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 2014 Regular Session and 2014 Second Regular Technical Session of the General Assembly.

## **SENATE ENROLLED ACT No. 464**

AN ACT to amend the Indiana Code concerning human services.

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

SECTION 1. IC 5-10-8-14.9 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 14.9. (a) This section applies to an employee health plan that is established, entered into, amended, or renewed after June 30, 2015.

(b) As used in this section, "covered individual" means an individual who is entitled to coverage under a state employee health plan.

(c) As used in this section, "state employee health plan" means one (1) of the following:

(1) A self-insurance program established under section 7(b) of this chapter to provide group health coverage.

(2) A contract with a prepaid health care delivery plan that is entered into or renewed under section 7(c) of this chapter.

(d) A state employee health plan may provide coverage for methadone if the drug is prescribed for the treatment of pain or pain management as follows:

(1) If the daily dosage is not more than sixty (60) milligrams.

(2) If the daily dosage is more than sixty (60) milligrams, only if:

(A) prior authorization is obtained; and

(B) a determination of medical necessity has been shown by the provider.



SECTION 2. IC 11-10-4-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 6. The administration of a drug by the department for the purpose of controlling a mental or emotional disorder is subject to the following requirements:

(1) The particular drug must be prescribed by a physician who has examined the offender.

(2) The drug must be administered by either a physician or qualified medical personnel under the direct supervision of a physician.

(3) The offender must be periodically observed, during the duration of the drug's effect, by qualified medical personnel.

(4) A drug may be administered for a period longer than seventy-two (72) hours only if the administration is part of a psychotherapeutic program of treatment prescribed and detailed in writing by a physician.

(5) A drug may be administered for the purpose of controlling substance abuse, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

SECTION 3. IC 11-10-11.5-11, AS AMENDED BY P.L.247-2013, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 11. (a) While assigned to a community transition program, a person must comply with:

(1) the rules concerning the conduct of persons in the community transition program, including rules related to payments described in section 12 of this chapter, that are adopted by the community corrections advisory board establishing the program or, in counties that are not served by a community corrections program, that are jointly adopted by the courts in the county with felony jurisdiction; and

(2) any conditions established by the sentencing court for the person.

(b) As a rule of the community transition program, a person convicted of a sex offense (as defined in IC 11-8-8-5.2) may not use a social networking web site (as defined in IC 35-31.5-2-307) or an instant messaging or chat room program (as defined in IC 35-31.5-2-173) to communicate, directly or through an intermediary, with a child less than sixteen (16) years of age. However, the rules of the communicate using a social networking web site or an instant messaging or chat room program may permit the offender to communicate using a social networking web site or an instant messaging or chat room program with:

(1) the offender's own child, stepchild, or sibling; or



(2) another relative of the offender specifically named in the rules applicable to that person.

(c) As a rule of the community transition program, an individual may be required to receive:

(1) addiction counseling;

(2) inpatient detoxification;

(3) case management;

(4) daily living skills; and

(5) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

SECTION 4. IC 11-12-1-2.5, AS AMENDED BY P.L.184-2014, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 2.5. (a) The community corrections programs described in section 2 of this chapter shall use evidence based services, programs, and practices that reduce the risk for recidivism among persons who participate in the community corrections programs.

(b) The community corrections board may also coordinate or operate:

(1) educational;

(2) mental health;

(3) drug or alcohol abuse counseling; and

(4) housing;

programs. In addition, the board may provide supervision services for persons described in section 2 of this chapter.

(c) Drug or alcohol abuse counseling programs under subsection(b) may include:

(1) addiction counseling;

(2) inpatient detoxification; and

(3) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

SECTION 5. IC 11-12-2-1, AS AMENDED BY SEA 420-2015, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 1. (a) For the purpose of encouraging counties to develop a coordinated local corrections-criminal justice system and providing effective alternatives to imprisonment at the state level, the commissioner shall, out of funds appropriated for such purposes, make grants to counties for the establishment and operation of community corrections programs **and court supervised recidivism reduction programs.** Appropriations intended for this purpose may not be used by the department for any other purpose. Money appropriated to the



department of correction for the purpose of making grants under this chapter and any financial aid payments suspended under section 6 of this chapter do not revert to the state general fund at the close of any fiscal year, but remain available to the department of correction for its use in making grants under this chapter.

(b) Before March 1  $\frac{2015}{5}$ , of each year, the department shall estimate the amount of any operational cost savings that will be realized in the state fiscal year ending June 30  $\frac{2015}{5}$ , from a reduction in the number of individuals who are in the custody or made a ward of the department of correction (as described in IC 11-8-1-5) that is attributable to the sentencing changes made in HEA 1006-2014 as enacted in the 2014 session of the general assembly. The department shall make the estimate under this subsection based on the best available information. If the department estimates that operational cost savings described in this subsection will be realized in the state fiscal year, ending June 30, 2015, the following apply to the department:

(1) The department shall certify the estimated amount of operational cost savings that will be realized to the budget agency and to the auditor of state.

(2) The department may, after review by the budget committee and approval by the budget agency, make additional grants as provided in this chapter to counties for the establishment and operation of community corrections programs **and court supervised recidivism reduction programs** from funds appropriated to the department for the department's operating expenses for the state fiscal year.

(3) The department may, after review by the budget committee and approval by the budget agency, transfer funds appropriated to the department for the department's operating expenses for the state fiscal year to the judicial conference of Indiana to be used by the judicial conference of Indiana to provide additional financial aid for the support of court probation services under the program established under IC 11-13-2.

