



January 24, 2014

SENATE BILL No. 419

DIGEST OF SB 419 (Updated January 22, 2014 2:32 pm - DI 104)

Citations Affected: IC 16-18; IC 16-19; IC 16-21; IC 16-25; IC 16-27; IC 16-28; IC 16-29; IC 16-37; IC 16-38; IC 16-41.

Synopsis: State department of health issues. 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 six 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). States that the state department of health does not have to: (1) report certain information to the federal Centers for Disease Control and Prevention; or (2) confirm an individual's diagnosis; concerning an individual who is at least eight years of age and diagnosed with an autism spectrum disorder. 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. Makes conforming changes.

Effective: July 1, 2014.

Miller Pete

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

January 23, 2014, amended, reported favorably — Do Pass.

SB 419—LS 6894/DI 77



January 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.

SENATE BILL No. 419

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 16-18-2-84, AS AMENDED BY P.L.197-2011,
2 SECTION 54, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2014]: Sec. 84. "Council", ~~refers to the following:~~
4 (1) For purposes of ~~IC 16-21, IC 16-25, IC 16-27, IC 16-28, and~~
5 ~~IC 16-29, the health care facility advisory council.~~
6 (2) for purposes of IC 16-46-6, ~~refers to~~ the interagency state
7 council on black and minority health.
8 SECTION 2. IC 16-19-15 IS REPEALED [EFFECTIVE JULY 1,
9 2014]. (Health Care Facility Advisory Council).
10 SECTION 3. IC 16-21-1-7, AS AMENDED BY P.L.96-2005,
11 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
12 JULY 1, 2014]: Sec. 7. (a) ~~Except as provided in subsection (b), the~~
13 ~~council shall propose and~~ The executive board may adopt rules under
14 IC 4-22-2 necessary to protect the health, safety, rights, and welfare of
15 patients, including the following:
16 (1) Rules pertaining to the operation and management of

SB 419—LS 6894/DI 77



1 hospitals, ambulatory outpatient surgical centers, abortion clinics,
2 and birthing centers.

3 (2) Rules establishing standards for equipment, facilities, and
4 staffing required for efficient and quality care of patients.

5 (b) The state department may request the council to propose a new
6 rule or an amendment to an existing rule necessary to protect the
7 health, safety, rights, and welfare of patients. If the council does not
8 propose a rule within ninety (90) days of the department's request, the
9 department may propose its own rule.

10 (c) The state department shall consider the rules proposed by the
11 council and may adopt, modify, remand, or reject specific rules or parts
12 of rules proposed by the council.

13 SECTION 4. IC 16-21-1-10, AS AMENDED BY P.L.1-2006,
14 SECTION 295, IS AMENDED TO READ AS FOLLOWS
15 [EFFECTIVE JULY 1, 2014]: Sec. 10. (a) Licensure inspections of an
16 institution or agency shall be made regularly in accordance with rules
17 adopted under this chapter. The state department shall make all health
18 and sanitation inspections, including inspections in response to an
19 alleged breach of this chapter or rules adopted under this chapter. The
20 division of fire and building safety shall make all fire safety
21 inspections. ~~The council may provide for other inspections necessary~~
22 ~~to implement this chapter.~~

23 (b) An employee of the state department who knowingly or
24 intentionally informs an institution or agency of the exact date of an
25 unannounced inspection shall be suspended without pay for five (5)
26 days for a first offense and shall be dismissed for a subsequent offense.

27 (c) Reports of all inspections must be in writing and sent to the
28 institution or agency.

