a writing, a drawing, a graph, a chart, a
17	photograph, a sound recording, or an image;
18	(B) other data or a data compilation stored in any medium
19	from which information can be obtained either directly or
20	accessible through computer or other information retrieval
21	systems, together with instructions and all other materials
22	necessary to use or interpret the data compilations; after
23	translation by the responding party into a reasonably
24	usable form; <del>and</del>
25	(C) any tangible thing; and
26	(C) (D) a product of discovery.
27	(3) "Investigation" means an inquiry conducted by an investigator
28	to ascertain whether a person is or has been engaged in a violation
29	of this chapter.
30	(4) "Knowing", "knowingly", or "known" means that a person,
31	regarding information:
32	(A) has actual knowledge of the information;
33	(B) acts in deliberate ignorance of the truth or falsity of the
34	information; or
35	(C) acts in reckless disregard of the truth or falsity of the
36	information;
37	and requires no proof of specific intent to defraud.
38	(5) "Material" means having a natural tendency to influence, or be
39	capable of influencing, the payment or receipt of money or
40	property.
41	(6) "Obligation" means an established duty, whether or not the
42	duty is fixed, arising from:



1	(A) an express or implied contractual relationship;
2	(B) a grantor-grantee relationship;
3	(C) a licensor-licensee relationship;
4	(D) a fee-based or similar relationship;
5	(E) a statute;
6	(F) a rule or regulation; or
7	(G) the retention of an overpayment.
8	(7) "Person" includes a natural person, a corporation, a firm, an
9	association, an organization, a partnership, a limited liability
10	company, a business, or a trust.
11	(8) "Product of discovery" means the original or duplicate of:
12	(A) a deposition;
13	(B) an interrogatory;
14	(C) a document;
15	(D) a thing;
16	(E) a result of the inspection of land or other property; or
17	(F) an examination or admission;
18	that is obtained by any method of discovery in a judicial or an
19	administrative proceeding of an adversarial nature. The term
20	includes a digest, an analysis, a selection, a compilation, a
21	derivation, an index, or another method of accessing an item
22	listed in this subdivision. The term also includes electronically
23 24 25	stored information.
24	(9) "State" means Indiana or any agency of state government. The
	term does not include a political subdivision.
26	SECTION 3. IC 5-11-5.7-2, AS ADDED BY P.L.197-2013,
27	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
28	JULY 1, 2014]: Sec. 2. (a) This section does not apply to a claim,
29	record, or statement concerning income tax (IC 6-3).
30	(b) (a) A person who:
31	(1) knowingly presents, or causes to be presented, a false or
32	fraudulent claim for payment or approval;
33	(2) knowingly makes, uses, or causes to be made or used, a false
34	record or statement that is material to a false or fraudulent claim;
35	(3) has possession, custody, or control of property or money used,
36	or to be used, by the state, and knowingly delivers, or causes to be
37	delivered, less than all of the money or property;
38	(4) is authorized to make or deliver a document certifying receipt
39	of property used, or to be used, by the state and, with intent to
40	defraud the state, authorizes issuance of a receipt without
41	knowing that the information on the receipt is true;
42	(5) knowingly buys or receives, as a pledge of an obligation or



1	debt, public property from an employee who is not lawfully
2	authorized to sell or pledge the property;
3	(6) knowingly:
4	(A) makes, uses, or causes to be made or used, a false record
5	or statement concerning an obligation to pay or transmit
6	money or property to the state; or
7	(B) conceals or knowingly and improperly avoids or decreases
8	an obligation to pay or transmit money or property to the state;
9	(7) conspires with another person to perform an act described in
10	subdivisions (1) through (6); or
11	(8) causes or induces another person to perform an act described
12	in subdivisions (1) through (6);
13	is, except as provided in subsection (c) (b), liable to the state for a civil
14	penalty of at least five thousand five hundred dollars (\$5,500) and not
15	more than eleven thousand dollars (\$11,000), as adjusted by the federal
16	Civil Penalties Inflation Adjustment Act of 1990 (28 U.S.C. 2461 note,
17	Public Law 101-410), and for up to three (3) times the amount of
18	damages sustained by the state. In addition, a person who violates this
19	section is liable to the state for the costs of a civil action brought to
20	recover a penalty or damages.
21	(c) (b) If the factfinder determines that the person who violated this
22	section:
23	(1) furnished state officials with all information known to the
24	person about the violation not later than thirty (30) days after the
25	date on which the person obtained the information;
26	(2) fully cooperated with the investigation of the violation; and
27	(3) did not have knowledge of the existence of an investigation,
28	a criminal prosecution, a civil action, or an administrative action
29	concerning the violation at the time the person provided
30	information to state officials;
31	the person is liable for a penalty of not less than two (2) times the
32	amount of damages that the state sustained because of the violation. A
33	person who violates this section is also liable to the state for the costs
34	of a civil action brought to recover a penalty or damages.
35	SECTION 4. IC 5-11-5.7-3, AS ADDED BY P.L.197-2013,
36	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
37	JULY 1, 2014]: Sec. 3. (a) The:
38	(1) attorney general; and
39	(2) inspector general;
40	have concurrent jurisdiction to investigate a violation of section 2 of
41	this chapter.
42	(b) If the attorney general discovers a violation of section 2 of this
	(-,



1	chapter, the attorney general may bring a civil action under this chapter
2	against a person who may be liable for the violation.
3	(c) If the inspector general discovers a violation of section 2 of this
4	chapter, the inspector general shall certify this finding to the attorney
5	general. The attorney general may bring a civil action under this
6	chapter against a person who may be liable for the violation.
7	(d) If the attorney general or the inspector general is served by a
8	person who has filed a civil action under section 4 of this chapter, the
9	attorney general has the authority to intervene in that action as set forth
10	in section 4 of this chapter.
11	(e) If the attorney general:
12	(1) is disqualified from investigating a possible violation of
13	section 2 of this chapter;
14	(2) is disqualified from bringing a civil action concerning a
15	possible violation of section 2 of this chapter;
16	(3) is disqualified from intervening in a civil action brought under
17	section 4 of this chapter concerning a possible violation of section
18	2 of this chapter;
19	(4) elects not to bring a civil action concerning a possible
20	violation of section 2 of this chapter; or
21	(5) elects not to intervene under section 4 of this chapter;
22	the attorney general shall certify the attorney general's disqualification
23	or election to the inspector general.
24	(f) If the attorney general has certified the attorney general's
25	disqualification or election not to bring a civil action or intervene in a
26	case under subsection (e), the inspector general has authority to:
27	(1) bring a civil action concerning a possible violation of section
28	2 of this chapter; or
29	(2) intervene in a case under section 4 of this chapter.
30	(g) The attorney general shall certify to the inspector general the
31	attorney general's disqualification or election under subsection (e) in a
32	timely fashion, and in any event not later than:
33	(1) sixty (60) days after being served, if the attorney general has
34	been served by a person who has filed a civil action under section
35	4 of this chapter; or
36	(2) one hundred eighty (180) days before the expiration of the
37	statute of limitations, if the attorney general has not been served
38	by a person who has filed a civil action under section 4 of this
39	chapter.
40	(h) A civil action brought under section 4 of this chapter may be
41	filed in:

(1) a circuit or superior court in Marion County; or



1	(2) a circuit or superior court in the county in which a defendant
2	or plaintiff resides.
3	(i) (h) The state is not required to file a bond under this chapter.
4	SECTION 5. IC 5-11-5.7-4, AS ADDED BY P.L.197-2013,
5	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
6	JULY 1, 2014]: Sec. 4. (a) A person may bring a civil action for a
7	violation of section 2 of this chapter on behalf of the person and on
8	behalf of the state. The action:
9	(1) must be brought in the name of the state; and
10	(2) may be filed in any court with jurisdiction. a circuit or
11	superior court in:
12	(A) the county in which the person resides;
13	(B) the county in which a defendant resides; or
14	(C) Marion County.
15	(b) Except as provided in section 5 of this chapter, An action
16	brought under this section may be dismissed voluntarily by the
17	person bringing the action only if:
18	(1) the person obtains the prior written consent of the attorney
19	general or the inspector general, if applicable; files a written
20	motion to dismiss explaining why dismissal is appropriate; and
21 22	(2) the court issues an order:
22	(A) granting the motion; and
23	(B) explaining the court's reasons for granting the motion.
24	(c) A person who brings an action under this section shall serve:
25	(1) a copy of the complaint; and
26	(2) a written disclosure that describes all relevant material
27	evidence and information the person possesses;
28	on both the attorney general and the inspector general. The person shall
29	file the complaint under seal, and the complaint shall remain under seal
30	for at least sixty (60) days. The complaint shall not be served on the
31	defendant until the court orders the complaint served on the defendant
32	following the intervention or the election not to intervene of the
33	attorney general or the inspector general. The state may elect to
34	intervene and proceed with the action not later than sixty (60) days
35	after it receives both the complaint and the written disclosure.
36	(d) For good cause shown, the attorney general or the inspector
37	general may move the court to extend the time during which the
38	complaint must remain under seal. A motion for extension may be
39	supported by an affidavit or other evidence. The affidavit or other



41 42 evidence may be submitted in camera.

(e) Before the expiration of the time during which the complaint is

sealed, the attorney general or the inspector general may:

1	(1) intervene in the case and proceed with the action, in which
2	case the attorney general or the inspector general shall conduct
3	the action; or
4	(2) elect not to proceed with the action, in which case the person
5	who initially filed the complaint may proceed with the action.
6	(f) The defendant in an action filed under this section is not required
7	to answer the complaint until twenty-one (21) days after the complaint
8	has been unsealed and served on the defendant.
9	(g) After a person has filed a complaint under this section, no person
10	other than the attorney general or the inspector general may:
11	(1) intervene; or
12	(2) bring another action based on the same facts.
13	(h) If the person who initially filed the complaint:
14	(1) planned and initiated the violation of section 2 of this chapter;
15	or
16	(2) has been convicted of a crime related to the person's violation
17	of section 2 of this chapter;
18	upon motion of the attorney general or the inspector general, the court
19	shall dismiss the person as a plaintiff.
20	SECTION 6. IC 5-11-5.7-5, AS ADDED BY P.L.197-2013,
21	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
22	JULY 1, 2014]: Sec. 5. (a) If the attorney general or the inspector
23	general intervenes in an action under section 4 of this chapter, the
24	attorney general or the inspector general is responsible for prosecuting
25	the action and is not bound by an act of the person who initially filed
26	the complaint. The attorney general or the inspector general may do the
27	following:
28	(1) File a complaint.
29	(2) Amend the complaint of a person who has brought an action
30	under section 4 of this chapter, to:
31	(A) clarify or add detail to the claims in which the state is
32	intervening; or
33	(B) add additional claims to which the state contends the state
34	is entitled to relief.
35	(3) Move for a change of venue to Marion County if the attorney
36	general or the inspector general files a motion for change of venue
37	not later than ten (10) days after the attorney general or the
38	inspector general intervenes.
39	For statute of limitation purposes, a pleading filed by the attorney
40	general or the inspector general relates back to the filing date of the
41	complaint of the person who originally brought the action, to the extent

that the claim of the state arises out of the conduct, transactions, or



occurrences set forth, or attempted to be set forth, in the original filed
complaint. Except as provided in this section, the person who initially
filed the complaint may continue as a party to the action.

- (b) With the approval of the court, the attorney general or the inspector general may dismiss the action after:
  - (1) notifying the person who initially filed the complaint; and
  - (2) the court has conducted a hearing at which the person who initially filed the complaint was provided the opportunity to be heard on the motion.