(4) (3) The maximum aggregate amount of additional grants and transfers that may be made by the department under subdivisions (2) and (3) subdivision (2) for the state fiscal year may not exceed the lesser of:

(A) the amount of operational cost savings certified under subdivision (1); or

(B) eleven million dollars (\$11,000,000).

Notwithstanding P.L.205-2013 (HEA 1001-2013), the amount of funds necessary to make any additional grants authorized and approved under



this subsection and for any transfers authorized and approved under this subsection, and for providing the additional financial aid to courts from transfers authorized and approved under this subsection, is appropriated for those purposes for the state fiscal year, ending June 30, 2015, and the amount of the department's appropriation for operating expenses for the state fiscal year ending June 30, 2015, is reduced by a corresponding amount. This subsection expires June 30, 2015.

(c) The commissioner shall give priority in issuing community corrections and court supervised recidivism reduction program grants to programs that provide alternative sentencing projects for persons with mental illness, addictive disorders, intellectual disabilities, and developmental disabilities. Programs for addictive disorders may include:

(1) addiction counseling;

(2) inpatient detoxification;

(3) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.(d) Grants awarded under this chapter:

(1) must focus on funding evidence based programs, including programs that address cognitive behavior, that have as a primary goal the purpose of reforming offenders; and

(2) may be used for technology based programs, including an electronic monitoring program.

(e) Before the tenth day of each month, the department shall compile the following information with respect to the previous month:

(1) The number of persons committed to the department.

(2) The number of persons:

(A) confined in a department facility;

(B) participating in a community corrections program; and

(C) confined in a local jail under contract with or on behalf of the department.

(3) For each facility operated by the department:

(A) the number of beds in each facility;

(B) the number of inmates housed in the facility;

(C) the highest felony classification of each inmate housed in the facility; and

(D) a list of all felonies for which persons housed in the facility have been sentenced.



(f) The department shall:

(1) quarterly submit a report to the budget committee; and

(2) monthly submit a report to the justice reinvestment advisory council (as established in IC 33-38-9.5-2);

of the information compiled by the department under subsection (e). The report to the budget committee must be submitted in a form approved by the budget committee, and the report to the advisory council must be in a form approved by the advisory council.

SECTION 6. IC 11-12-3.7-11, AS AMENDED BY P.L.168-2014, SECTION 25, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 11. (a) A person is eligible to participate in a pre-conviction forensic diversion program only if the person meets the following criteria:

(1) The person has an intellectual disability, a developmental disability, an autism spectrum disorder, a mental illness, an addictive disorder, or both a mental illness and an addictive disorder. a combination of those conditions.

(2) The person has been charged with an offense that is:

(A) not a violent offense; and

(B) a Class A, B, or C misdemeanor, or a Level 6 felony that may be reduced to a Class A misdemeanor in accordance with IC 35-50-2-7.

(3) The person does not have a conviction for a violent offense in the previous ten (10) years.

(4) The court has determined that the person is an appropriate candidate to participate in a pre-conviction forensic diversion program.

(5) The person has been accepted into a pre-conviction forensic diversion program.

(b) Before an eligible person is permitted to participate in a pre-conviction forensic diversion program, the court shall advise the person of the following:

(1) Before the individual is permitted to participate in the program, the individual will be required to enter a guilty plea to the offense with which the individual has been charged.

(2) The court will stay entry of the judgment of conviction during the time in which the individual is successfully participating in the program. If the individual stops successfully participating in the program, or does not successfully complete the program, the court will lift its stay, enter a judgment of conviction, and sentence the individual accordingly.



(3) If the individual participates in the program, the individual may be required to remain in the program for a period not to exceed three (3) years.

(4) During treatment the individual may be confined in an institution, be released for treatment in the community, receive supervised aftercare in the community, or may be required to receive a combination of these alternatives. **Programs for addictive disorders may include:** 

(A) addiction counseling;

(B) inpatient detoxification;

(C) case management;

(D) daily living skills; and

(E) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(5) If the individual successfully completes the forensic diversion program, the court will waive entry of the judgment of conviction and dismiss the charges.

(6) The court shall determine, after considering a report from the forensic diversion program, whether the individual is successfully participating in or has successfully completed the program.

(c) Before an eligible person may participate in a pre-conviction forensic diversion program, the person must plead guilty to the offense with which the person is charged.

(d) Before an eligible person may be admitted to a facility under the control of the division of mental health and addiction, the individual must be committed to the facility under IC 12-26.

(e) After the person has pleaded guilty, the court shall stay entry of judgment of conviction and place the person in the pre-conviction forensic diversion program for not more than:

(1) two (2) years, if the person has been charged with a misdemeanor; or

(2) three (3) years, if the person has been charged with a felony.(f) If, after considering the report of the forensic diversion program, the court determines that the person has:

(1) failed to successfully participate in the forensic diversion program, or failed to successfully complete the program, the court shall lift its stay, enter judgment of conviction, and sentence the person accordingly; or

(2) successfully completed the forensic diversion program, the court shall waive entry of the judgment of conviction and dismiss



the charges.

SECTION 7. IC 11-12-3.8-1.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 1.5. For purposes of this chapter, "substance abuse treatment" may include:

(1) addiction counseling;

(2) inpatient detoxification; and

(3) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

SECTION 8. IC 11-12-3.8-4 IS REPEALED [EFFECTIVE JULY 1, 2015]. Sec. 4. (a) As used in this section, "account" refers to the mental health and addiction forensic treatment services account established in subsection (b).