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

32 SECTION 5. IC 16-21-2-4 IS REPEALED [EFFECTIVE JULY 1,
33 2014]. ~~Sec. 4. The state department shall administer this chapter with~~
34 ~~the advice of the council.~~

35 SECTION 6. IC 16-25-3-2.5 IS REPEALED [EFFECTIVE JULY
36 1, 2014]. ~~Sec. 2.5. The state department shall administer this chapter~~
37 ~~with the advice of the health care facility advisory council established~~
38 ~~by IC 16-19-15-1.~~

39 SECTION 7. IC 16-27-0.5-9, AS AMENDED BY P.L.6-2012,
40 SECTION 117, IS AMENDED TO READ AS FOLLOWS
41 [EFFECTIVE JULY 1, 2014]: Sec. 9. ~~(a)~~ The state department may
42 request the health care facility advisory council to propose a new rule



1 or an amendment to a rule **adopt rules under IC 4-22-2** necessary to
 2 protect the health, safety, rights, and welfare of the home health care
 3 patients and hospice patients. ~~If the council does not propose a rule~~
 4 ~~within ninety (90) days after the state department's request, the state~~
 5 ~~department may propose the rule.~~

6 (b) ~~The executive board shall consider rules proposed by the council~~
 7 ~~under this section. The executive board may adopt, modify, remand, or~~
 8 ~~reject specific rules or parts of rules proposed by the council.~~

9 (c) ~~To become effective, all rules proposed by the council under this~~
 10 ~~chapter must be adopted by the executive board in accordance with~~
 11 ~~IC 4-22-2.~~

12 SECTION 8. IC 16-28-1-7, AS AMENDED BY P.L.156-2011,
 13 SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 14 JULY 1, 2014]: Sec. 7. The ~~council~~ **state department** shall do the
 15 following:

16 (1) ~~Propose the adoption of~~ **Adopt** rules by the department under
 17 IC 4-22-2 governing the following:

18 (A) Health and sanitation standards necessary to protect the
 19 health, safety, security, rights, and welfare of patients.

20 (B) Qualifications of applicants for licenses issued under this
 21 article to assure the proper care of patients.

22 (C) Operation, maintenance, management, equipment, and
 23 construction of facilities required to be licensed under this
 24 article if jurisdiction is not vested in any other state agency.

25 (D) Manner, form, and content of the license, including rules
 26 governing disclosure of ownership interests.

27 (E) Levels of medical staffing and medical services in
 28 cooperation with the office of Medicaid policy and planning,
 29 division of family resources, and other agencies authorized to
 30 pay for the services.

31 (2) Recommend to the fire prevention and building safety
 32 commission fire safety rules necessary to protect the health,
 33 safety, security, rights, and welfare of patients.

34 (3) Classify health facilities in health care categories.

35 (4) ~~Act as an advisory body for the division, commissioner, and~~
 36 ~~state department.~~

37 SECTION 9. IC 16-28-1-9 IS REPEALED [EFFECTIVE JULY 1,
 38 2014]. Sec: 9: The ~~council~~ may not waive a rule adopted under this
 39 chapter.

40 SECTION 10. IC 16-28-1-12 IS REPEALED [EFFECTIVE JULY
 41 1, 2014]. Sec: 12: (a) The department may request the council to
 42 propose a new rule or an amendment to a rule necessary to protect the



1 health, safety, rights, and welfare of patients. If the council does not
 2 propose a rule not more than ninety (90) days after the department's
 3 request, the department may propose its own rule.

4 (b) The executive board may adopt, modify, remand, or reject
 5 specific rules or parts of rules proposed by the council.

6 (c) To become effective, all rules adopted under this chapter must
 7 be adopted by the executive board in accordance with IC 4-22-2. The
 8 rules adopted under this chapter are the only rules governing the
 9 licensing and operation of health facilities.

10 SECTION 11. IC 16-28-1-13, AS AMENDED BY P.L.1-2006,
 11 SECTION 299, IS AMENDED TO READ AS FOLLOWS
 12 [EFFECTIVE JULY 1, 2014]: Sec. 13. (a) Licensure inspections of
 13 health facilities shall be made regularly in accordance with rules
 14 adopted under this chapter. The division shall make all health and
 15 sanitation inspections. The division of fire and building safety shall
 16 make all fire safety inspections. ~~The council or the director may~~
 17 ~~provide for other inspections necessary to carry out this chapter.~~

18 (b) The exact date of an inspection of a health facility under this
 19 chapter may not be announced or communicated directly or indirectly
 20 to the owner, administrator, or an employee of the facility before the
 21 inspection. An employee of the state department who knowingly or
 22 intentionally informs a health facility of the exact date of an inspection
 23 shall be suspended without pay for five (5) days for a first offense and
 24 shall be dismissed for a subsequent offense.

