

SENATE BILL No. 408

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2-244.8; IC 16-19-3-4.5.

Synopsis: Neonatal abstinence syndrome. Defines "neonatal abstinence syndrome" (NAS). Requires the state department of health (department) to: (1) adopt temporary guidelines and procedures before November 1, 2014, for mandatory reporting by hospitals of NAS data to the department; (2) provide a report before January 1, 2016, to the general assembly regarding the first year of reporting of NAS data; and (3) adopt permanent guidelines and procedures before November 1, 2016, for mandatory reporting by hospitals of NAS data to the department. Recommends that the commission on improving the status of children in Indiana: (1) study certain treatment services available to pregnant women who are addicted to illegal or prescription drugs; (2) study the educational and training services available to the public and certain professionals who might encounter an infant born with NAS during the course of their duties; and (3) make any recommendations for legislation as the committee considers appropriate.

Effective: July 1, 2014.

Becker, Miller Patricia

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



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.

SENATE BILL No. 408

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

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

1 SECTION 1. IC 16-18-2-244.8 IS ADDED TO THE INDIANA
2 CODE AS A **NEW SECTION TO READ AS FOLLOWS**
3 [EFFECTIVE JULY 1, 2014]: **Sec. 244.8. "Neonatal abstinence**
4 **syndrome" and "NAS", for purposes of IC 16-19-3-4.5, have the**
5 **meaning set forth in IC 16-19-3-4.5(a).**

6 SECTION 2. IC 16-19-3-4.5 IS ADDED TO THE INDIANA CODE
7 AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE JULY
8 1, 2014]: **Sec. 4.5. (a) As used in this section, "neonatal abstinence**
9 **syndrome" and "NAS" refer to the various adverse effects that**
10 **occur in a newborn infant who was exposed to addictive illegal or**
11 **prescription drugs while in the mother's womb.**

12 **(b) Before November 1, 2014, the executive board shall adopt**
13 **emergency rules in the manner provided under IC 4-22-2-37.1 to**
14 **establish standards and procedures for mandatory reporting by**
15 **hospitals of NAS data to the state department. The emergency**
16 **rules adopted under this subsection remain in effect until the**



1 effective date of the rules adopted under subsection (d).

2 (c) Before January 1, 2016, the board shall provide a report to
3 the general assembly in an electronic format under IC 5-14-6
4 regarding the first year of reporting under the emergency rules
5 required by subsection (b). The report must include the following:

6 (1) Data and statistics regarding NAS determined by
7 hospitals.

8 (2) Recommendations for statutory changes regarding NAS
9 screening, diagnosis, and treatment.

10 (3) Recommendations for appropriate education and training
11 to obstetric and gynecological physicians and treatment
12 providers of pregnant women.

13 (4) Recommendations for appropriate protocols for referrals
14 of pregnant women to addiction treatment providers.

15 (5) Recommendations for an appropriate standard reporting
16 code for NAS diagnoses.

17 (6) Any other recommendations the state department
18 considers appropriate in relation to NAS screening, diagnosis,
19 and treatment.

20 (d) Before November 1, 2016, the board shall adopt rules under
21 IC 4-22-2 to establish standards and procedures for mandatory
22 reporting by hospitals of NAS data for at least three (3) years
23 following the effective date of the rule.

24 (e) Rules adopted under subsections (b) and (d) must include the
25 following:

26 (1) An appropriate definition of a NAS diagnosis.

27 (2) An appropriate standard methodology for testing newborn
28 infants for NAS.

29 (3) Appropriate screening practices to detect prescription
30 drug or illegal drug abuse by pregnant women.

31 (f) In adopting the testing and screening rules required under
32 subsections (b) and (d), the state department shall consider, at a
33 minimum, the following scenarios to determine when appropriate
34 testing and screening protocols should be initiated:

35 (1) Pregnant women with no history of prenatal care.

36 (2) Pregnant women who exhibit physical symptoms of
37 addiction to illegal or prescribed drugs.

38 (3) Newborn infants who exhibit physical symptoms of
39 exposure to illegal or prescribed drugs.

40 (4) Pregnant women who currently or during the course of
41 pregnancy are taking or took prescription drugs.

42 (5) Pregnant women who currently or during the course of



- 1 pregnancy were prescribed prescription drugs.
- 2 (g) All data reported to the state department pursuant to rules
3 adopted under subsections (b) and (d) may not be disclosed to:
- 4 (1) law enforcement agencies or personnel for criminal
5 investigation or prosecution purposes; or
- 6 (2) the department of child services for purposes of
7 termination of parental rights or for purposes of declaring the
8 newborn infant a child in need of services under IC 31-34-1.
- 9 (h) For purposes of Executive Order 13-03, the predominant
10 purpose and effect of rules adopted under this section are to
11 address emergency matters of health and safety.
- 12 SECTION 3. [EFFECTIVE JULY 1, 2014] (a) As used in this
13 SECTION, "commission" refers to the commission on improving
14 the status of children in Indiana established by IC 2-5-36-3.
- 15 (b) During the 2014 or 2015 legislative interim, the commission
16 may do the following:
- 17 (1) Study the prenatal medical treatment services that are
18 available to pregnant women addicted to illegal or
19 prescription drugs.
- 20 (2) Study the addiction treatment services that are available
21 to pregnant women addicted to illegal or prescription drugs.
- 22 (3) Study the educational and training services that are
23 available to:
- 24 (A) the public; and
- 25 (B) medical, social services, and governmental
26 professionals;
27 who might encounter an infant born with neonatal abstinence
28 syndrome (as defined by IC 16-19-3-4.5, as added by this act)
29 during the course of their duties.
- 30 (4) Make any recommendations for legislation as the
31 commission considers appropriate.
- 32 (c) This SECTION expires January 1, 2016.