(b) The mental health and addiction forensic treatment services account is established for the purpose of providing grants or vouchers for the provision of mental health and addiction forensic treatment services. The account shall be administered by the division of mental health and addiction. Money in the account shall be used to fund grants and vouchers under this chapter.

(c) The account consists of:

(1) appropriations made by the general assembly;

(2) grants; and

(3) gifts and bequests.

(d) The expenses of administering the account shall be paid from money in the account.

(c) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested. Interest that accrues from these investments shall be deposited in the account.

(f) Money in the account at the end of a state fiscal year does not revert to the state general fund.

SECTION 9. IC 11-13-2-3, AS AMENDED BY P.L.184-2014, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 3. (a) Any court having probation jurisdiction may apply for financial assistance under this chapter by submitting an application to the judicial conference of Indiana for review. The application shall be accompanied by detailed plans regarding the use of the financial aid.

(b) The judicial conference of Indiana shall develop a plan for the application process and the funding requirements for courts seeking financial aid. The judicial conference and the state budget committee



must approve all financial aid granted under this chapter.

(c) Two (2) or more courts may jointly apply for financial assistance under this chapter.

(d) The judicial conference of Indiana shall award financial assistance based on the proposed implementation of evidence based practices or the proposed coordination of services with other community supervision agencies operating in the same county.

(e) Before providing financial assistance under this chapter, the judicial conference of Indiana shall consult with the department of correction and the division of mental health and addiction:

(1) for the purpose of more effectively addressing the need for:

(A) substance abuse treatment;

(B) mental health services; and

(C) other services for offenders placed on community supervision; and

(2) to avoid duplication of services.

(f) Substance abuse treatment under subsection (e) may include:

(1) addiction counseling;

(2) inpatient detoxification; and

(3) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(f) (g) Mental health and substance abuse treatment services provided by financial assistance under this section shall be provided by a provider certified by the division of mental health and addiction to provide mental health or substance abuse treatment.

SECTION 10. IC 11-13-3-4, AS AMENDED BY P.L.114-2012, SECTION 27, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 4. (a) A condition to remaining on parole is that the parolee not commit a crime during the period of parole.

(b) The parole board may also adopt, under IC 4-22-2, additional conditions to remaining on parole and require a parolee to satisfy one (1) or more of these conditions. These conditions must be reasonably related to the parolee's successful reintegration into the community and not unduly restrictive of a fundamental right.

(c) If a person is released on parole, the parolee shall be given a written statement of the conditions of parole. Signed copies of this statement shall be:

(1) retained by the parolee;

(2) forwarded to any person charged with the parolee's supervision; and

(3) placed in the parolee's master file.



(d) The parole board may modify parole conditions if the parolee receives notice of that action and had ten (10) days after receipt of the notice to express the parolee's views on the proposed modification. This subsection does not apply to modification of parole conditions after a revocation proceeding under section 10 of this chapter.

(e) As a condition of parole, the parole board may require the parolee to reside in a particular parole area. In determining a parolee's residence requirement, the parole board shall:

(1) consider:

(A) the residence of the parolee prior to the parolee's incarceration; and

(B) the parolee's place of employment; and

(2) assign the parolee to reside in the county where the parolee resided prior to the parolee's incarceration unless assignment on this basis would be detrimental to the parolee's successful reintegration into the community.

(f) As a condition of parole, the parole board may require the parolee to:

(1) periodically undergo a laboratory chemical test (as defined in IC 9-13-2-22) or series of tests to detect and confirm the presence

of a controlled substance (as defined in IC 35-48-1-9); and

(2) have the results of any test under this subsection reported to the parole board by the laboratory.

The parolee is responsible for any charges resulting from a test required under this subsection. However, a person's parole may not be revoked on the basis of the person's inability to pay for a test under this subsection.

(g) As a condition of parole, the parole board:

(1) may require a parolee who is a sex offender (as defined in IC 11-8-8-4.5) to:

(A) participate in a treatment program for sex offenders approved by the parole board; and

(B) avoid contact with any person who is less than sixteen (16) years of age unless the parolee:

(i) receives the parole board's approval; or

(ii) successfully completes the treatment program referred to in clause (A); and

(2) shall:

(A) require a parolee who is a sex or violent offender (as defined in IC 11-8-8-5) to register with a local law enforcement authority under IC 11-8-8;

(B) prohibit a parolee who is a sex offender from residing



within one thousand (1,000) feet of school property (as defined in IC 35-31.5-2-285) for the period of parole, unless the sex offender obtains written approval from the parole board;

(C) prohibit a parolee who is a sex offender convicted of a sex offense (as defined in IC 35-38-2-2.5) from residing within one (1) mile of the victim of the sex offender's sex offense unless the sex offender obtains a waiver under IC 35-38-2-2.5; (D) prohibit a parolee who is a sex offender from owning, operating, managing, being employed by, or volunteering at any attraction designed to be primarily enjoyed by children less than sixteen (16) years of age;

(E) require a parolee who is a sex offender to consent:

(i) to the search of the sex offender's personal computer at any time; and

(ii) to the installation on the sex offender's personal computer or device with Internet capability, at the sex offender's expense, of one (1) or more hardware or software systems to monitor Internet usage; and

(F) prohibit the sex offender from:

(i) accessing or using certain web sites, chat rooms, or instant messaging programs frequented by children; and
(ii) deleting, erasing, or tampering with information on the sex offender's personal computer with intent to conceal an activity prohibited by item (i).