The court may consider a request by the attorney general or the inspector general to dismiss the action but is not bound by the request. Additionally, the court may permit the attorney general or inspector general to be dismissed from withdraw his or her appearance in the case and may permit the person who initially filed the complaint to continue to prosecute the action in the name of the state.

- (c) The attorney general or the inspector general may settle the action if a court determines, after a hearing, that the proposed settlement is fair, adequate, and reasonable in light of the circumstances. Upon a showing of good cause, the court may:
  - (1) conduct the settlement hearing in camera; or
  - (2) lift all or part of the seal to facilitate the investigative process or settlement.

The court may consider an objection to the settlement brought by the person who initially filed the complaint, but is not bound by this objection.

- (d) Upon a showing by the attorney general, the inspector general, or the defendant that unrestricted participation by the person who initially filed the complaint:
  - (1) will interfere with or unduly delay the prosecution of the case by the attorney general or the inspector general;
  - (2) will involve the presentation of repetitious or irrelevant evidence, or evidence introduced for purposes of harassment; or
  - (3) will cause the defendant to suffer undue burden or unnecessary expense;

the court may impose reasonable limitations on the person's participation, including a limit on the number of witnesses that the person may call, a limit to the length of testimony that the person's witness may present, a limit to the person's cross-examination of a witness, or otherwise limit the participation by the person in the litigation.

(e) If the attorney general or the inspector general elects not to intervene in the action, the person who initially filed the complaint has



the right to prosecute the action. Upon request, the attorney general or the inspector general shall be served with copies of all documents filed in the action and may obtain a copy of depositions and other transcripts at the state's expense.

(f) If the attorney general and the inspector general have elected not to intervene in an action in accordance with section 4 of this chapter, upon a showing of good cause, a court may permit either the attorney general or the inspector general to intervene at a later time. The attorney general may move to intervene at any time. If the attorney general has not moved to intervene, the inspector general may move to intervene by providing written notice to the attorney general of the inspector general's intent to intervene. If the attorney general does not move to intervene earlier than fifteen (15) days after receipt of the notice of intent to intervene, the inspector general may move to intervene. If the attorney general or the inspector general intervenes under this subsection, the attorney general or the inspector general is responsible for prosecuting the action as if the attorney general or the inspector general or the inspector general had intervened in accordance with section 4 of this chapter.

(g) If the attorney general or inspector general shows that a specific discovery action by the person who initially filed the complaint will interfere with the investigation or prosecution of a civil or criminal matter arising out of the same facts, the court may, following a hearing in camera, stay discovery for not more than sixty (60) days. After the court has granted a sixty (60) day stay, the court may extend the stay, following a hearing in camera, if it determines that the state has pursued the civil or criminal investigation with reasonable diligence and that a specific discovery action by the person who initially filed the complaint will interfere with the state's investigation or prosecution of the civil or criminal matter.

(h) A court may dismiss an action brought under this chapter to permit the attorney general or the inspector general to pursue its claim through an alternative proceeding, including an administrative proceeding or a proceeding brought in another jurisdiction. The person who initially filed the complaint has the same rights in the alternative proceedings as the person would have had in the original proceedings. A finding of fact or conclusion of law made in the alternative proceeding is binding on all parties to an action under this section once the determination made in the alternative proceeding is final under the rules, regulations, statutes, or law governing the alternative proceeding, or if the time for seeking an appeal or review of the determination made in the alternative proceeding has elapsed.



1	SECTION 7. IC 5-11-5.7-6, AS ADDED BY P.L.197-2013,
2	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 6. (a) The person who initially filed the complaint
4	is entitled to the following amounts if the state prevails in the action:
5	(1) Except as provided in subdivision (2), if the attorney general
6	or the inspector general intervened in the action, the person is
7	entitled to receive at least fifteen percent (15%) and not more than
8	twenty-five percent (25%) of the proceeds of the action or
9	settlement, plus reasonable attorney's fees and an amount to cover
10	the expenses and costs of bringing the action.
11	(2) If the attorney general or the inspector general intervened in
12	the action and the court finds that the evidence used to prosecute
13	the action consisted primarily of specific information, other than
14	information provided by the person bringing the action, contained
15	in:
16	(A) a transcript of a criminal, a civil, or an administrative
17	hearing;
18	(B) a legislative, an administrative, or another public <b>state</b>
19	report, hearing, audit, or investigation; or
20	(C) a news media report;
21	the person is entitled to receive not more than ten percent (10%)
22	of the proceeds of the action or settlement, taking into account the
23	significance of the information and the role of the person bringing
24	the action in advancing the case to litigation, plus reasonable
25	attorney's fees and an amount to cover the expenses and costs of
26	bringing the action.
27	(3) If the attorney general or the inspector general did not
28	intervene in the action, the person is entitled to receive at least
29	twenty-five percent (25%) and not more than thirty percent (30%)
30	of the proceeds of the action or settlement, plus reasonable
31	attorney's fees and an amount to cover the expenses and costs of
32	bringing the action.
33	
34	<ul><li>(4) If the person who initially filed the complaint:</li><li>(A) planned and initiated the violation of section 2 of this</li></ul>
35	* * *
36	chapter; or
	(B) has been convicted of a crime related to the person's
37	violation of section 2 of this chapter;
38	the person is not entitled to an amount under this section.
39	After conducting a hearing at which the attorney general or the
40	inspector general and the person who initially filed the complaint may
41	be heard, the court shall determine the specific amount to be awarded
42	under this section to the person who initially filed the complaint. The



1	award of reasonable attorney's fees plus an amount to cover the
2	expenses and costs of bringing the action is an additional cost assessed
3	against the defendant and may not be paid from the proceeds of the
4	civil action.
5	(b) If:
6	(1) the attorney general or the inspector general did not intervene
7	in the action; and
8	(2) the defendant prevails;
9	the court may award the defendant reasonable attorney's fees plus an
10	amount to cover the expenses and costs of defending the action, if the
11	court finds that the action is frivolous, vexatious, or brought primarily
12	for purposes of harassment.
13	(c) The state is not liable for the expenses, costs, or attorney's fees
14	of a party to an action brought under this chapter.
15	SECTION 8. IC 5-11-5.7-7, AS ADDED BY P.L.197-2013,
16	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
17	JULY 1, 2014]: Sec. 7. (a) This section does not apply to an action
18	brought by:
19	(1) the attorney general;
20	(2) the inspector general;
21	(3) a prosecuting attorney; or
22	(4) a state employee in the employee's official capacity.
23	(b) A court does not have jurisdiction over an action brought under
24	section 4 of this chapter if the action is brought by an incarcerated
25	offender, including an offender incarcerated in another jurisdiction.
26	(c) A court does not have jurisdiction over an action or claim
27	brought under section 4 of this chapter against the state, a state officer,
28	a judge (as defined in IC 33-23-11-7), a justice, a member of the
29	general assembly, a state employee, or an employee of a political
30	subdivision, if the action or claim is based on information known to
31	the state at the time the action was brought.
32	(d) A court does not have jurisdiction over an action brought under
33	section 4 of this chapter if the action is based upon an act that is the
34	subject of a civil suit, a criminal prosecution, or an administrative
35	proceeding in which the state is a party.
36	(e) A court does not have jurisdiction over an action brought under
37	section 4 of this chapter if the action is based upon information
38	contained in:
39	(1) a transcript of a criminal, a civil, or an administrative hearing
40	in which the state or the state's agent is a party;

(2) a legislative, an administrative, or another public state report,



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hearing, audit, or investigation; or

1	(3) a news media report;
2	unless the person bringing the action either, before a public disclosure
3	under this section voluntarily discloses to the state the information on
4	which the allegations or transactions in a claim are based, or has
5	knowledge that is independent of and materially adds to the publicly
6	disclosed allegations or transactions, and the person bringing the action
7	has voluntarily provided this information to the state before an action
8	is filed under section 4 of this chapter.
9	(f) In determining whether a prior public disclosure bars a court
10	from exercising jurisdiction over an action brought under section 4 of
11	this chapter, the court shall consider, but is not bound by, any objection
12	brought by the attorney general or the inspector general.
13	SECTION 9. IC 5-11-5.7-8, AS ADDED BY P.L.197-2013,
14	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
15	JULY 1, 2014]: Sec. 8. (a) An employee, contractor, or agent who has
16	been discharged, demoted, suspended, threatened, harassed, or
17	otherwise discriminated against in the terms and conditions of
18	employment because of lawful acts done by the employee, contractor,
19	agent, or associated others to:
20	(1) object to or otherwise stop an act or omission described in
21	section 2 of this chapter; or
22	(2) initiate, testify, assist, or participate in an investigation, an
23	action, or a hearing; <del>under this chapter;</del> <b>or</b>
24	(3) perform any other lawful act in furtherance of other
25	efforts to stop one (1) or more violations under this chapter;
26	is entitled to all relief necessary to make the employee, contractor, or
27	agent whole.
28	(b) Relief under this section must include:
29	(1) reinstatement with the same seniority status the employee,
30	contractor, or agent would have had but for the act described in
31	subsection (a);
32	(2) two (2) times the amount of back pay;
33	(3) interest on the back pay; and
34	(4) compensation for any special damages sustained as a result of
35	the act described in subsection (a), including costs and expenses
36	of litigation and reasonable attorney's fees.
37	(c) An employee, <b>contractor</b> , <b>or agent</b> may bring an action for the
38	relief provided in this section in any court with jurisdiction.
39	(d) A civil action under this section may not be brought more than
40	three (3) years after the date the retaliation occurred.
41	SECTION 10. IC 5-11-5.7-9, AS ADDED BY P.L.197-2013,

SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



JULY 1, 2014]: Sec. 9. (a) A subpoena requiring the attendance of a witness at a trial or hearing conducted under this chapter may be served
at any place in Indiana.
(b) A civil action under section 4 of this chapter is barred unless it
is commenced:
(1) not later than six (6) years after the date on which the violation

- (2) not later than three (3) years after the date when facts material to the cause of action are known or reasonably should have been known by a state officer or employee who is responsible for addressing the false claim, However, an action is barred unless it is commenced not but in no event later than ten (10) years after the date on which the violation is committed, whichever occurs later.
- (c) In a civil action brought under this chapter, the state is required to establish:
  - (1) the essential elements of the offense; and
  - (2) damages;

is committed; or

by a preponderance of the evidence.

(d) If a defendant has been convicted (including a plea of guilty or nolo contendere) of a crime involving fraud or a false statement, the defendant is estopped from denying the elements of the offense in a civil action brought under section 4 of this chapter that involves the same transaction as the criminal prosecution.

