

February 24, 2014

ENGROSSED SENATE BILL No. 408

DIGEST OF SB 408 (Updated February 24, 2014 10:57 am - DI 110)

Citations Affected: IC 16-18; IC 16-19; noncode.

Neonatal abstinence syndrome. Defines "neonatal Synopsis: abstinence syndrome" (NAS). Requires the state department of health to: (1) meet with representatives of certain associations to study and make recommendations on issues concerning NAS; and (2) report, before November 1, 2014, on certain issues concerning NAS to the legislative council for distribution to the appropriate interim study committee. Allows the state department of health to establish, before June 1, 2015, one or more pilot programs with hospitals that consent to participate in the programs to implement appropriate and effective models for NAS identification, data collection, and reporting.

Effective: Upon passage.

Becker, Miller Patricia, Breaux,

Leising

(HOUSE SPONSORS - KUBACKI, RIECKEN, BACON, FRIZZELL, MACER)

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

January 30, 2014, amended, reported favorably — Do Pass. February 3, 2014, read second time, ordered engrossed. Engrossed. February 4, 2014, read third time, passed. Yeas 47, nays 0.

HOUSE ACTION February 10, 2014, read first time and referred to Committee on Family, Children and Human Affairs. February 24, 2014, amended, reported — Do Pass.



February 24, 2014

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. 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 UPON PASSAGE]: Sec. 244.8. "Neonatal abstinence
4	syndrome" and "NAS", for purposes of IC 16-19-16, refer to the
5	various adverse effects that occur in a newborn infant who was
6	exposed to addictive illegal or prescription drugs while in the
7	mother's womb.
8	SECTION 2. IC 16-19-16 IS ADDED TO THE INDIANA CODE
9	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
10	UPON PASSAGE]:
11	Chapter 16. Neonatal Abstinence Syndrome (NAS)
12	Sec. 1. The state department shall meet with representatives of
13	at least the following associations to study and make
14	recommendations on issues concerning Neonatal Abstinence
15	Syndrome (NAS):
16	(1) The Indiana Hospital Association.



1 (2) The Indiana Perinatal Network. 2 (3) The Indiana State Medical Association. 3 (4) The Indiana Chapter of the American Academy of 4 **Pediatrics.** 5 (5) The Indiana Section of the American Congress of 6 **Obstetricians and Gynecologists.** 7 (6) The Indiana Chapter of the March of Dimes. 8 Sec. 2. (a) Before November 1, 2014, the state department, in 9 consultation with the persons described in section 1 of this chapter, 10 shall report the following to the legislative council in an electronic 11 format under IC 5-14-6 for distribution to the appropriate interim 12 study committee: 13 (1) The appropriate standard clinical definition of "Neonatal 14 Abstinence Syndrome". 15 (2) The development of a uniform process of identifying 16 Neonatal Abstinence Syndrome. 17 (3) The estimated time and resources needed to educate 18 hospital personnel in implementing an appropriate and 19 uniform process for identifying Neonatal Abstinence 20 Syndrome. 21 (4) The identification and review of appropriate data 22 reporting options available for the reporting of Neonatal 23 Abstinence Syndrome data to the state department, including 24 recommendations for reporting of Neonatal Abstinence 25 Syndrome using existing data reporting options or new data 26 reporting options. 27 (5) The identification of whether payment methodologies for 28 identifying Neonatal Abstinence Syndrome and the reporting 29 of Neonatal Abstinence Syndrome data are currently 30 available or needed. 31 (b) Before June 1, 2015, the state department may establish one 32 (1) or more pilot programs with hospitals that consent to 33 participate in the pilot programs to implement appropriate and 34 effective models for Neonatal Abstinence Syndrome identification, 35 data collection, and reporting determined under this chapter. 36 SECTION 3. 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. 408, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, line 12, delete "Before November 1, 2014, the executive board shall adopt" and insert "A hospital licensed under IC 16-21 shall:

(1) use appropriate International Classification of Diseases, Clinical Modification (ICD-CM) codes published by the National Center for Health Statistics for diagnosing NAS; and (2) file and report the ICD-CM codes referred to in subdivision (1) in accordance with IC 16-21-6-6 and IC 16-21-6-7.".

Page 1, delete lines 13 through 16.

Page 2, delete line 1.

Page 2, line 2, after "shall" insert ", in consultation with representatives of hospitals licensed under IC 16-21,".

Page 2, line 4, delete "first year of reporting under the emergency rules" and insert "NAS data reported under IC 16-21-6-6 and IC 16-21-6-7.".

Page 2, line 5, delete "required by subsection (b).".

Page 2, line 7, delete "hospitals." and insert "the state department.".

Page 2, delete lines 8 through 9.

Page 2, line 10, delete "(3)" and insert "(2)".

Page 2, line 13, delete "(4)" and insert "(3)".

Page 2, delete lines 15 through 42.

Page 3, delete lines 1 through 11.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 408 as introduced.)

MILLER PATRICIA, Chairperson

Committee Vote: Yeas 12, Nays 0.

COMMITTEE REPORT

Mr. Speaker: Your Committee on Family, Children and Human Affairs, to which was referred Senate Bill 408, 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:

Page 1, line 3, delete "[EFFECTIVE JULY 1, 2014]:" and insert "[EFFECTIVE UPON PASSAGE]:".

Page 1, line 4, delete "IC 16-19-3-4.5, have the" and insert "IC 16-19-16, refer to the various adverse effects that occur in a newborn infant who was exposed to addictive illegal or prescription drugs while in the mother's womb.".

Page 1, delete lines 5 through 16, begin a new paragraph and insert:

"SECTION 2. IC 16-19-16 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]:

Chapter 16. Neonatal Abstinence Syndrome (NAS)

Sec. 1. The state department shall meet with representatives of at least the following associations to study and make recommendations on issues concerning Neonatal Abstinence Syndrome (NAS):

(1) The Indiana Hospital Association.

(2) The Indiana Perinatal Network.

(3) The Indiana State Medical Association.

(4) The Indiana Chapter of the American Academy of Pediatrics.

(5) The Indiana Section of the American Congress of Obstetricians and Gynecologists.

(6) The Indiana Chapter of the March of Dimes.

Sec. 2. (a) Before November 1, 2014, the state department, in consultation with the persons described in section 1 of this chapter, shall report the following to the legislative council in an electronic format under IC 5-14-6 for distribution to the appropriate interim study committee:

(1) The appropriate standard clinical definition of "Neonatal Abstinence Syndrome".

(2) The development of a uniform process of identifying Neonatal Abstinence Syndrome.

(3) The estimated time and resources needed to educate hospital personnel in implementing an appropriate and uniform process for identifying Neonatal Abstinence Syndrome.

(4) The identification and review of appropriate data



reporting options available for the reporting of Neonatal Abstinence Syndrome data to the state department, including recommendations for reporting of Neonatal Abstinence Syndrome using existing data reporting options or new data reporting options.

(5) The identification of whether payment methodologies for identifying Neonatal Abstinence Syndrome and the reporting of Neonatal Abstinence Syndrome data are currently available or needed.

(b) Before June 1, 2015, the state department may establish one (1) or more pilot programs with hospitals that consent to participate in the pilot programs to implement appropriate and effective models for Neonatal Abstinence Syndrome identification, data collection, and reporting determined under this chapter.

SECTION 3. An emergency is declared for this act.".

Delete page 2.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 408 as printed January 31, 2014.)

KUBACKI, Chair

Committee Vote: yeas 11, nays 0.