The parole board may not grant a sexually violent predator (as defined in IC 35-38-1-7.5) or a sex offender who is an offender against children under IC 35-42-4-11 a waiver under subdivision (2)(B) or (2)(C). If the parole board allows the sex offender to reside within one thousand (1,000) feet of school property under subdivision (2)(B), the parole board shall notify each school within one thousand (1,000) feet of the sex offender's residence of the order.

(h) The address of the victim of a parolee who is a sex offender convicted of a sex offense (as defined in IC 35-38-2-2.5) is confidential, even if the sex offender obtains a waiver under IC 35-38-2-2.5.

(i) As a condition of parole, the parole board may require a parolee to participate in a reentry court program.

(j) As a condition of parole, the parole board:

(1) shall require a parolee who is a sexually violent predator under IC 35-38-1-7.5; and

(2) may require a parolee who is a sex or violent offender (as defined in IC 11-8-8-5);



to wear a monitoring device (as described in IC 35-38-2.5-3) that can transmit information twenty-four (24) hours each day regarding a person's precise location, subject to the amount appropriated to the department for a monitoring program as a condition of parole.

(k) As a condition of parole, the parole board may prohibit, in accordance with IC 35-38-2-2.6, a parolee who has been convicted of stalking from residing within one thousand (1,000) feet of the residence of the victim of the stalking for a period that does not exceed five (5) years.

(1) As a condition of parole, the parole board may prohibit a parolee convicted of an offense under IC 35-46-3 from owning, harboring, or training an animal, and, if the parole board prohibits a parolee convicted of an offense under IC 35-46-3 from having direct or indirect contact with an individual, the parole board may also prohibit the parolee from having direct or indirect contact with any animal belonging to the individual.

(m) As a condition of parole, the parole board may require a parolee to receive:

(1) addiction counseling;

(2) inpatient detoxification;

(3) case management;

(4) daily living skills; and

(5) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(m) (n) A parolee may be responsible for the reasonable expenses, as determined by the department, of the parolee's participation in a treatment or other program required as a condition of parole under this section. However, a person's parole may not be revoked solely on the basis of the person's inability to pay for a program required as a condition of parole under this section.

SECTION 11. IC 12-15-5-13 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 13. (a) The office shall provide coverage for treatment of opioid or alcohol dependence that includes the following:

(1) Counseling services that address the psychological and behavioral aspects of addiction.

(2) When medically indicated, drug treatment involving agents approved by the federal Food and Drug Administration for the:

(A) treatment of opioid or alcohol dependence; or



(B) prevention of relapse to opioids or alcohol after detoxification.

(b) The office shall:

(1) develop quality measures to ensure; and

(2) require a Medicaid managed care organization to report; compliance with the coverage required under subsection (a).

(c) The office may implement quality capitation withholding of reimbursement to ensure that a Medicaid managed care organization has provided the coverage required under subsection (a).

(d) The office shall report the clinical use of the medications covered under this section to the mental health Medicaid quality advisory committee established by IC 12-15-35-51. The mental health Medicaid quality advisory committee may make recommendations to the office concerning this section.

SECTION 12. IC 12-15-35.5-7.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 7.5. (a) The office may reimburse under Medicaid for methadone if the drug was prescribed for the treatment of pain or pain management only as follows:

(1) If the daily dosage is not more than sixty (60) milligrams.

(2) If the daily dosage is more than sixty (60) milligrams, only if:

(A) prior authorization is obtained; and

(B) a determination of medical necessity has been shown by the provider.

(b) A managed care organization may reimburse under Medicaid for methadone if the drug is prescribed for the treatment of pain or pain management only as follows:

(1) If the daily dosage is not more than sixty (60) milligrams.

(2) If the daily dosage is more than sixty (60) milligrams, only if:

(A) prior authorization is obtained; and

(B) a determination of medical necessity has been shown. SECTION 13. IC 12-15-44.2-4, AS AMENDED BY P.L.160-2011, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 4. (a) The plan must include the following in a manner and to the extent determined by the office:

(1) Mental health care services.

(2) Inpatient hospital services.

(3) Prescription drug coverage, including coverage of a long acting, nonaddictive medication assistance treatment drug if



## the drug is being prescribed for the treatment of substance abuse.

(4) Emergency room services.

(5) Physician office services.

(6) Diagnostic services.

(7) Outpatient services, including therapy services.

(8) Comprehensive disease management.

(9) Home health services, including case management.

(10) Urgent care center services.

(11) Preventative care services.

(12) Family planning services:

(A) including contraceptives and sexually transmitted disease testing, as described in federal Medicaid law (42 U.S.C. 1396 et seq.); and

(B) not including abortion or abortifacients.

(13) Hospice services.

(14) Substance abuse services.

(15) A service determined by the secretary to be required by federal law as a benchmark service under the federal Patient Protection and Affordable Care Act.

(b) The plan may do the following:

(1) Offer coverage for dental and vision services to an individual who participates in the plan.

(2) Pay at least fifty percent (50%) of the premium cost of dental and vision services coverage described in subdivision (1).

(c) An individual who receives the dental or vision coverage offered under subsection (b) shall pay an amount determined by the office for the coverage. The office shall limit the payment to not more than five percent (5%) of the individual's annual household income. The payment required under this subsection is in addition to the payment required under section 11(b)(2) of this chapter for coverage under the plan.

(d) Vision services offered by the plan must include services provided by an optometrist.

(e) The plan must comply with any coverage requirements that apply to an accident and sickness insurance policy issued in Indiana.

(f) The plan may not permit treatment limitations or financial requirements on the coverage of mental health care services or substance abuse services if similar limitations or requirements are not imposed on the coverage of services for other medical or surgical conditions.