SECTION 11. IC 5-11-5.7-10, AS ADDED BY P.L.197-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 10. (a) Whenever the attorney general, the inspector general, or the designee of the attorney general or the inspector general has reason to believe that a person may be in possession, custody, or control of documentary material, **electronically stored information, a tangible thing,** or information relevant to an investigation under this chapter involving a false claim, the attorney general, the inspector general, or the designee of the attorney general or inspector general may, before commencing a civil proceeding under this chapter, issue and serve a civil investigative demand requiring the person to do one (1) or more of the following:

- (1) Produce the documentary material, **electronically stored information**, **or tangible thing** for inspection and copying.
- (2) Answer an interrogatory in writing concerning the documentary material, **electronically stored information**, **tangible thing**, or information.
- (3) Give oral testimony concerning the documentary material,



electronically stored information, tangible thing, or

(4) Furnish any combination of material, other evidence,
answers, or testimony.
(b) If a civil investigative demand is a specific demand for a product
of discovery, the official issuing the civil investigative demand shall:
(1) serve a copy of the civil investigative demand on the person
from whom the discovery was obtained; and
(2) notify the person to whom the civil investigative demand is
issued of the date of service.
SECTION 12. IC 5-11-5.7-14, AS ADDED BY P.L.197-2013,
SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2014]: Sec. 14. (a) The production of documentary material
in response to a civil investigative demand served under this chapter
shall be made in accordance with Trial Rule 34 the rules of civil
procedure concerning the production of documents, electronically
stored information, and tangible things.
(b) Each interrogatory in a civil investigative demand served under
this chapter shall be answered in accordance with <del>Trial Rule 33.</del> the
rules of civil procedure concerning interrogatories.
(c) The examination of a person under a civil investigative demand
for oral testimony served under this chapter shall be conducted in
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accordance with Trial Rule 30. the rules of civil procedure
concerning oral depositions.
concerning oral depositions.  SECTION 13. IC 5-11-5.7-16, AS ADDED BY P.L.197-2013,
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concerning oral depositions.  SECTION 13. IC 5-11-5.7-16, AS ADDED BY P.L.197-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 16. (a) A person who has failed to comply with a civil investigative demand is subject to sanctions under Trial Rule 37
concerning oral depositions.  SECTION 13. IC 5-11-5.7-16, AS ADDED BY P.L.197-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 16. (a) A person who has failed to comply with a civil investigative demand is subject to sanctions under Trial Rule 37 the rules of civil procedure to the same extent as a person who has
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information.

1	asset" means the following:
2	(1) For purposes of IC 12-10-10, in determining eligibility for
3	the community and home options to institutional care for the
4	elderly and disabled program, property that is included in
5	determining assets in the same manner as determining an
6	individual's eligibility for the Medicaid aged and disabled
7	waiver.
8	(2) For purposes of IC 12-20, means noncash property that is not
9	necessary for the health, safety, or decent living standard of a
10	household that:
11	(1) (A) is owned wholly or in part by the applicant or a
12	member of the applicant's household;
13	(2) (B) the applicant or the household member has the legal
14	right to sell or liquidate; and
15	(3) (C) includes:
16	(A) (i) real property other than property that is used for the
17	production of income or that is the primary residence of the
18	household;
19	(B) (ii) savings and checking accounts, certificates of
20	deposit, bonds, stocks, and other intangibles that have a net
21	cash value; and
22	(C) (iii) boats, other vehicles, or any other personal property
23	used solely for recreational or entertainment purposes.
24	SECTION 16. IC 12-7-2-49.5 IS ADDED TO THE INDIANA
25	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
26	[EFFECTIVE JANUARY 1, 2015]: 1, 2014]: Sec. 49.5. "CPI", for
27	purposes of IC 12-10-10, has the meaning set forth in
28	IC 12-10-10-2.5.
29	SECTION 17. IC 12-8-1.5-10.5 IS ADDED TO THE INDIANA
30	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
31	[EFFECTIVE UPON PASSAGE]: Sec. 10.5. (a) The office of the
32	secretary is designated as the single state agency for administration
33	of the state Medicaid program under IC 12-15.
34	(b) The office of the secretary shall develop and coordinate
35	Medicaid policy for the state.
36	SECTION 18. IC 12-8-6.5-3 IS REPEALED [EFFECTIVE UPON
37	PASSAGE]. Sec. 3. The office is designated as the single state agency
38	for administration of the state Medicaid program under IC 12-15.
39	SECTION 19. IC 12-8-6.5-4, AS ADDED BY P.L.160-2012,
40	SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
41	UPON PASSAGE]: Sec. 4. Under the direction of the secretary, the
42	office shall develop and coordinate Medicaid policy for the state.



1	SECTION 20. IC 12-10-10-1 IS AMENDED TO READ AS
2	FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 1. As used in this
3	chapter, "case management" means an administrative function
4	conducted locally by an area agency on aging that includes the
5	following:
6	(1) Assessment of an individual to determine the individual's
7	functional impairment level and corresponding need for services
8	(2) Initial verification of an individual's income and assets.
9	(2) (3) Development of a care plan addressing that:
10	(A) addresses an eligible individual's needs;
11	(B) takes into consideration the individual's family and
12	community members who are willing to provide services to
13	meet any of the individual's needs; and
14	(C) is consistent with a person centered approach to client
15	care.
16	(3) (4) Supervision of the implementation of appropriate and
17	available services for an eligible individual.
18	(4) (5) Advocacy on behalf of an eligible individual's interests.
19	(5) (6) Monitoring the quality of community and home care
20	services provided to an eligible individual.
21	(6) (7) Reassessment of the care plan to determine:
22	(A) the continuing need and effectiveness of the community
23	and home care services provided to an eligible individual
24	under this chapter; and
25	(B) the annual reverification of a plan recipient's income
26	and assets, as may be required by the division under
27	section 4(e) of this chapter.
28	(7) (8) Provision of information and referral services to
29	individuals in need of community and home care services.
30	SECTION 21. IC 12-10-10-2.5 IS ADDED TO THE INDIANA
31	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
32	[EFFECTIVE JANUARY 1, 2015]: Sec. 2.5. As used in this chapter,
33	"CPI" refers to the United States Bureau of Labor Statistics
34	Consumer Price Index, all items, all urban consumers, or its
35	successor index.
36	SECTION 22. IC 12-10-10-4, AS AMENDED BY P.L.99-2007
37	SECTION 64, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
38	JANUARY 1, 2015]: Sec. 4. (a) As used in this chapter, "eligible
39	individual" means an individual who meets the following criteria:
40	(1) Is a resident of Indiana.
41	(2) Is:
42	(A) at least sixty (60) years of age; or



1	(B) an individual with a disability.
2	(3) Has assets that meet the following criteria:
3	(A) For an individual who participates in the program and
4	whose date of application for the program is before
5	January 1, 2015, assets that do not exceed five hundred
6	thousand dollars (\$500,000), as determined by the division
7	<del>and</del>
8	(B) For an individual whose date of application for the
9	program is after December 31, 2014, countable assets that
10	do not exceed two hundred fifty thousand dollars
11	(\$250,000) adjusted by the CPI, as set forth in subsection
12	(c). In determining assets under this clause, the division
13	shall exclude an additional twenty thousand dollars
14	(\$20,000) in countable assets, as adjusted by the CPI as set
15	forth in subsection (c).
16	(4) Qualifies under criteria developed by the board as having ar
17	impairment that places the individual at risk of losing the
18	individual's independence, as described in subsection (b).
19	(b) For purposes of subsection (a), an individual is at risk of losing
20	the individual's independence if the individual is unable to perform any
21	of the following:
22	(1) Two (2) or more activities of daily living. The use by or or
23	behalf of the individual of any of the following services or devices
24	does not make the individual ineligible for services under this
25	chapter:
26	(1) (A) Skilled nursing assistance.
27	(2) (B) Supervised community and home care services
28	including skilled nursing supervision.
29	(3) (C) Adaptive medical equipment and devices.
30	(4) (D) Adaptive nonmedical equipment and devices.
31	(2) One (1) activity of daily living if, using the needs based
32	assessment established under section 13(1) of this chapter, the
33	area agency on aging determines that addressing the single
34	activity of daily living would significantly reduce the
35	likelihood of the individual's loss of independence and the
36	need for additional services.
37	(3) An activity if, using the needs based assessment established
38	under section 13(1) of this chapter, the area agency on aging
39	determines that targeted intervention or assistance with the
40	activity would significantly reduce the likelihood of the
41	individual's loss of independence and the need for additional
42	services.



1	(c) Before June 1, 2015, and before June 1 of each subsequent
2	year, the division shall determine an adjusted asset limit to be used
3	for purposes of subsection (a)(3)(B), subsection (d)(4), and section
4	13 of this chapter in the following state fiscal year. The adjusted
5	asset limit for the following state fiscal year shall be determined as
6	follows:
7	STEP ONE: Determine the percentage change between:
8	(A) the CPI as last reported for the calendar year ending
9	in the state fiscal year in which the determination is made;
10	and
11	(B) the CPI as last reported for the calendar year that
12	precedes the calendar year described in clause (A).
13	STEP TWO: Express the percentage change determined in
14	STEP ONE as a two (2) digit decimal rounded to the nearest
15	hundredth. A negative percentage change under this STEP
16	must be treated as zero (0).
17	STEP THREE: Add one (1) to the STEP TWO result.
18	STEP FOUR: Multiply:
19	(A) the STEP THREE result; by
20	(B) the asset limit used for purposes of subsection (a)(3)(B)
21	in the state fiscal year in which the determination is made
22	Before June 15, 2015, and before June 15 of each subsequent year
23	the division shall publish in the Indiana Register the adjusted asset
24	limit to be used for purposes of subsection (a)(3)(B) in the following
25	state fiscal year.
26	(d) The division shall, in accordance with standards established
27	under section 13(3) of this chapter, establish a cost participation
28	schedule for a program recipient based on the program
29	participant's income and countable assets. The cost participation
30	schedule must meet the following:
31	(1) Exclude from cost participation an eligible individual
32	whose income and countable assets do not exceed one hundred
33	fifty percent (150%) of the federal income poverty level.
34	(2) Exclude from cost participation for the total services
35	provided to an individual under the program unless the
36	eligible individual's income and countable assets exceed three
37	hundred fifty percent (350%) of the federal income poverty
38	level.
39	(3) In calculating income and countable assets for an eligible
40	individual, deduct the medical expenses of the following:
41	(A) The individual.
42	(B) The spouse of the individual.



1	(C) The dependent children of the individual.
2	(4) Exclude twenty thousand dollars (\$20,000) of a
3	participant's countable assets, as adjusted by CPI, from
4	consideration in determining a participant's cost
5	participation.
6	The cost participation schedule established under this subsection
7	may be applied only to an individual whose date of application for
8	the program is after December 31, 2014.
9	(e) The division may require annual reverification for program
10	participants whom the division determines are likely to experience
11	a material increase in income or assets. An individual shall submi
12	the information requested by the division to carry out the
13	redetermination allowed by this subsection.
14	(f) The division may not require a family or other person to
15	provide services as a condition of an individual's eligibility for or
16	participation in the program.
17	SECTION 23. IC 12-10-10-7 IS AMENDED TO READ AS
18	FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 7. (a) Except as
19	provided in subsection (b), the case management under this chapter of
20	an individual leading to participation in the program may not be
21	conducted by any agency that delivers services under the program.
22	(b) If the division determines that there is no alternative agency
23	capable of delivering services to the individual, the area agency or
24	aging that performs the assessment under the program may also delive
25	the services.
26	(c) The division shall provide the necessary funding to provide
27	case management services for the program, as determined under
28	section 13(2) of this chapter.
29	SECTION 24. IC 12-10-10-9 IS AMENDED TO READ AS
30	FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 9. (a) The
31	division shall establish a program to train relatives of eligible
32	individuals to provide homemaker and personal care services to those
33	eligible individuals.
34	(b) Relatives of eligible individuals who complete the training
35	program established under this section are eligible for reimbursemen
36	under this chapter or under the Medicaid program for the provision of
37	homemaker and personal care services to those eligible individuals
38	Reimbursement under the Medicaid program is limited to those cases
39	in which the provision of homemaker and personal care services to ar
40	eligible individual by a relative results in financial hardship to the
41	relative.