25 (c) Reports of all inspections must be:

- 26 (1) in writing; and
- 27 (2) sent to the health facility.

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

31 SECTION 12. IC 16-28-10-1 IS AMENDED TO READ AS
 32 FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. (a) Hearings under
 33 this article shall be conducted in accordance with IC 4-21.5. Except for
 34 hearings held on the adoption of rules, an administrative law judge
 35 must meet the following conditions:

- 36 (1) Be admitted to the practice of law in Indiana.
- 37 (2) Not be a ~~member of the council~~ or an employee of the state.

38 (b) A health facility shall pay the costs of appointing an
 39 administrative law judge if the administrative law judge finds in favor
 40 of the state. However, if the administrative law judge finds in favor of
 41 the health facility, the state shall pay the costs of appointing the
 42 administrative law judge.



1 SECTION 13. IC 16-29-4-3, AS AMENDED BY P.L.6-2012,
 2 SECTION 118, IS AMENDED TO READ AS FOLLOWS
 3 [EFFECTIVE JULY 1, 2014]: Sec. 3. ~~The health care facility advisory~~
 4 ~~council may recommend;~~ Before the conversion of existing health
 5 facility beds to ICF/MR beds or the construction of a new ICF/MR
 6 facility, ~~that~~ the state department **may** issue a preliminary approval of
 7 the proposed project, but only if the ~~council~~ **state department**
 8 determines that there is an insufficient number of available beds to care
 9 for all the persons who are determined under IC 12-11-2.1 to be
 10 appropriate for placement in an ICF/MR facility.

11 SECTION 14. IC 16-29-4-4, AS AMENDED BY P.L.6-2012,
 12 SECTION 119, IS AMENDED TO READ AS FOLLOWS
 13 [EFFECTIVE JULY 1, 2014]: Sec. 4. A proposed project that receives
 14 preliminary approval under this chapter may not add more beds than
 15 the number determined by the ~~health care facility advisory council~~
 16 **state department** to be necessary to provide an available bed for each
 17 person determined under IC 12-11-2.1 to be appropriate for placement
 18 in an ICF/MR facility. Upon completion of the proposed project and
 19 compliance with the other requirements for licensure under IC 16-28,
 20 the state department shall issue a license to the facility.

21 SECTION 15. IC 16-37-2-4, AS AMENDED BY P.L.232-2013,
 22 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 23 JULY 1, 2014]: Sec. 4. A local health officer may accept a certificate
 24 of birth presented for filing not more than ~~four (4) years~~ **six (6) months**
 25 after the birth occurred if the attending physician, certified nurse
 26 midwife, certified direct entry midwife, or other person desiring to file
 27 the certificate states the reason for the delay in writing. This statement
 28 shall be made a part of the certificate of birth.

29 SECTION 16. IC 16-37-2-5 IS AMENDED TO READ AS
 30 FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 5. A certificate of birth
 31 presented for filing more than ~~four (4) years~~ **six (6) months** after the
 32 birth occurred is a delayed certificate of birth and the record shall be
 33 filed only with the state department.

34 SECTION 17. IC 16-38-4-1, AS AMENDED BY P.L.232-2013,
 35 SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 36 JULY 1, 2014]: Sec. 1. As used in this chapter, "birth problems" means
 37 one (1) or more of the following conditions:

- 38 (1) A structural deformation.
 39 (2) A developmental malformation.
 40 (3) A genetic, inherited, or biochemical disease.
 41 (4) A condition of a chronic nature, including central nervous
 42 system hemorrhage or infection of the central nervous system,



1 that may result in a need for long term health care.