SECTION 14. IC 12-23-18-5.5, AS AMENDED BY P.L.116-2008,



SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 5.5. (a) The division may not grant specific approval to be a new opioid treatment program. This section does not apply to applications for new opioid treatment programs:

(1) pending prior to March 1, 2007; or

(2) that are operated by a hospital licensed under IC 16-21, an institution licensed under IC 12-25, or a certified community mental health center:

(A) within the licensed hospital, institution, or center; or

(B) in a separate office that meets federal opioid treatment program requirements;

and that meets the requirements of this section.

(b) A hospital licensed under IC 16-21, an institution licensed under IC 12-25, or a certified community mental health center may apply to the division to operate an opioid treatment program. Upon approval, the hospital, institution, or community mental health center may operate an opioid treatment program in compliance with this chapter and federal law.

(c) Before June 30, 2018, the division may approve the operation of not more than five (5) additional opioid treatment programs described in subsection (a)(2) only if the division determines as described in subsection (e) that there is a need for a new opioid treatment program in the proposed location and the requirements of this chapter are met.

(d) Not later than June 30, 2018, the division shall report to the general assembly in an electronic format under IC 5-14-6 concerning whether any new opioid treatment programs have been approved under subsection (c). The report must include the following:

(1) The impact on access to opioid treatment programs.

(2) The number of individuals served in the opioid treatment programs approved under subsection (c).

(3) Treatment outcomes for individuals receiving services in

the opioid treatment programs approved under subsection (c).

(4) Any recommendations the division has concerning future treatment programs.

(e) The division shall adopt rules under IC 4-22-2 setting forth the manner in which the division will determine whether there is a need for a new opioid treatment program in a proposed program location's geographic area.

SECTION 15. IC 12-23-18-7, AS ADDED BY P.L.131-2014, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



JULY 1, 2015]: Sec. 7. (a) The division shall adopt rules under IC 4-22-2 to establish standards and protocols for opioid treatment programs to do the following:

(1) Assess new opioid treatment program patients to determine the most effective opioid treatment medications to start the patient's opioid treatment.

(2) Ensure that each patient voluntarily chooses maintenance treatment and that relevant facts concerning the use of opioid treatment medications are clearly and adequately explained to the patient.

(3) Have appropriate opioid treatment program patients who are receiving methadone for opioid treatment move to receiving other approved opioid treatment medications.

(b) An opioid treatment program shall follow the standards and protocols adopted under subsection (a) for each opioid treatment program patient.

(c) Subject to subsection (a), an opioid treatment program may use any of the following medications as an alternative for methadone for opioid treatment:

(1) Buprenorphine.

(2) Buprenorphine combination products containing naloxone.

(3) Naltrexone injectable and extended release.

(4) A federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(3) (5) Any other medication that has been approved by:

(A) the federal Food and Drug Administration for use in the treatment of opioid addiction; and

(B) the division under subsection (e).

(d) Before starting a patient on a new opioid treatment medication, the opioid treatment program shall explain to the patient the potential side effects of the new medication.

(e) The division may adopt rules under IC 4-22-2 to provide for other medications, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence, as alternatives to methadone that may be used under subsection (a).

SECTION 16. IC 12-23-19 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]:

Chapter 19. Mental Health and Addiction Forensic Treatment Services Grants



Sec. 1. As used in this chapter, "mental health and addiction forensic treatment services" means evidence based treatment and recovery wraparound support services provided to individuals who have entered the criminal justice system as a felon or with a prior felony conviction or who have been placed or are eligible to be placed in a community corrections program as an alternative to commitment to the department of correction. The term includes:

(1) mental health and substance abuse treatment, including:

(A) addiction counseling;

**(B)** inpatient detoxification;

(C) case management;

(D) daily living skills; and

(E) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence;

(2) vocational services;

(3) housing assistance;

(4) community support services;

(5) care coordination;

(6) transportation assistance; and

(7) mental health and substance abuse assessments.

Sec. 2. (a) An individual is eligible for mental health and addiction forensic treatment services if:

(1) the individual:

(A) is a member of a household with an annual income that does not exceed two hundred percent (200%) of the federal income poverty level;

(B) is a resident of Indiana;

(C) is at least eighteen (18) years of age; and

(D) has entered the criminal justice system as a felon or with a prior felony conviction; and

(2) subject to subsection (b), reimbursement for the service is not available to the individual through any of the following:

(A) A policy of accident and sickness insurance (IC 27-8-5).

(B) A health maintenance organization contract (IC 27-13).

(C) The Medicaid program (IC 12-15), excluding the Medicaid rehabilitation program and the Behavioral and Primary Health Coordination Program under Section 1915(i) of the Social Security Act.

**(D)** The federal Medicare program or any other federal assistance program.



(b) If an individual is not entitled to reimbursement from the sources described in subsection (a)(2) of the full amount of the cost of the mental health and addiction forensic treatment services, grants and vouchers under this chapter may be used to provide those services to the extent that the costs of those services exceed the reimbursement the individual is entitled to receive from the sources described in subsection (a)(2), excluding any copayment or deductible that the individual is required to pay.

(c) The division shall determine the extent to which an individual who is provided mental health and addiction forensic treatment services under this chapter is entitled to receive reimbursement from the sources described in subsection (a)(2).

Sec. 3. Mental health and addiction forensic treatment services may be administered or coordinated only by a provider certified or licensed by the division of mental health and addiction.