(c) For services that an individual is eligible to receive under the



1	program but receives from a relative or other individual without
2	receiving compensation, the area agency on aging shall:
3	(1) determine, in accordance with section 13(4) of this
4	chapter, the savings from not paying for these services; and
5	(2) allocate twenty percent (20%) of the savings calculated
6	under subdivision (1) to offset the individual's cost share
7	amount, if any, for participating in the program.
8	SECTION 25. IC 12-10-10-13 IS ADDED TO THE INDIANA
9	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
10	[EFFECTIVE UPON PASSAGE]: Sec. 13. The division and the area
11	agencies on aging shall jointly develop policies that establish the
12	following:
13	(1) A needs based assessment to be used in determining a
14	client's needs and care plan under section 1(3) of this chapter.
15	(2) The percentage of program dollars adequate to provide
16	case management services.
17	(3) A cost participation schedule for program recipients as
18	required by section 4(d) of this chapter.
19	(4) Procedures for determining cost savings as required by
20	section 9(c) of this chapter.
21	(5) Program performance measures for the area agencies on
22	aging.
23	SECTION 26. IC 12-10-10-14 IS ADDED TO THE INDIANA
24	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
25	[EFFECTIVE JANUARY 1, 2015]: Sec. 14. (a) This section applies
26	only to an individual whose date of application for the program is
27	after December 31, 2014.
28	(b) The division may obtain a lien on the program recipient's
29	real property for the cost of services provided to the individual in
30	the program if the cost of the services exceeds twenty thousand
31	dollars (\$20,000), as adjusted by the CPI under section 4(c) of this
32	chapter, in the same manner and with the same requirements as
33	the office obtains a lien against a Medicaid recipient under
34	IC 12-15-8.5, except that there may be no look back of the program
35	recipient's property as required under the Medicaid program in
36	IC 12-15-8.5-2.
37	(c) The division may adopt rules necessary under IC 4-22-2 to
38	implement this section.
39	SECTION 27. IC 12-10-11-8, AS AMENDED BY P.L.143-2011,
40	SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
41	JANUARY 1, 2015]: Sec. 8. The board shall do the following:
42	(1) Establish long term goals of the state for the provision of a



1	continuum of care for the elderly and individuals with a disability
2	based on the following:
3	(A) Individual independence, dignity, and privacy.
4	(B) Long term care services that are:
5	(i) integrated, accessible, and responsible; and
6	(ii) available in home and community settings.
7	(C) Individual choice in planning and managing long term
8	care.
9	(D) Access to an array of long term care services:
10	(i) for an individual to receive care that is appropriate for the
11	individual's needs; and
12	(ii) to enable a case manager to have cost effective
13	alternatives available in the construction of care plans and
14	the delivery of services.
15	(E) Long term care services that include home care
16	community based services, assisted living, congregate care,
17	adult foster care, and institutional care.
18	(F) Maintaining an individual's dignity and self-reliance to
19	protect the fiscal interests of both taxpayers and the state.
20	(G) Long term care services that are fiscally sound.
21	(H) Services that:
22	(i) promote behavioral health; and
23	(ii) prevent and treat mental illness and addiction.
24	(2) Review state policies on community and home care services.
25	(3) Recommend the adoption of rules under IC 4-22-2.
26	(4) Recommend legislative changes affecting community and
27	home care services.
28	(5) Recommend the coordination of the board's activities with the
29	activities of other boards and state agencies concerned with
30	community and home care services.
31	(6) Evaluate cost effectiveness, quality, scope, and feasibility of
32	a state administered system of community and home care
33	services.
34	(7) Evaluate programs for financing services to those in need of
35	a continuum of care.
36	(8) Evaluate state expenditures for community and home care
37	services, taking into account efficiency, consumer choice,
38	competition, and equal access to providers.
39	(9) Develop policies that support the participation of families and
40	volunteers in meeting the long term care needs of individuals.
41	(10) Encourage the development of funding for a continuum of
42	care from private resources, including insurance.



1	(11) Develop a cost of services basis and a program of cost
2	reimbursement for those persons who can pay all or a part of the
3	cost of the services rendered. The division shall use this cost of
4	services basis and program of cost reimbursement in
5	administering IC 12-10-10. The cost of services basis and
6	program of cost reimbursement must include a client cost share
7	<del>formula that:</del>
8	(A) imposes no charges for an eligible individual whose
9	income does not exceed one hundred fifty percent (150%) of
10	the federal income poverty level; and
11	(B) does not impose charges for the total cost of services
12	provided to an individual under the community and home
13	options to institutional care for the elderly and disabled
14	program unless the eligible individual's income exceeds three
15	hundred fifty percent (350%) of the federal income poverty
16	<del>level.</del>
17	The calculation of income for an eligible individual must include
18	the deduction of the individual's medical expenses and the
19	medical expenses of the individual's spouse and dependent
20	children who reside in the eligible individual's household.
21	(12) (11) Establish long term goals for the provision of
22	guardianship services for adults.
23	(13) (12) Coordinate activities and programs with the activities of
24	other boards and state agencies concerning the provision of
25	guardianship services.
26	(14) (13) Recommend statutory changes affecting the
27	guardianship of indigent adults.
28	(15) (14) Review a proposed rule concerning home and
29	community based services as required under section 9 of this
30	chapter.
31	SECTION 28. IC 12-15-1-1 IS AMENDED TO READ AS
32	FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The office of
33	Medicaid policy and planning of the secretary shall administer the
34	Medicaid program under 42 U.S.C. 1396 et seq.
35	SECTION 29. IC 12-15-13-0.4, AS ADDED BY P.L.117-2008,
36	SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
37	UPON PASSAGE]: Sec. 0.4. As used in this chapter, "office" includes
38	the following:
39	(1) The office of Medicaid policy and planning: the secretary of
40	family and social services.
41	(2) A managed care organization that has contracted with the

office of Medicaid policy and planning under this article.



1	(3) A person that has contracted with a managed care organization
2	described in subdivision (2).
3	SECTION 30. IC 16-18-2-84, AS AMENDED BY P.L.197-2011,
4	SECTION 54, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
5	JULY 1, 2014]: Sec. 84. "Council", refers to the following:
6	(1) For purposes of IC 16-21, IC 16-25, IC 16-27, IC 16-28, and
7	IC 16-29, the health care facility advisory council.
8	(2) for purposes of IC 16-46-6, <b>refers to</b> the interagency state
9	council on black and minority health.
10	SECTION 31. IC 16-18-2-199 IS AMENDED TO READ AS
11	FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 199. "Legend drug", for
12	purposes of IC 16-42, means a drug that is:
13	(1) subject to 21 U.S.C. 353(b)(1); or
14	(2) listed in the Prescription Drug Product List as:
15	(A) published in United States Department of Health and
16	Human Services Approved Drug Products with Therapeutic
17	Equivalence Evaluations, Tenth Edition, (1990); and
18	(B) revised in United State Department of Health and Human
19	Services, Approved Drug Products with Therapeutic
20	Equivalence Evaluations, Cumulative Supplement to the Tenth
21	Edition, Number 10 (1990); <b>or</b>
22	(3) insulin.
23	SECTION 32. IC 16-19-15 IS REPEALED [EFFECTIVE JULY 1,
24	2014]. (Health Care Facility Advisory Council).
25	SECTION 33. IC 16-21-1-7, AS AMENDED BY P.L.96-2005,
26	SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
27	JULY 1, 2014]: Sec. 7. (a) Except as provided in subsection (b), the
28	council shall propose and The executive board may adopt rules under
29	IC 4-22-2 necessary to protect the health, safety, rights, and welfare of
30	patients, including the following:
31	(1) Rules pertaining to the operation and management of
32	hospitals, ambulatory outpatient surgical centers, abortion clinics,
33	and birthing centers.
34	(2) Rules establishing standards for equipment, facilities, and
35	staffing required for efficient and quality care of patients.
36	(b) The state department may request the council to propose a new
37	rule or an amendment to an existing rule necessary to protect the
38	health, safety, rights, and welfare of patients. If the council does not
39	propose a rule within ninety (90) days of the department's request, the
40	department may propose its own rule.

(c) The state department shall consider the rules proposed by the

council and may adopt, modify, remand, or reject specific rules or parts



of rules proposed by the council.

SECTION 34. IC 16-21-1-10, AS AMENDED BY P.L.1-2006, SECTION 295, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 10. (a) Licensure inspections of an institution or agency shall be made regularly in accordance with rules adopted under this chapter. The state department shall make all health and sanitation inspections, including inspections in response to an alleged breach of this chapter or rules adopted under this chapter. The division of fire and building safety shall make all fire safety inspections. The council may provide for other inspections necessary to implement this chapter.

- (b) An employee of the state department who knowingly or intentionally informs an institution or agency of the exact date of an unannounced inspection shall be suspended without pay for five (5) days for a first offense and shall be dismissed for a subsequent offense.
- (c) Reports of all inspections must be in writing and sent to the institution or agency.
- (d) The report of an inspection and records relating to the inspection may not be released to the public until the conditions set forth in IC 16-19-3-25 are satisfied.

SECTION 35. IC 16-21-2-4 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 4. The state department shall administer this chapter with the advice of the council.

SECTION 36. IC 16-25-3-2.5 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 2.5. The state department shall administer this chapter with the advice of the health care facility advisory council established by IC 16-19-15-1.

SECTION 37. IC 16-27-0.5-9, AS AMENDED BY P.L.6-2012, SECTION 117, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) The state department may request the health eare facility advisory council to propose a new rule or an amendment to a rule adopt rules under IC 4-22-2 necessary to protect the health, safety, rights, and welfare of the home health care patients and hospice patients. If the council does not propose a rule within ninety (90) days after the state department's request, the state department may propose the rule.

- (b) The executive board shall consider rules proposed by the council under this section. The executive board may adopt, modify, remand, or reject specific rules or parts of rules proposed by the council.
- (c) To become effective, all rules proposed by the council under this chapter must be adopted by the executive board in accordance with IC 4-22-2.