2 (5) An autism spectrum disorder that is recognized in a ~~child~~
 3 ~~before the child becomes five (5)~~ **an individual at any years of**
 4 age.

5 (6) A fetal alcohol spectrum disorder that is recognized before a
 6 child becomes five (5) years of age.

7 (7) Any other severe disability that is:

8 (A) designated in a rule adopted by the state department; and

9 (B) recognized in a child after birth and before the child
 10 becomes three (3) years of age.

11 (8) Complications resulting from a home delivery. As used in this
 12 subdivision, "home" includes the delivery of a viable fetus at a
 13 home or other non-health care facility.

14 **(9) A visual impairment.**

15 SECTION 18. IC 16-38-4-6.5 IS ADDED TO THE INDIANA
 16 CODE AS A NEW SECTION TO READ AS FOLLOWS
 17 [EFFECTIVE JULY 1, 2014]: **Sec. 6.5. As used in this chapter,**
 18 **"visual impairment" means the following:**

19 **(1) Achromatopsia.**

20 **(2) Albinism.**

21 **(3) Amblyopia.**

22 **(4) Aniridia.**

23 **(5) Anophthalmia.**

24 **(6) Aphakia.**

25 **(7) Cataracts.**

26 **(8) CHARGE syndrome.**

27 **(9) Coloboma.**

28 **(10) Cone, rod, and cone-rod dystrophies.**

29 **(11) Cortical and cerebral visual impairment.**

30 **(12) Deafblind.**

31 **(13) Delayed visual development, maturation, or impairment.**

32 **(14) Glaucoma.**

33 **(15) High hyperopia.**

34 **(16) High Myopia.**

35 **(17) Leber's congenital amaurosis.**

36 **(18) Microphthalmia.**

37 **(19) Norries disease.**

38 **(20) Nystagmus.**

39 **(21) Optic atrophy.**

40 **(22) Optic nerve atrophy.**

41 **(23) Optic nerve hypoplasia.**

42 **(24) Peters anomaly.**



- 1 **(25) Persistent fetal vasculature.**
 2 **(26) Retinal detachment.**
 3 **(27) Retinal folds.**
 4 **(28) Retinitis pigmentosa.**
 5 **(29) Retinoblastoma.**
 6 **(30) Retinopathy of prematurity.**
 7 **(31) Septo optic dysplasia.**
 8 **(32) Stickler syndrome.**
 9 **(33) Strabismus.**
- 10 SECTION 19. IC 16-38-4-8, AS AMENDED BY P.L.188-2013,
 11 SECTION 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 12 JULY 1, 2014]: Sec. 8. (a) The state department shall establish a birth
 13 problems registry for the purpose of recording all cases of birth
 14 problems that occur in Indiana residents and compiling necessary and
 15 appropriate information concerning those cases, as determined by the
 16 state department, in order to:
- 17 (1) conduct epidemiologic and environmental studies and to apply
 18 appropriate preventive and control measures;
- 19 (2) inform the parents 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 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) 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, care facilities,**
 36 **and appropriate community resources, including local step**
 37 **ahead 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
10 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 (ii); **and**

14 **(iv) at any age if the individual is diagnosed with an**
15 **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

19 (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**
24 **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 SECTION 20. IC 16-38-4-9, AS AMENDED BY P.L.232-2013,
29 SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
30 JULY 1, 2014]: Sec. 9. (a) Certified nurse midwives, certified direct
31 entry midwives, and individuals and entities described in section
32 7(a)(2) of this chapter shall report each confirmed case of a birth
33 problem that is recognized at the time of birth to the registry not later
34 than sixty (60) days after the birth. An individual or entity described in
35 section 7(a)(2) of this chapter who recognizes a birth problem in:

36 **(1) a child after birth but before the child is five (5) years of age**
37 **if the child is diagnosed with a disorder other than an autism**
38 **spectrum disorder; and**

39 **(2) an individual at any age if the individual is diagnosed with**
40 **an autism spectrum disorder;**