Sec. 4. (a) As used in this section, "account" refers to the mental health and addiction forensic treatment services account established by subsection (b).

(b) The mental health and addiction forensic treatment services account is established for the purpose of providing grants, vouchers, and for leveraging federal funds for the provision of mental health and addiction forensic treatment services. The account shall be administered by the division. The division may use money in the account only to fund grants and vouchers under this chapter that are provided to the following:

(1) Community corrections programs.

(2) Court administered programs.

(3) Probation and diversion programs.

(4) Community mental health centers.

(5) Certified or licensed mental health or addiction providers.

(c) The account consists of:

(1) appropriations made by the general assembly;

(2) grants; and

(3) gifts and bequests.

(d) The expenses of administering the account shall be paid from money in the account.

(e) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested. Interest that accrues from these investments shall be deposited in the account.

(f) Money in the account at the end of a state fiscal year does not revert to the state general fund.



(g) Money deposited in the account may be used as the required state match under the Medicaid rehabilitation program and the Behavioral and Primary Health Coordination program under Section 1915(i) of the Social Security Act.

Sec. 5. In the case of an individual who is provided mental health and addiction forensic treatment services under this chapter, the division is subrogated to the rights of the individual under any policy, contract, or program described in section 2(a)(2) of this chapter with respect to reimbursement under the policy, contract, or program for mental health and addiction forensic treatment services, excluding services provided through the Medicaid rehabilitation program and the Behavioral and Primary Health Coordination Program under Section 1915(i) of the Social Security Act.

Sec. 6. (a) The division shall provide or cause to be provided education and training on the use of:

(1) involuntary commitment; and

(2) medication assisted treatment, including federal Food and Drug Administration approved long acting, nonaddictive medications for the treatment of opioid or alcohol dependence for individuals with an addictive disorder.

(b) The division shall provide or cause to be provided education and training required in subsection (a) to the following:

(1) Circuit and superior court judges.

(2) Prosecuting attorneys and deputy prosecuting attorneys.

(3) Public defenders.

(4) Programs and providers identified in section 4(b) of this chapter.

Sec. 7. The division shall survey individuals receiving mental health and addiction forensic treatment services under this chapter. The division shall survey and develop demographic research on such an individual one (1) year after the individual begins receiving the services. The survey must request information concerning:

(1) the employment status of the individual since the individual began receiving the services; and

(2) whether the individual has been arrested, convicted of a crime, alleged to have violated probation, or placed in a community corrections program as an alternative to commitment to the department of correction since the individual began receiving the services.

Sec. 8. During the year after an individual begins receiving



mental health and addiction forensic treatment services under this chapter, the division shall work jointly with the department of workforce development to coordinate employment and training services for the individual.

SECTION 17. IC 21-44-6-5, AS AMENDED BY P.L.142-2014, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2015 (RETROACTIVE)]: Sec. 5. The purpose of the board is to do the following:

(1) To establish and oversee a loan forgiveness program designed to attract: increase the number of professional mental health care providers, including addiction health care professionals, in areas with health professional shortages, as determined by the board, by assisting professionals in the following occupational categories to pay off loans incurred in the training needed to practice in Indiana:

(A) Psychiatrists.

**(B)** Addiction psychiatrists, including psychiatrists pursuing fellowship training and certification in addiction psychiatry.

- (B) (C) Psychologists.
- (C) (D) Psychiatric nurses.

(D) (E) Addiction counselors. and

(E) (F) Mental health professionals.

to provide services to individuals with mental illness and addictive disorders in behavioral health and addiction treatment settings in Indiana by assisting the individuals listed in this section to pay off loans incurred in the training needed to practice psychiatry and psychology and as a psychiatric nurse, an addiction counselor, or a mental health professional in Indiana. (2) To establish and oversee an integrated behavioral health and addiction treatment development program to attract and train psychiatrists, psychologists, psychiatric nurses, addiction counselors, or mental health professionals who will engage in the practice of integrated behavioral health and addiction treatment in:

(A) state mental health institutions;

(B) community mental health centers;

(C) state funded addiction treatment centers; or

(D) other behavioral health and addiction treatment settings determined by the board to be mental health and addiction dual diagnoses treatment settings.

(3) To develop and oversee an integrated behavioral health and addiction treatment training track program through the Indiana



University School of Medicine, Department of Psychiatry residency training program. The training track program must provide an opportunity for residents to work in mental health and addiction dual diagnoses treatment settings, including:

(A) state psychiatric hospitals;

(B) community mental health centers;

(C) state funded addiction treatment centers; or

(D) other behavioral health and addiction treatment settings determined by the board to be mental health and addiction dual diagnoses treatment settings.

(4) To develop standards for participation in the training track program that include:

(A) guidelines for the amounts of grants and other assistance a participant receives;

(B) guidelines for the type of training in integrated behavioral health and addiction treatment the participant receives;

(C) guidelines for agreements with mental health hospitals, community mental health centers, and other entities participating in the training track program; and

(D) other guidelines and standards necessary for governing the training track program.

SECTION 18. IC 25-22.5-13-6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 6. If a prescriber is prescribing methadone for a patient for the treatment of pain or pain management, the prescriber shall include on the prescription or order that the prescription is for the treatment of pain.

SECTION 19. IC 27-8-32.4 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]:

Chapter 32.4. Coverage for Methadone

Sec. 1. This chapter applies to a policy of accident and sickness insurance that is issued, amended, or renewed after June 30, 2015.

Sec. 2. As used in this chapter, "insured" means an individual who is entitled to coverage under a policy of accident and sickness insurance.