1	SECTION 38. IC 16-28-1-7, AS AMENDED BY P.L.156-2011,
2	SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 7. The council state department shall do the
4	following:
5	(1) Propose the adoption of Adopt rules by the department under
6	IC 4-22-2 governing the following:
7	(A) Health and sanitation standards necessary to protect the
8	health, safety, security, rights, and welfare of patients.
9	(B) Qualifications of applicants for licenses issued under this
10	article to assure the proper care of patients.
11	(C) Operation, maintenance, management, equipment, and
12	construction of facilities required to be licensed under this
13	article if jurisdiction is not vested in any other state agency.
14	(D) Manner, form, and content of the license, including rules
15	governing disclosure of ownership interests.
16	(E) Levels of medical staffing and medical services in
17	cooperation with the office of Medicaid policy and planning,
18	division of family resources, and other agencies authorized to
19	pay for the services.
20	(2) Recommend to the fire prevention and building safety
21	commission fire safety rules necessary to protect the health,
22	safety, security, rights, and welfare of patients.
23 24	(3) Classify health facilities in health care categories.
24	(4) Act as an advisory body for the division, commissioner, and
25	state department.
26	SECTION 39. IC 16-28-1-9 IS REPEALED [EFFECTIVE JULY 1,
27	2014]. Sec. 9. The council may not waive a rule adopted under this
28	<del>chapter.</del>
29	SECTION 40. IC 16-28-1-12 IS REPEALED [EFFECTIVE JULY
30	1, 2014]. Sec. 12. (a) The department may request the council to
31	propose a new rule or an amendment to a rule necessary to protect the
32	health, safety, rights, and welfare of patients. If the council does not
33	propose a rule not more than ninety (90) days after the department's
34	request, the department may propose its own rule.
35	(b) The executive board may adopt, modify, remand, or reject
36	specific rules or parts of rules proposed by the council.
37	(c) To become effective, all rules adopted under this chapter must
38	be adopted by the executive board in accordance with IC 4-22-2. The
39	rules adopted under this chapter are the only rules governing the
40	licensing and operation of health facilities.
41	SECTION 41. IC 16-28-1-13, AS AMENDED BY P.L.1-2006,

SECTION 299, IS AMENDED TO READ AS FOLLOWS



- [EFFECTIVE JULY 1, 2014]: Sec. 13. (a) Licensure inspections of health facilities shall be made regularly in accordance with rules adopted under this chapter. The division shall make all health and sanitation inspections. The division of fire and building safety shall make all fire safety inspections. The council or the director may provide for other inspections necessary to carry out this chapter.
- (b) The exact date of an inspection of a health facility under this chapter may not be announced or communicated directly or indirectly to the owner, administrator, or an employee of the facility before the inspection. An employee of the state department who knowingly or intentionally informs a health facility of the exact date of an inspection shall be suspended without pay for five (5) days for a first offense and shall be dismissed for a subsequent offense.
  - (c) Reports of all inspections must be:
    - (1) in writing; and

- (2) sent to the health facility.
- (d) The report of an inspection and records relating to the inspection may not be released to the public until the conditions set forth in IC 16-19-3-25 are satisfied.

SECTION 42. IC 16-28-10-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. (a) Hearings under this article shall be conducted in accordance with IC 4-21.5. Except for hearings held on the adoption of rules, an administrative law judge must meet the following conditions:

- (1) Be admitted to the practice of law in Indiana.
- (2) Not be a member of the council or an employee of the state.
- (b) A health facility shall pay the costs of appointing an administrative law judge if the administrative law judge finds in favor of the state. However, if the administrative law judge finds in favor of the health facility, the state shall pay the costs of appointing the administrative law judge.

SECTION 43. IC 16-29-4-3, AS AMENDED BY P.L.6-2012, SECTION 118, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 3. The health care facility advisory council may recommend, Before the conversion of existing health facility beds to ICF/MR beds or the construction of a new ICF/MR facility, that the state department may issue a preliminary approval of the proposed project, but only if the council state department determines that there is an insufficient number of available beds to care for all the persons who are determined under IC 12-11-2.1 to be appropriate for placement in an ICF/MR facility.

SECTION 44. IC 16-29-4-4, AS AMENDED BY P.L.6-2012,



1	SECTION 119, IS AMENDED TO READ AS FOLLOWS
2	[EFFECTIVE JULY 1, 2014]: Sec. 4. A proposed project that receives
3	preliminary approval under this chapter may not add more beds than
4	the number determined by the health care facility advisory council
5	state department to be necessary to provide an available bed for each
6	person determined under IC 12-11-2.1 to be appropriate for placement
7	in an ICF/MR facility. Upon completion of the proposed project and
8	compliance with the other requirements for licensure under IC 16-28.
9	the state department shall issue a license to the facility.
10	SECTION 45. IC 16-36-6-7, AS ADDED BY P.L.164-2013.
11	SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
12	JULY 1, 2014]: Sec. 7. (a) The following individuals may complete a
13	POST form:
14	(1) A qualified person who is:
15	(A) either:
16	(i) at least eighteen (18) years of age; or
17	(ii) less than eighteen (18) years of age but authorized to
18	consent under IC 16-36-1-3(a)(2); and
19	(B) of sound mind.
20	(2) A qualified person's representative, if the qualified person:
21	(A) is less than eighteen (18) years of age and is not authorized
22	to consent under IC 16-36-1-3(a)(2); or
22 23	(B) has been determined to be incapable of making decisions
24	about the qualified person's health care by a treating physician
25	acting in good faith and the representative has been:
26	(i) appointed by the individual under IC 16-36-1-7 to serve
27	as the individual's health care representative;
28	(ii) authorized to act under IC 30-5-5-16 and IC 30-5-5-17
29	as the individual's attorney in fact with authority to consent
30	to or refuse health care for the individual; or
31	(iii) appointed by a court as the individual's guardian health
32	care representative under IC 16-36-1-8; or
33	(iv) appointed by a court as the guardian of the person
34	with the authority to make health care decisions under
35	IC 29-3.
36	(b) In order to complete a POST form, a person described in
37	subsection (a) and the qualified person's treating physician or the
38	physician's designee must do the following:
39	(1) Discuss the qualified person's goals and treatment options
40	available to the qualified person based on the qualified person's
11	hoolth

(2) Complete the POST form, to the extent possible, based on the



<ul> <li>(c) When completing a POST form on behalf of a qualified person a representative shall act:</li> <li>(1) in good faith; and</li> <li>(2) in:</li> <li>(A) accordance with the qualified person's express or implied intentions, if known; or</li> <li>(B) the best interest of the qualified person, if the qualified person's express or implied intentions are not known.</li> <li>(d) A copy of the executed POST form shall be maintained in the qualified person's medical file.</li> <li>SECTION 46. IC 16-37-2-4, AS AMENDED BY P.L.232-2013</li> <li>SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate</li> </ul>	1	qualified person's preferences determined during the discussion
a representative shall act:  (1) in good faith; and  (2) in:  (A) accordance with the qualified person's express or implied intentions, if known; or  (B) the best interest of the qualified person, if the qualified person's express or implied intentions are not known.  (d) A copy of the executed POST form shall be maintained in the qualified person's medical file.  SECTION 46. IC 16-37-2-4, AS AMENDED BY P.L.232-2013 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate	2	in subdivision (1).
(1) in good faith; and (2) in:  (A) accordance with the qualified person's express or implied intentions, if known; or (B) the best interest of the qualified person, if the qualified person's express or implied intentions are not known. (d) A copy of the executed POST form shall be maintained in the qualified person's medical file.  SECTION 46. IC 16-37-2-4, AS AMENDED BY P.L.232-2013 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate		· · · · · · · · · · · · · · · · · · ·
6 (2) in: 7 (A) accordance with the qualified person's express or implied intentions, if known; or 9 (B) the best interest of the qualified person, if the qualified person's express or implied intentions are not known. 11 (d) A copy of the executed POST form shall be maintained in the qualified person's medical file. 13 SECTION 46. IC 16-37-2-4, AS AMENDED BY P.L.232-2013 14 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate		-
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JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate		
, ,		
		JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate
	16	of birth presented for filing not more than four (4) years twelve (12)
months after the birth occurred if the attending physician, certified	17	months after the birth occurred if the attending physician, certified
nurse midwife, certified direct entry midwife, or other person desiring	18	nurse midwife, certified direct entry midwife, or other person desiring
to file the certificate states the reason for the delay in writing. This	19	to file the certificate states the reason for the delay in writing. This
statement shall be made a part of the certificate of birth.	20	statement shall be made a part of the certificate of birth.
21 SECTION 47. IC 16-37-2-5 IS AMENDED TO READ AS	21	SECTION 47. IC 16-37-2-5 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 5. A certificate of birth	22	FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 5. A certificate of birth
presented for filing more than four (4) years twelve (12) months after	23	presented for filing more than four (4) years twelve (12) months after
the birth occurred is a delayed certificate of birth and the record shall	24	the birth occurred is a delayed certificate of birth and the record shall
be filed only with the state department.	25	be filed only with the state department.
26 SECTION 48. IC 16-38-4-1, AS AMENDED BY P.L.232-2013	26	SECTION 48. IC 16-38-4-1, AS AMENDED BY P.L.232-2013,
27 SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE	27	SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
· · · · · · · · · · · · · · · · · · ·	28	JULY 1, 2014]: Sec. 1. As used in this chapter, "birth problems" means
one (1) or more of the following conditions:	29	* *
30 (1) A structural deformation.	30	· · ·
31 (2) A developmental malformation.	31	
32 (3) A genetic, inherited, or biochemical disease.	32	•
( ) & , , , , , , , , , , , , , , , , , ,		(4) A condition of a chronic nature, including central nervous
, ,		system hemorrhage or infection of the central nervous system,
that may result in a need for long term health care.		
, c		(5) An autism spectrum disorder that is recognized in a child
		before the child becomes five (5) an individual at any years of
38 age.		, , , , , , , , , , , , , , , , , , ,
e		(6) A fetal alcohol spectrum disorder that is recognized before a
40 child becomes five (5) years of age.		· · · · · · · · · · · · · · · · · · ·
41 (7) Any other severe disability that is:		`
		(A) designated in a rule adopted by the state department; and



1	(B) recognized in a child after birth and before the child
2	becomes three (3) years of age.
3	(8) Complications resulting from a home delivery. As used in this
4	subdivision, "home" includes the delivery of a viable fetus at a
5	home or other non-health care facility.
6	(9) A visual impairment.
7	(10) Cortical blindness.
8	(11) Legal blindness.
9	SECTION 49. IC 16-38-4-8, AS AMENDED BY P.L.188-2013,
10	SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
11	JULY 1, 2014]: Sec. 8. (a) The state department shall establish a birth
12	problems registry for the purpose of recording all cases of birth
13	problems that occur in Indiana residents and compiling necessary and
14	appropriate information concerning those cases, as determined by the
15	state department, in order to:
16	(1) conduct epidemiologic and environmental studies and to apply
17	appropriate preventive and control measures;
18	(2) except for an autism spectrum disorder, inform the parents
19	of children with birth problems:
20	(A) at the time of discharge from the hospital; or
21	(B) if a birth problem is diagnosed during a physician or
22 23	hospital visit that occurs before the child is:
23	(i) except as provided in item (ii), three (3) years of age at
24	the time of diagnosis; or
25	(ii) five (5) years of age at the time of diagnosis if the
26	disorder is an autism spectrum disorder or a fetal alcohol
27	spectrum disorder;
28	about physicians care facilities, and appropriate community
29	resources, including local step ahead agencies and the infants and
30	toddlers with disabilities program (IC 12-12.7-2); or
31	(3) except as provided in subsection (d), inform:
32	(A) the individual with problems at any age; or
33	(B) the individual's parent;
34	at the time of diagnosis, if the individual's disorder is an
35	autism spectrum disorder, about physicians and appropriate
36	state and community resources, including local step ahead
37	agencies and the infants and toddlers with disabilities
38	program (IC 12-12.7-2); or
39	(3) (4) inform citizens regarding programs designed to prevent or
40	reduce birth problems.
41	(b) The state department shall record in the birth problems registry:
42	(1) all data concerning birth problems of children that are