41 shall report the birth problem to the registry not later than sixty (60)
42 days after recognizing the birth problem. Information may be provided



- 1 to amend or clarify an earlier reported case.
- 2 (b) A person required to report information to the registry under this
3 section may use, when completing reports required by this chapter,
4 information submitted to any other public or private registry or required
5 to be filed with federal, state, or local agencies. However, the state
6 department may require additional, definitive information.
- 7 (c) Exchange of information between state department registries is
8 authorized. The state department may use information from another
9 registry administered by the state department. Information used from
10 other registries remains subject to the confidentiality restrictions on the
11 other registries.
- 12 SECTION 21. IC 16-41-42.2-4, AS ADDED BY P.L.3-2008,
13 SECTION 113, IS AMENDED TO READ AS FOLLOWS
14 [EFFECTIVE JULY 1, 2014]: Sec. 4. The fund is to be used for the
15 following purposes:
- 16 (1) Establishing and maintaining a state medical surveillance
17 registry for traumatic spinal cord and brain injuries.
- 18 (2) Fulfilling the duties of the board established by section 5 of
19 this chapter.
- 20 (3) Funding research related to the treatment and cure of spinal
21 cord and brain injuries, including acute management, medical
22 complications, rehabilitative techniques, and neuronal recovery.
23 Research must be conducted in compliance with all state and
24 federal laws.
- 25 **(4) Develop a statewide trauma system.**
- 26 **However, not more than fifty percent (50%) of monies in the fund**
27 **may be used for purposes of developing a statewide trauma system.**



COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 419, 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 3, line 14, after "council" insert "**state**".

Page 3, line 15, strike "Propose the adoption of" and insert "**Adopt**".

Page 3, line 15, strike "by the department".

Page 5, delete lines 33 through 42, begin a new paragraph and insert:

"SECTION 17. 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.

SECTION 18. IC 16-38-4-6.5 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION TO READ AS FOLLOWS** [EFFECTIVE JULY 1, 2014]: **Sec. 6.5. As used in this chapter, "visual impairment" means the following:**

- (1) Achromatopsia.**
- (2) Albinism.**
- (3) Amblyopia.**



- (4) Aniridia.**
- (5) Anophthalmia.**
- (6) Aphakia.**
- (7) Cataracts.**
- (8) CHARGE syndrome.**
- (9) Coloboma.**
- (10) Cone, rod, and cone-rod dystrophies.**
- (11) Cortical and cerebral visual impairment.**
- (12) Deafblind.**
- (13) Delayed visual development, maturation, or impairment.**
- (14) Glaucoma.**
- (15) High hyperopia.**
- (16) High Myopia.**
- (17) Leber's congenital amaurosis.**
- (18) Microphthalmia.**
- (19) Norries disease.**
- (20) Nystagmus.**
- (21) Optic atrophy.**
- (22) Optic nerve atrophy.**
- (23) Optic nerve hypoplasia.**
- (24) Peters anomaly.**
- (25) Persistent fetal vasculature.**
- (26) Retinal detachment.**
- (27) Retinal folds.**
- (28) Retinitis pigmentosa.**
- (29) Retinoblastoma.**
- (30) Retinopathy of prematurity.**
- (31) Septo optic dysplasia.**
- (32) Stickler syndrome.**
- (33) Strabismus.**

SECTION 19. 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) 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) 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, 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)~~ **(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 (ii); **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.

SECTION 20. 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; and

(2) an individual at any age if the individual is diagnosed with an autism spectrum disorder;

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."

Delete page 6.

Page 7, delete lines 1 through 15.



Page 7, after line 29, begin a new line blocked left and insert:
"However, not more than fifty percent (50%) of monies in the fund may be used for purposes of developing a statewide trauma system."

Renumber all SECTIONS consecutively.
and when so amended that said bill do pass.

(Reference is to SB 419 as introduced.)

MILLER PATRICIA, Chairperson

Committee Vote: Yeas 11, Nays 0.