Sec. 3. As used in this chapter, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1.

Sec. 4. A policy of accident and sickness insurance may provide coverage for methadone if the drug is prescribed for the treatment of pain or pain management only as follows:

(1) If the daily dosage is not more than sixty (60) milligrams.



(2) If the daily dosage is more than sixty (60) milligrams, only if:

(A) prior authorization is obtained; and

(B) a determination of medical necessity has been shown by the provider.

SECTION 20. IC 27-13-7-20.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 20.4. (a) This section applies to an individual contract or a group contract that is entered into, amended, or renewed after June 30, 2015.

(b) An individual contract or a group contract may provide coverage for methadone if the drug is prescribed for the treatment of pain or pain management only as follows:

(1) If the daily dosage is not more than sixty (60) milligrams.

(2) If the daily dosage is more than sixty (60) milligrams, only if:

(A) prior authorization is obtained; and

(B) a determination of medical necessity has been shown by the provider.

SECTION 21. IC 33-23-16-24.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 24.5. A problem solving court may require an individual participating in a problem solving court to receive:

(1) addiction counseling;

(2) inpatient detoxification;

(3) case management;

(4) daily living skills; and

(5) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

SECTION 22. IC 33-39-1-8, AS AMENDED BY P.L.168-2014, SECTION 47, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 8. (a) After June 30, 2005, this section does not apply to a person who:

(1) holds a commercial driver's license; and

(2) has been charged with an offense involving the operation of a motor vehicle in accordance with the federal Motor Carrier Safety Improvement Act of 1999 (MCSIA) (Public Law 106-159.113 Stat. 1748).

(b) This section does not apply to a person arrested for or charged with:



(1) an offense under IC 9-30-5-1 through IC 9-30-5-5; or

(2) if a person was arrested or charged with an offense under

IC 9-30-5-1 through IC 9-30-5-5, an offense involving:

(A) intoxication; or

(B) the operation of a vehicle;

if the offense involving intoxication or the operation of a vehicle was part of the same episode of criminal conduct as the offense under IC 9-30-5-1 through IC 9-30-5-5.

(c) This section does not apply to a person:

(1) who is arrested for or charged with an offense under:

(A) IC 7.1-5-7-7, if the alleged offense occurred while the person was operating a motor vehicle;

(B) IC 9-30-4-8(a), if the alleged offense occurred while the person was operating a motor vehicle;

(C) IC 35-44.1-2-13(b)(1); or

(D) IC 35-43-1-2(a), if the alleged offense occurred while the person was operating a motor vehicle; and

(2) who held a probationary license (as defined in IC 9-24-11-3.3(b)) and was less than eighteen (18) years of age at the time of the alleged offense.

(d) A prosecuting attorney may withhold prosecution against an accused person if:

(1) the person is charged with a misdemeanor, a Level 6 felony, or a Level 5 felony;

(2) the person agrees to conditions of a pretrial diversion program offered by the prosecuting attorney;

(3) the terms of the agreement are recorded in an instrument signed by the person and the prosecuting attorney and filed in the court in which the charge is pending; and

(4) the prosecuting attorney electronically transmits information required by the prosecuting attorneys council concerning the withheld prosecution to the prosecuting attorneys council, in a manner and format designated by the prosecuting attorneys council.

(e) An agreement under subsection (d) may include conditions that the person:

(1) pay to the clerk of the court an initial user's fee and monthly user's fees in the amounts specified in IC 33-37-4-1;

(2) work faithfully at a suitable employment or faithfully pursue a course of study or career and technical education that will equip the person for suitable employment;

(3) undergo available medical treatment or mental health



counseling and remain in a specified facility required for that purpose, **including:** 

(A) addiction counseling;

(B) inpatient detoxification; and

(C) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(4) receive evidence based mental health and addiction, intellectual disability, developmental disability, autism, and co-occurring autism and mental illness forensic treatment services to reduce the risk of recidivism;

(4) (5) support the person's dependents and meet other family responsibilities;

(5) (6) make restitution or reparation to the victim of the crime for the damage or injury that was sustained;

(6) (7) refrain from harassing, intimidating, threatening, or having any direct or indirect contact with the victim or a witness;

(7) (8) report to the prosecuting attorney at reasonable times;

(8) (9) answer all reasonable inquiries by the prosecuting attorney and promptly notify the prosecuting attorney of any change in address or employment; and

(9) (10) participate in dispute resolution either under IC 34-57-3 or a program established by the prosecuting attorney.

(f) An agreement under subsection (d)(2) may include other provisions reasonably related to the defendant's rehabilitation, if approved by the court.

(g) The prosecuting attorney shall notify the victim when prosecution is withheld under this section.

(h) All money collected by the clerk as user's fees under this section shall be deposited in the appropriate user fee fund under IC 33-37-8.

(i) If a court withholds prosecution under this section and the terms of the agreement contain conditions described in subsection (e)(6): (e)(7):

(1) the clerk of the court shall comply with IC 5-2-9; and

(2) the prosecuting attorney shall file a confidential form prescribed or approved by the division of state court administration with the clerk.

SECTION 23. IC 35-38-2-2.3, AS AMENDED BY SEA 175-2015, SEC. 20, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 2.3. (a) As a condition of probation, the court may require a person to do a combination of the following:



(1) Work faithfully at suitable employment or faithfully pursue a course of study or career and technical education that will equip the person for suitable employment.

(2) Undergo available medical or psychiatric treatment and remain in a specified institution if required for that purpose.