1	provided from the certificate of live birth; and
2	(2) any additional information that may be provided by an
3	individual or entity described in section 7(a)(2) of this chapter
4	concerning a birth problem that is:
5	(A) designated in a rule adopted by the state department; and
6	(B) recognized:
7	(i) after the child is discharged from the hospital as a
8	newborn;
9	(ii) before the child is five (5) years of age if the child is
0	diagnosed with an autism spectrum disorder or a fetal
11	alcohol spectrum disorder; and
12	(iii) before the child is three (3) years of age for any
13	diagnosis not specified in item items (ii) and (iv); and
14	(iv) at any age if the individual is diagnosed with an
5	autism spectrum disorder.
16	(c) The state department shall:
17	(1) provide a physician and a local health department with
18	necessary forms for reporting under this chapter; and
9	(2) report in an electronic format under IC 5-14-6 to the
20	legislative council any birth problem trends that are identified
21	through the data collected under this chapter.
22	(d) Concerning an individual who is at least eight (8) years of
23	age and diagnosed with an autism spectrum disorder, the state
23 24 25	department is not required to do any of the following:
25	(1) Report information to the federal Centers for Disease
26	Control and Prevention.
27	(2) Confirm the individual's diagnosis.
28	(3) Verbally inform an individual of the information set forth
29	in subsection (a)(2)
	in subsection (a)(3).
30	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013,
31	
31 32	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013,
31 32 33	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
31 32 33 34	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct
31 32 33 34 35	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later
31 32 33 34 35 36	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in
31 32 33 34 35 36 37	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:
31 32 33 34 35 36 37	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:  (1) a child after birth but before the child is five (5) years of age,
31 32 33 34 35 36 37 38	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:  (1) a child after birth but before the child is five (5) years of age, if the child is diagnosed with a disorder other than an autism
31 32 33 34 35 36 37 38 39	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:  (1) a child after birth but before the child is five (5) years of age, if the child is diagnosed with a disorder other than an autism spectrum disorder;
31 32 33 34 35 36 37 38	SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:  (1) a child after birth but before the child is five (5) years of age, if the child is diagnosed with a disorder other than an autism



1	(3) a clind before the clind is three (3) years of age for any
2	birth problem diagnosis not specified in subdivisions (1) and
3	(2);
4	shall report the birth problem to the registry not later than sixty (60)
5	days after recognizing the birth problem. Information may be provided
6	to amend or clarify an earlier reported case.
7	(b) A person required to report information to the registry under this
8	section may use, when completing reports required by this chapter,
9	information submitted to any other public or private registry or required
10	to be filed with federal, state, or local agencies. However, the state
11	department may require additional, definitive information.
12	(c) Exchange of information between state department registries is
13	authorized. The state department may use information from another
14	registry administered by the state department. Information used from
15	other registries remains subject to the confidentiality restrictions on the
16	other registries.
17	SECTION 51. IC 16-41-42.2-4, AS ADDED BY P.L.3-2008,
18	SECTION 113, IS AMENDED TO READ AS FOLLOWS
19	[EFFECTIVE JULY 1, 2014]: Sec. 4. The fund is to be used for the
20	following purposes:
21	(1) Establishing and maintaining a state medical surveillance
22	registry for traumatic spinal cord and brain injuries.
23	(2) Fulfilling the duties of the board established by section 5 of
24	this chapter.
25	(3) Funding research related to the treatment and cure of spinal
26	cord and brain injuries, including acute management, medical
27	complications, rehabilitative techniques, and neuronal recovery.
28	Research must be conducted in compliance with all state and
29	federal laws.
30	(4) Develop a statewide trauma system.
31	However, not more than fifty percent (50%) of the money in the
32	fund may be used for purposes of developing a statewide trauma
33	system.
34	SECTION 52. IC 16-42-19-29 IS ADDED TO THE INDIANA
35	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
36	[EFFECTIVE JULY 1, 2014]: Sec. 29. A legend drug that is
37	composed wholly or partly of insulin may be sold for retail sale by
38	a pharmacy only to an individual who possesses a prescription
39	from one (1) of the following:
40	(1) A physician licensed under IC 25-22.5.
41	(2) A veterinarian licensed to practice veterinary medicine in



Indiana.

1	(3) An advanced practice nurse who meets the requirements
2	of IC 25-23-1-19.5.
3	(4) A physician assistant licensed under IC 25-27.5 who is
4	delegated prescriptive authority under IC 25-27.5-5-6.
5	SECTION 53. [EFFECTIVE UPON PASSAGE] (a) As used in this
6	SECTION, "department" refers to the state department of health.
7	(b) Before September 1, 2014, the department shall adopt rules
8	that establish a license and provide regulations for a facility that
9	provides specialized treatment and services for traumatic brain
10	injuries.
11	(c) Before September 1, 2014, the department shall make to the
12	legislative council and health finance commission
13	recommendations concerning changes to the food handling laws.
14	Recommendations made to the legislative council must be in an
15	electronic format under IC 5-14-6.
16	(d) This SECTION expires December 31, 2014.
17	SECTION 54. 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. 406, 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 406 as introduced.)

Committee Vote: Yeas 8, Nays 0

Senator Miller Patricia, Chairperson

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 406, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Delete the title and insert the following:

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

Page 15, after line 40, begin a new paragraph and insert:

"SECTION 15. IC 12-7-2-44.6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 44.6. "Countable asset" means the following:

- (1) For purposes of IC 12-10-10, in determining eligibility for the community and home options to institutional care for the elderly and disabled program, property that is included in determining assets in the same manner as determining an individual's eligibility for the Medicaid aged and disabled waiver.
- (2) For purposes of IC 12-20, means noncash property that is not necessary for the health, safety, or decent living standard of a household that:
  - (1) (A) is owned wholly or in part by the applicant or a member of the applicant's household;
  - (2) (B) the applicant or the household member has the legal right to sell or liquidate; and
  - (3) (C) includes:
    - (A) (i) real property other than property that is used for the production of income or that is the primary residence of the household;

ES 406—LS 6935/DI 106



- (B) (ii) savings and checking accounts, certificates of deposit, bonds, stocks, and other intangibles that have a net cash value; and
- (C) (iii) boats, other vehicles, or any other personal property used solely for recreational or entertainment purposes.

SECTION 16. IC 12-7-2-49.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: 1, 2014]: **Sec. 49.5. "CPI", for purposes of IC 12-10-10, has the meaning set forth in IC 12-10-10-2.5.** 

SECTION 17. IC 12-8-1.5-10.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 10.5.** (a) The office of the secretary is designated as the single state agency for administration of the state Medicaid program under IC 12-15.

(b) The office of the secretary shall develop and coordinate Medicaid policy for the state.

SECTION 18. IC 12-8-6.5-3 IS REPEALED [EFFECTIVE UPON PASSAGE]. Sec. 3. The office is designated as the single state agency for administration of the state Medicaid program under IC 12-15.

SECTION 19. IC 12-8-6.5-4, AS ADDED BY P.L.160-2012, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. **Under the direction of the secretary,** the office shall develop and coordinate Medicaid policy for the state.

SECTION 20. IC 12-10-10-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 1. As used in this chapter, "case management" means an administrative function conducted locally by an area agency on aging that includes the following:

- (1) Assessment of an individual to determine the individual's functional impairment level and corresponding need for services.
- (2) Initial verification of an individual's income and assets.
- (2) (3) Development of a care plan addressing that:
  - (A) addresses an eligible individual's needs;
  - (B) takes into consideration the individual's family and community members who are willing to provide services to meet any of the individual's needs; and
  - (C) is consistent with a person centered approach to client care.
- (3) (4) Supervision of the implementation of appropriate and available services for an eligible individual.
- (4) (5) Advocacy on behalf of an eligible individual's interests.



- (5) (6) Monitoring the quality of community and home care services provided to an eligible individual.
- (6) (7) Reassessment of the care plan to determine:
  - **(A)** the continuing need and effectiveness of the community and home care services provided to an eligible individual under this chapter; **and**
  - (B) the annual reverification of a plan recipient's income and assets, as may be required by the division under section 4(e) of this chapter.
- (7) (8) Provision of information and referral services to individuals in need of community and home care services.

SECTION 21. IC 12-10-10-2.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 2.5. As used in this chapter, "CPI" refers to the United States Bureau of Labor Statistics Consumer Price Index, all items, all urban consumers, or its successor index.

SECTION 22. IC 12-10-10-4, AS AMENDED BY P.L.99-2007, SECTION 64, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 4. (a) As used in this chapter, "eligible individual" means an individual who **meets the following criteria:** 

- (1) Is a resident of Indiana.
- (2) Is:
  - (A) at least sixty (60) years of age; or
  - (B) an individual with a disability.
- (3) Has assets that meet the following criteria:
  - (A) For an individual who participates in the program and whose date of application for the program is before January 1, 2015, assets that do not exceed five hundred thousand dollars (\$500,000), as determined by the division.
  - (B) For an individual whose date of application for the program is after December 31, 2014, countable assets that do not exceed two hundred fifty thousand dollars (\$250,000) adjusted by the CPI, as set forth in subsection (c). In determining assets under this clause, the division shall exclude an additional twenty thousand dollars (\$20,000) in countable assets, as adjusted by the CPI as set forth in subsection (c).
- (4) Qualifies under criteria developed by the board as having an impairment that places the individual at risk of losing the individual's independence, as described in subsection (b).



- (b) For purposes of subsection (a), an individual is at risk of losing the individual's independence if the individual is unable to perform **any** of the following:
  - (1) Two (2) or more activities of daily living. The use by or on behalf of the individual of any of the following services or devices does not make the individual ineligible for services under this chapter:
    - (1) (A) Skilled nursing assistance.
    - (2) **(B)** Supervised community and home care services, including skilled nursing supervision.
    - (3) (C) Adaptive medical equipment and devices.
    - (4) (D) Adaptive nonmedical equipment and devices.
  - (2) One (1) activity of daily living if, using the needs based assessment established under section 13(1) of this chapter, the area agency on aging determines that addressing the single activity of daily living would significantly reduce the likelihood of the individual's loss of independence and the need for additional services.
  - (3) An activity if, using the needs based assessment established under section 13(1) of this chapter, the area agency on aging determines that targeted intervention or assistance with the activity would significantly reduce the likelihood of the individual's loss of independence and the need for additional services.
- (c) Before June 1, 2015, and before June 1 of each subsequent year, the division shall determine an adjusted asset limit to be used for purposes of subsection (a)(3)(B), subsection (d)(4), and section 13 of this chapter in the following state fiscal year. The adjusted asset limit for the following state fiscal year shall be determined as follows:

STEP ONE: Determine the percentage change between:

- (A) the CPI as last reported for the calendar year ending in the state fiscal year in which the determination is made; and
- (B) the CPI as last reported for the calendar year that precedes the calendar year described in clause (A).

STEP TWO: Express the percentage change determined in STEP ONE as a two (2) digit decimal rounded to the nearest hundredth. A negative percentage change under this STEP must be treated as zero (0).

STEP THREE: Add one (1) to the STEP TWO result.

**STEP FOUR: Multiply:** 



- (A) the STEP THREE result; by
- (B) the asset limit used for purposes of subsection (a)(3)(B) in the state fiscal year in which the determination is made. Before June 15, 2015, and before June 15 of each subsequent year the division shall publish in the Indiana Register the adjusted asset limit to be used for purposes of subsection (a)(3)(B) in the following state fiscal year.
- (d) The division shall, in accordance with standards established under section 13(3) of this chapter, establish a cost participation schedule for a program recipient based on the program participant's income and countable assets. The cost participation schedule must meet the following:
  - (1) Exclude from cost participation an eligible individual whose income and countable assets do not exceed one hundred fifty percent (150%) of the federal income poverty level.
  - (2) Exclude from cost participation for the total services provided to an individual under the program unless the eligible individual's income and countable assets exceed three hundred fifty percent (350%) of the federal income poverty level.
  - (3) In calculating income and countable assets for an eligible individual, deduct the medical expenses of the following:
    - (A) The individual.
    - (B) The spouse of the individual.
    - (C) The dependent children of the individual.
  - (4) Exclude twenty thousand dollars (\$20,000) of a participant's countable assets, as adjusted by CPI, from consideration in determining a participant's cost participation.

The cost participation schedule established under this subsection may be applied only to an individual whose date of application for the program is after December 31, 2014.

- (e) The division may require annual reverification for program participants whom the division determines are likely to experience a material increase in income or assets. An individual shall submit the information requested by the division to carry out the redetermination allowed by this subsection.
- (f) The division may not require a family or other person to provide services as a condition of an individual's eligibility for or participation in the program.

SECTION 23. IC 12-10-10-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 7. (a) Except as



provided in subsection (b), the case management under this chapter of an individual leading to participation in the program may not be conducted by any agency that delivers services under the program.

- (b) If the division determines that there is no alternative agency capable of delivering services to the individual, the area agency on aging that performs the assessment under the program may also deliver the services.
- (c) The division shall provide the necessary funding to provide case management services for the program, as determined under section 13(2) of this chapter.

SECTION 24. IC 12-10-10-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 9. (a) The division shall establish a program to train relatives of eligible individuals to provide homemaker and personal care services to those eligible individuals.

- (b) Relatives of eligible individuals who complete the training program established under this section are eligible for reimbursement under this chapter or under the Medicaid program for the provision of homemaker and personal care services to those eligible individuals. Reimbursement under the Medicaid program is limited to those cases in which the provision of homemaker and personal care services to an eligible individual by a relative results in financial hardship to the relative.
- (c) For services that an individual is eligible to receive under the program but receives from a relative or other individual without receiving compensation, the area agency on aging shall:
  - (1) determine, in accordance with section 13(4) of this chapter, the savings from not paying for these services; and (2) allocate twenty percent (20%) of the savings calculated under subdivision (1) to offset the individual's cost share amount, if any, for participating in the program.

SECTION 25. IC 12-10-10-13 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 13. The division and the area agencies on aging shall jointly develop policies that establish the following:** 

- (1) A needs based assessment to be used in determining a client's needs and care plan under section 1(3) of this chapter.
- (2) The percentage of program dollars adequate to provide case management services.
- (3) A cost participation schedule for program recipients as required by section 4(d) of this chapter.



- (4) Procedures for determining cost savings as required by section 9(c) of this chapter.
- (5) Program performance measures for the area agencies on aging.

SECTION 26. IC 12-10-10-14 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: **Sec. 14. (a) This section applies only to an individual whose date of application for the program is after December 31, 2014.** 

- (b) The division may obtain a lien on the program recipient's real property for the cost of services provided to the individual in the program if the cost of the services exceeds twenty thousand dollars (\$20,000), as adjusted by the CPI under section 4(c) of this chapter, in the same manner and with the same requirements as the office obtains a lien against a Medicaid recipient under IC 12-15-8.5, except that there may be no look back of the program recipient's property as required under the Medicaid program in IC 12-15-8.5-2.
- (c) The division may adopt rules necessary under IC 4-22-2 to implement this section.

SECTION 27. IC 12-10-11-8, AS AMENDED BY P.L.143-2011, SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015]: Sec. 8. The board shall do the following:

- (1) Establish long term goals of the state for the provision of a continuum of care for the elderly and individuals with a disability based on the following:
  - (A) Individual independence, dignity, and privacy.
  - (B) Long term care services that are:
    - (i) integrated, accessible, and responsible; and
    - (ii) available in home and community settings.
  - (C) Individual choice in planning and managing long term care.
  - (D) Access to an array of long term care services:
    - (i) for an individual to receive care that is appropriate for the individual's needs; and
    - (ii) to enable a case manager to have cost effective alternatives available in the construction of care plans and the delivery of services.
  - (E) Long term care services that include home care, community based services, assisted living, congregate care, adult foster care, and institutional care.
  - (F) Maintaining an individual's dignity and self-reliance to



protect the fiscal interests of both taxpayers and the state.

- (G) Long term care services that are fiscally sound.
- (H) Services that:
  - (i) promote behavioral health; and
  - (ii) prevent and treat mental illness and addiction.
- (2) Review state policies on community and home care services.
- (3) Recommend the adoption of rules under IC 4-22-2.
- (4) Recommend legislative changes affecting community and home care services.
- (5) Recommend the coordination of the board's activities with the activities of other boards and state agencies concerned with community and home care services.
- (6) Evaluate cost effectiveness, quality, scope, and feasibility of a state administered system of community and home care services
- (7) Evaluate programs for financing services to those in need of a continuum of care.
- (8) Evaluate state expenditures for community and home care services, taking into account efficiency, consumer choice, competition, and equal access to providers.
- (9) Develop policies that support the participation of families and volunteers in meeting the long term care needs of individuals.
- (10) Encourage the development of funding for a continuum of care from private resources, including insurance.
- (11) Develop a cost of services basis and a program of cost reimbursement for those persons who can pay all or a part of the cost of the services rendered. The division shall use this cost of services basis and program of cost reimbursement in administering IC 12-10-10. The cost of services basis and program of cost reimbursement must include a client cost share formula that:
  - (A) imposes no charges for an eligible individual whose income does not exceed one hundred fifty percent (150%) of the federal income poverty level; and
  - (B) does not impose charges for the total cost of services provided to an individual under the community and home options to institutional care for the elderly and disabled program unless the eligible individual's income exceeds three hundred fifty percent (350%) of the federal income poverty level.

The calculation of income for an eligible individual must include the deduction of the individual's medical expenses and the



medical expenses of the individual's spouse and dependent children who reside in the eligible individual's household.

- (12) (11) Establish long term goals for the provision of guardianship services for adults.
- (13) (12) Coordinate activities and programs with the activities of other boards and state agencies concerning the provision of guardianship services.
- (14) (13) Recommend statutory changes affecting the guardianship of indigent adults.
- (15) (14) Review a proposed rule concerning home and community based services as required under section 9 of this chapter.

SECTION 28. IC 12-15-1-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The office of Medicaid policy and planning of the secretary shall administer the Medicaid program under 42 U.S.C. 1396 et seq.

SECTION 29. IC 12-15-13-0.4, AS ADDED BY P.L.117-2008, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 0.4. As used in this chapter, "office" includes the following:

- (1) The office of Medicaid policy and planning. the secretary of family and social services.
- (2) A managed care organization that has contracted with the office of Medicaid policy and planning under this article.
- (3) A person that has contracted with a managed care organization described in subdivision (2).

SECTION 30. IC 16-18-2-84, AS AMENDED BY P.L.197-2011, SECTION 54, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 84. "Council", refers to the following:

- (1) For purposes of IC 16-21, IC 16-25, IC 16-27, IC 16-28, and IC 16-29, the health care facility advisory council.
- (2) for purposes of IC 16-46-6, **refers to** the interagency state council on black and minority health.

SECTION 31. IC 16-18-2-199 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 199. "Legend drug", for purposes of IC 16-42, means a drug that is:

- (1) subject to 21 U.S.C. 353(b)(1); or
- (2) listed in the Prescription Drug Product List as:
  - (A) published in United States Department of Health and Human Services Approved Drug Products with Therapeutic Equivalence Evaluations, Tenth Edition, (1990); and
  - (B) revised in United State Department of Health and Human



Services, Approved Drug Products with Therapeutic Equivalence Evaluations, Cumulative Supplement to the Tenth Edition, Number 10 (1990); or

## (3) insulin.

SECTION 32. IC 16-19-15 IS REPEALED [EFFECTIVE JULY 1, 2014]. (Health Care Facility Advisory Council).

SECTION 33. IC 16-21-1-7, AS AMENDED BY P.L.96-2005, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 7. (a) Except as provided in subsection (b), the council shall propose and The executive board may adopt rules under IC 4-22-2 necessary to protect the health, safety, rights, and welfare of patients, including the following:

- (1) Rules pertaining to the operation and management of hospitals, ambulatory outpatient surgical centers, abortion clinics, and birthing centers.
- (2) Rules establishing standards for equipment, facilities, and staffing required for efficient and quality care of patients.
- (b) The state department may request the eouncil to propose a new rule or an amendment to an existing rule necessary to protect the health, safety, rights, and welfare of patients. If the council does not propose a rule within ninety (90) days of the department's request, the department may propose its own rule.
- (c) The state department shall consider the rules proposed by the council and may adopt, modify, remand, or reject specific rules or parts of rules proposed by the council.

SECTION 34. IC 16-21-1-10, AS AMENDED BY P.L.1-2006, SECTION 295, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 10. (a) Licensure inspections of an institution or agency shall be made regularly in accordance with rules adopted under this chapter. The state department shall make all health and sanitation inspections, including inspections in response to an alleged breach of this chapter or rules adopted under this chapter. The division of fire and building safety shall make all fire safety inspections. The council may provide for other inspections necessary to implement this chapter.

- (b) An employee of the state department who knowingly or intentionally informs an institution or agency of the exact date of an unannounced inspection shall be suspended without pay for five (5) days for a first offense and shall be dismissed for a subsequent offense.
- (c) Reports of all inspections must be in writing and sent to the institution or agency.
  - (d) The report of an inspection and records relating to the inspection



may not be released to the public until the conditions set forth in IC 16-19-3-25 are satisfied.

SECTION 35. IC 16-21-2-4 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 4. The state department shall administer this chapter with the advice of the council.

SECTION 36. IC 16-25-3-2.5 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 2.5. The state department shall administer this chapter with the advice of the health care facility advisory council established by IC 16-19-15-1.

SECTION 37. IC 16-27-0.5-9, AS AMENDED BY P.L.6-2012, SECTION 117, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) The state department may request the health eare facility advisory council to propose a new rule or an amendment to a rule adopt rules under IC 4-22-2 necessary to protect the health, safety, rights, and welfare of the home health care patients and hospice patients. If the council does not propose a rule within ninety (90) days after the state department's request, the state department may propose the rule.

- (b) The executive board shall consider rules proposed by the council under this section. The executive board may adopt, modify, remand, or reject specific rules or parts of rules proposed by the council.
- (c) To become effective, all rules proposed by the council under this chapter must be adopted by the executive board in accordance with IC 4-22-2.

SECTION 38. IC 16-28-1-7, AS AMENDED BY P.L.156-2011, SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 7. The council state department shall do the following:

- (1) Propose the adoption of Adopt rules by the department 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 article to assure the proper care of patients.
  - (C) Operation, maintenance, management, equipment, and construction of facilities required to be licensed under this article if jurisdiction is not vested in any other state agency.
  - (D) Manner, form, and content of the license, including rules governing disclosure of ownership interests.
  - (E) Levels of medical staffing and medical services in cooperation with the office of Medicaid policy and planning, division of family resources, and other agencies authorized to



pay for the services.

- (2) Recommend to the fire prevention and building safety commission fire safety rules necessary to protect the health, safety, security, rights, and welfare of patients.
- (3) Classify health facilities in health care categories.
- (4) Act as an advisory body for the division, commissioner, and state department.

SECTION 39. IC 16-28-1-9 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 9. The council may not waive a rule adopted under this chapter.

SECTION 40. IC 16-28-1-12 IS REPEALED [EFFECTIVE JULY 1, 2014]. Sec. 12. (a) The department may request the council to propose a new rule or an amendment to a rule necessary to protect the health, safety, rights, and welfare of patients. If the council does not propose a rule not more than ninety (90) days after the department's request, the department may propose its own rule.

- (b) The executive board may adopt, modify, remand, or reject specific rules or parts of rules proposed by the council.
- (e) To become effective, all rules adopted under this chapter must be adopted by the executive board in accordance with IC 4-22-2. The rules adopted under this chapter are the only rules governing the licensing and operation of health facilities.

SECTION 41. IC 16-28-1-13, AS AMENDED BY P.L.1-2006, SECTION 299, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 13. (a) Licensure inspections of health facilities shall be made regularly in accordance with rules adopted under this chapter. The division shall make all health and sanitation inspections. The division of fire and building safety shall make all fire safety inspections. The council or the director may provide for other inspections necessary to carry out this chapter.

- (b) The exact date of an inspection of a health facility under this chapter may not be announced or communicated directly or indirectly to the owner, administrator, or an employee of the facility before the inspection. An employee of the state department who knowingly or intentionally informs a health facility of the exact date of an inspection shall be suspended without pay for five (5) days for a first offense and shall be dismissed for a subsequent offense.
  - (c) Reports of all inspections must be:
    - (1) in writing; and
    - (2) sent to the health facility.
- (d) The report of an inspection and records relating to the inspection may not be released to the public until the conditions set forth in



IC 16-19-3-25 are satisfied.

SECTION 42. IC 16-28-10-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. (a) Hearings under this article shall be conducted in accordance with IC 4-21.5. Except for hearings held on the adoption of rules, an administrative law judge must meet the following conditions:

- (1) Be admitted to the practice of law in Indiana.
- (2) Not be a member of the council or an employee of the state.
- (b) A health facility shall pay the costs of appointing an administrative law judge if the administrative law judge finds in favor of the state. However, if the administrative law judge finds in favor of the health facility, the state shall pay the costs of appointing the administrative law judge.

SECTION 43. IC 16-29-4-3, AS AMENDED BY P.L.6-2012, SECTION 118, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 3. The health eare facility advisory council may recommend, Before the conversion of existing health facility beds to ICF/MR beds or the construction of a new ICF/MR facility, that the state department may issue a preliminary approval of the proposed project, but only if the council state department determines that there is an insufficient number of available beds to care for all the persons who are determined under IC 12-11-2.1 to be appropriate for placement in an ICF/MR facility.

SECTION 44. IC 16-29-4-4, AS AMENDED BY P.L.6-2012, SECTION 119, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A proposed project that receives preliminary approval under this chapter may not add more beds than the number determined by the health care facility advisory council state department to be necessary to provide an available bed for each person determined under IC 12-11-2.1 to be appropriate for placement in an ICF/MR facility. Upon completion of the proposed project and compliance with the other requirements for licensure under IC 16-28, the state department shall issue a license to the facility.

SECTION 45. IC 16-36-6-7, AS ADDED BY P.L.164-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 7. (a) The following individuals may complete a POST form:

- (1) A qualified person who is:
  - (A) either:
    - (i) at least eighteen (18) years of age; or
    - (ii) less than eighteen (18) years of age but authorized to consent under IC 16-36-1-3(a)(2); and



- (B) of sound mind.
- (2) A qualified person's representative, if the qualified person:
  - (A) is less than eighteen (18) years of age and is not authorized to consent under IC 16-36-1-3(a)(2); or
  - (B) has been determined to be incapable of making decisions about the qualified person's health care by a treating physician acting in good faith and the representative has been:
    - (i) appointed by the individual under IC 16-36-1-7 to serve as the individual's health care representative;
    - (ii) authorized to act under IC 30-5-5-16 and IC 30-5-5-17 as the individual's attorney in fact with authority to consent to or refuse health care for the individual; or
    - (iii) appointed by a court as the individual's guardian health care representative under IC 16-36-1-8; or
    - (iv) appointed by a court as the guardian of the person with the authority to make health care decisions under IC 29-3.
- (b) In order to complete a POST form, a person described in subsection (a) and the qualified person's treating physician or the physician's designee must do the following:
  - (1) Discuss the qualified person's goals and treatment options available to the qualified person based on the qualified person's health.
  - (2) Complete the POST form, to the extent possible, based on the qualified person's preferences determined during the discussion in subdivision (1).
- (c) When completing a POST form on behalf of a qualified person, a representative shall act:
  - (1) in good faith; and
  - (2) in:
    - (A) accordance with the qualified person's express or implied intentions, if known; or
    - (B) the best interest of the qualified person, if the qualified person's express or implied intentions are not known.
- (d) A copy of the executed POST form shall be maintained in the qualified person's medical file.

SECTION 46. IC 16-37-2-4, AS AMENDED BY P.L.232-2013, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate of birth presented for filing not more than four (4) years twelve (12) months after the birth occurred if the attending physician, certified nurse midwife, certified direct entry midwife, or other person desiring



to file the certificate states the reason for the delay in writing. This statement shall be made a part of the certificate of birth.

SECTION 47. IC 16-37-2-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 5. A certificate of birth presented for filing more than four (4) years twelve (12) months after the birth occurred is a delayed certificate of birth and the record shall be filed only with the state department.

SECTION 48. IC 16-38-4-1, AS AMENDED BY P.L.232-2013, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. As used in this chapter, "birth problems" means one (1) or more of the following conditions:

- (1) A structural deformation.
- (2) A developmental malformation.
- (3) A genetic, inherited, or biochemical disease.
- (4) A condition of a chronic nature, including central nervous system hemorrhage or infection of the central nervous system, that may result in a need for long term health care.
- (5) An autism spectrum disorder that is recognized in a child before the child becomes five (5) an individual at any years of age.
- (6) A fetal alcohol spectrum disorder that is recognized before a child becomes five (5) years of age.
- (7) Any other severe disability that is:
  - (A) designated in a rule adopted by the state department; and
  - (B) recognized in a child after birth and before the child becomes three (3) years of age.
- (8) Complications resulting from a home delivery. As used in this subdivision, "home" includes the delivery of a viable fetus at a home or other non-health care facility.
- (9) A visual impairment.
- (10) Cortical blindness.
- (11) Legal blindness.

SECTION 49. IC 16-38-4-8, AS AMENDED BY P.L.188-2013, SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 8. (a) The state department shall establish a birth problems registry for the purpose of recording all cases of birth problems that occur in Indiana residents and compiling necessary and appropriate information concerning those cases, as determined by the state department, in order to:

- (1) conduct epidemiologic and environmental studies and to apply appropriate preventive and control measures;
- (2) except for an autism spectrum disorder, inform the parents



of children with birth problems:

- (A) at the time of discharge from the hospital; or
- (B) if a birth problem is diagnosed during a physician or hospital visit that occurs before the child is:
  - (i) except as provided in item (ii), three (3) years of age at the time of diagnosis; or
  - (ii) five (5) years of age at the time of diagnosis if the disorder is an autism spectrum disorder or a fetal alcohol spectrum disorder;

about physicians care facilities, and appropriate community resources, including local step ahead agencies and the infants and toddlers with disabilities program (IC 12-12.7-2); or

- (3) except as provided in subsection (d), inform:
  - (A) the individual with problems at any age; or
  - (B) the individual's parent;
- at the time of diagnosis, if the individual's disorder is an autism spectrum disorder, about physicians and appropriate state and community resources, including local step ahead agencies and the infants and toddlers with disabilities program (IC 12-12.7-2); or
- (3) (4) inform citizens regarding programs designed to prevent or reduce birth problems.
- (b) The state department shall record in the birth problems registry:
  - (1) all data concerning birth problems of children that are provided from the certificate of live birth; and
  - (2) any additional information that may be provided by an individual or entity described in section 7(a)(2) of this chapter concerning a birth problem that is:
    - (A) designated in a rule adopted by the state department; and
    - (B) recognized:
      - (i) after the child is discharged from the hospital as a newborn;
      - (ii) before the child is five (5) years of age if the child is diagnosed with an autism spectrum disorder or a fetal alcohol spectrum disorder; and
      - (iii) before the child is three (3) years of age for any diagnosis not specified in item items (ii) and (iv); and
      - (iv) at any age if the individual is diagnosed with an autism spectrum disorder.
- (c) The state department shall:
  - (1) provide a physician and a local health department with necessary forms for reporting under this chapter; and



- (2) report in an electronic format under IC 5-14-6 to the legislative council any birth problem trends that are identified through the data collected under this chapter.
- (d) Concerning an individual who is at least eight (8) years of age and diagnosed with an autism spectrum disorder, the state department is not required to do any of the following:
  - (1) Report information to the federal Centers for Disease Control and Prevention.
  - (2) Confirm the individual's diagnosis.
  - (3) Verbally inform an individual of the information set forth in subsection (a)(3).

SECTION 50. IC 16-38-4-9, AS AMENDED BY P.L.232-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct entry midwives, and individuals and entities described in section 7(a)(2) of this chapter shall report each confirmed case of a birth problem that is recognized at the time of birth to the registry not later than sixty (60) days after the birth. An individual or entity described in section 7(a)(2) of this chapter who recognizes a birth problem in:

- (1) a child after birth but before the child is five (5) years of age, if the child is diagnosed with a disorder other than an autism spectrum disorder;
- (2) an individual at any age, if the individual is diagnosed with an autism spectrum disorder; and
- (3) a child before the child is three (3) years of age for any birth problem diagnosis not specified in subdivisions (1) and (2);

shall report the birth problem to the registry not later than sixty (60) days after recognizing the birth problem. Information may be provided to amend or clarify an earlier reported case.

- (b) A person required to report information to the registry under this section may use, when completing reports required by this chapter, information submitted to any other public or private registry or required to be filed with federal, state, or local agencies. However, the state department may require additional, definitive information.
- (c) Exchange of information between state department registries is authorized. The state department may use information from another registry administered by the state department. Information used from other registries remains subject to the confidentiality restrictions on the other registries.

SECTION 51. IC 16-41-42.2-4, AS ADDED BY P.L.3-2008, SECTION 113, IS AMENDED TO READ AS FOLLOWS



[EFFECTIVE JULY 1, 2014]: Sec. 4. The fund is to be used for the following purposes:

- (1) Establishing and maintaining a state medical surveillance registry for traumatic spinal cord and brain injuries.
- (2) Fulfilling the duties of the board established by section 5 of this chapter.
- (3) Funding research related to the treatment and cure of spinal cord and brain injuries, including acute management, medical complications, rehabilitative techniques, and neuronal recovery. Research must be conducted in compliance with all state and federal laws.
- (4) Develop a statewide trauma system.

However, not more than fifty percent (50%) of the money in the fund may be used for purposes of developing a statewide trauma system.

SECTION 52. IC 16-42-19-29 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 29.** A legend drug that is composed wholly or partly of insulin may be sold for retail sale by a pharmacy only to an individual who possesses a prescription from one (1) of the following:

- (1) A physician licensed under IC 25-22.5.
- (2) A veterinarian licensed to practice veterinary medicine in Indiana.
- (3) An advanced practice nurse who meets the requirements of IC 25-23-1-19.5.
- (4) A physician assistant licensed under IC 25-27.5 who is delegated prescriptive authority under IC 25-27.5-5-6.

SECTION 53. [EFFECTIVE UPON PASSAGE] (a) As used in this SECTION, "department" refers to the state department of health.

- (b) Before September 1, 2014, the department shall adopt rules that establish a license and provide regulations for a facility that provides specialized treatment and services for traumatic brain injuries.
- (c) Before September 1, 2014, the department shall make to the legislative council and health finance commission recommendations concerning changes to the food handling laws. Recommendations made to the legislative council must be in an electronic format under IC 5-14-6.
  - (d) This SECTION expires December 31, 2014.



## SECTION 54. An emergency is declared for this act.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 406 as printed January 24, 2014.)

CLERE, Chair

Committee Vote: yeas 11, nays 0.