(3) Attend or reside in a facility established for the instruction, recreation, or residence of persons on probation.

(4) Participate in a treatment program, educational class, or rehabilitative service provided by a probation department or by referral to an agency.

(5) Support the person's dependents and meet other family responsibilities.

(6) Make restitution or reparation to the victim of the crime for damage or injury that was sustained by the victim. When restitution or reparation is a condition of probation, the court shall fix the amount, which may not exceed an amount the person can or will be able to pay, and shall fix the manner of performance.

(7) Execute a repayment agreement with the appropriate governmental entity to repay the full amount of public relief or assistance wrongfully received, and make repayments according to a repayment schedule set out in the agreement.

(8) Pay a fine authorized by IC 35-50.

(9) Refrain from possessing a firearm or other deadly weapon unless granted written permission by the court or the person's probation officer.

(10) Report to a probation officer at reasonable times as directed by the court or the probation officer.

(11) Permit the person's probation officer to visit the person at reasonable times at the person's home or elsewhere.

(12) Remain within the jurisdiction of the court, unless granted permission to leave by the court or by the person's probation officer.

(13) Answer all reasonable inquiries by the court or the person's probation officer and promptly notify the court or probation officer of any change in address or employment.

(14) Perform uncompensated work that benefits the community.(15) Satisfy other conditions reasonably related to the person's rehabilitation.

(16) Undergo home detention under IC 35-38-2.5.

(17) Undergo a laboratory test or series of tests approved by the state department of health to detect and confirm the presence of the human immunodeficiency virus (HIV) antigen or antibodies



to the human immunodeficiency virus (HIV), if:

(A) the person had been convicted of an offense relating to a criminal sexual act and the offense created an epidemiologically demonstrated risk of transmission of the human immunodeficiency virus (HIV); or

(B) the person had been convicted of an offense relating to a controlled substance and the offense involved:

(i) the delivery by any person to another person; or

(ii) the use by any person on another person;

of a contaminated sharp (as defined in IC 16-41-16-2) or other paraphernalia that creates an epidemiologically demonstrated risk of transmission of HIV by involving percutaneous contact.

(18) Refrain from any direct or indirect contact with an individual and, if convicted of an offense under IC 35-46-3, any animal belonging to the individual.

(19) Execute a repayment agreement with the appropriate governmental entity or with a person for reasonable costs incurred because of the taking, detention, or return of a missing child (as defined in IC 10-13-5-4).

(20) Periodically undergo a laboratory chemical test (as defined in IC 9-13-2-22) or series of chemical tests as specified by the court to detect and confirm the presence of a controlled substance (as defined in IC 35-48-1-9). The person on probation is responsible for any charges resulting from a test and shall have the results of any test under this subdivision reported to the person's probation officer by the laboratory.

(21) If the person was confined in a penal facility, execute a reimbursement plan as directed by the court and make repayments under the plan to the authority that operates the penal facility for all or part of the costs of the person's confinement in the penal facility. The court shall fix an amount that:

(A) may not exceed an amount the person can or will be able to pay;

(B) does not harm the person's ability to reasonably be self supporting or to reasonably support any dependent of the person; and

(C) takes into consideration and gives priority to any other restitution, reparation, repayment, or fine the person is required to pay under this section.

(22) Refrain from owning, harboring, or training an animal.

(23) Participate in a reentry court program.

(24) Receive:



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(A) addiction counseling;

(B) mental health counseling;

(C) inpatient detoxification; and

(D) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(b) When a person is placed on probation, the person shall be given a written statement specifying:

(1) the conditions of probation; and

(2) that if the person violates a condition of probation during the probationary period, a petition to revoke probation may be filed before the earlier of the following:

(A) One (1) year after the termination of probation.

(B) Forty-five (45) days after the state receives notice of the violation.

(c) As a condition of probation, the court may require that the person serve a term of imprisonment in an appropriate facility at the time or intervals (consecutive or intermittent) within the period of probation the court determines.

(d) Intermittent service may be required only for a term of not more than sixty (60) days and must be served in the county or local penal facility. The intermittent term is computed on the basis of the actual days spent in confinement and shall be completed within one (1) year. A person does not earn good time credit while serving an intermittent term of imprisonment under this subsection. When the court orders intermittent service, the court shall state:

(1) the term of imprisonment;

(2) the days or parts of days during which a person is to be confined; and

(3) the conditions.

(e) Supervision of a person may be transferred from the court that placed the person on probation to a court of another jurisdiction, with the concurrence of both courts. Retransfers of supervision may occur in the same manner. This subsection does not apply to transfers made under IC 11-13-4 or IC 11-13-5.

(f) When a court imposes a condition of probation described in subsection (a)(18):

(1) the clerk of the court shall comply with IC 5-2-9; and

(2) the prosecuting attorney shall file a confidential form prescribed or approved by the division of state court administration with the clerk.



(g) As a condition of probation, a court shall require a person:

(1) convicted of an offense described in IC 10-13-6-10;

(2) who has not previously provided a DNA sample in accordance with IC 10-13-6; and

(3) whose sentence does not involve a commitment to the department of correction;

to provide a DNA sample as a condition of probation.

(h) If a court imposes a condition of probation described in subsection (a)(4), the person on probation is responsible for any costs resulting from the participation in a program, class, or service. Any costs collected for services provided by the probation department shall be deposited in the county or local supplemental adult services fund.

SECTION 24. HEA 1448-2015, SECTION 4, is repealed [EFFECTIVE JUNE 30, 2015].

SECTION 25. An emergency is declared for this act.



President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date:

Time:

