

### **ENGROSSED SENATE BILL No. 491**

DIGEST OF SB 491 (Updated March 26, 2019 1:07 pm - DI 131)

Citations Affected: IC 10-17; noncode.

**Synopsis:** Funding for veterans programs. Extends to 2021 the veterans pilot program that provides assistance for certain providers to provide diagnostic testing and hyperbaric oxygen treatment to veterans. (Under current law, the program expires June 30, 2020.) Eliminates the requirement that a veteran must pay a co-pay equal to 10% of the cost of treatment billed to the Indiana department of veterans' affairs or the state department of health for diagnostic testing and hyperbaric oxygen treatment. Makes conforming changes.

**Effective:** Upon passage; July 1, 2019.

# Tomes, Garten, Sandlin, Boots, Merritt, Doriot, Mrvan, Randolph Lonnie M

(HOUSE SPONSORS — FRYE R. GUTWEIN, BARTELS, MACER)

January 14, 2019, read first time and referred to Committee on Veterans Affairs and The

Military.

January 22, 2019, reported favorably — Do Pass; reassigned to Committee on Appropriations.
February 18, 2019, reported favorably — Do Pass.
February 21, 2019, read second time, ordered engrossed. Engrossed.
February 25, 2019, read third time, passed. Yeas 49, nays 0.

HOUSE ACTION
March 5, 2019, read first time and referred to Committee on Veterans Affairs and Public Safety.
March 28, 2019, amended, reported — Do Pass.



First Regular Session of the 121st General Assembly (2019)

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 2018 Regular and Special Session of the General Assembly.

## ENGROSSED SENATE BILL No. 491

A BILL FOR AN ACT to amend the Indiana Code concerning military and veterans.

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

1	SECTION 1. IC 10-17-13.5-4, AS AMENDED BY P.L.155-2018,
2	SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2019]: Sec. 4. (a) The department may make grants to
4	qualified entities to be used for the purpose of providing services to
5	veterans, including the following:
6	(1) Programs focused on eliminating homelessness, preventing
7	near term homelessness, and providing safe and secure living
8	conditions.
9	(2) Assisting veterans in moving from public housing assistance
10	programs to:
11	(A) home ownership; or
12	(B) stable, long term rental status.
13	A grant under this chapter for the purpose specified in clause (B)
14	may include up to nine (9) months of rental assistance.
15	(3) Assisting veterans in finding and using available federal and
16	state resources.
17	(4) Providing the rapeutic services.



 (5) Providing job training and job search assistance.

(b) The department may make grants to the provider chosen by the state department of health under section 6 of this chapter to be used for the purpose of providing assistance to the provider to provide diagnostic testing and hyperbaric oxygen treatment to veterans receiving treatment under the pilot program established under section 6 of this chapter. However, a grant under this chapter may not be awarded for the purposes specified in this subsection unless the state department of health has adopted the rules required by section 6(g) 6(f) of this chapter. In addition, a grant may not be awarded for the purposes specified in this subsection after the expiration of the pilot program established under section 6 of this chapter.

SECTION 2. IC 10-17-13.5-6, AS AMENDED BY P.L.155-2018, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 6. (a) As used in this section, "hyperbaric oxygen treatment" means treatment for traumatic brain injury or posttraumatic stress disorder that is ordered by a health care provider and delivered in a hyperbaric chamber.

- (b) The department shall establish a pilot program for the purpose of providing assistance for each provider that has been approved by the state department of health to provide diagnostic testing and hyperbaric oxygen treatment to veterans receiving treatment under section 4(b) of this chapter.
- (c) The state department of health shall issue a request for proposals to select up to five (5) providers that collectively represent the north, south, east, west, and central geographic areas of Indiana to offer the treatment described in section 4(b) of this chapter.
- (d) An individual veteran is eligible to begin treatment if the service related event that caused the traumatic brain injury or posttraumatic stress disorder is documented by a licensed physician.
- (e) An individual veteran must pay a co-pay equal to ten percent (10%) of the cost of treatment billed to the department or the state department of health.
- (f) (e) A grant under the pilot program established under subsection (b) may be provided only to the provider chosen by the state department of health to provide diagnostic testing and hyperbaric oxygen treatment to veterans.
- (g) (f) The state department of health, after consulting with the department, shall adopt rules under IC 4-22-2 to implement section 4(b) of this chapter, including standards for the following:
  - (1) Determination by a provider that an individual is a veteran eligible for participation in the pilot program.



(2) Determination by the state department of health that a
provider is eligible to participate in the pilot program, including:
(A) a requirement that the provider must maintain compliance
with applicable fire codes, treatment protocols, and state
department of health oversight; and
(B) other facility standards determined by the state department
of health.
(3) Treatment plan requirements, including the following:
(A) A provider's submission to the state department of health,
before providing hyperbaric oxygen treatment to a veteran, of
a treatment plan that includes:
(i) a health care provider's prescription for hyperbaric
oxygen treatment;
(ii) verification by the provider that the veteran is eligible
for participation in the pilot program and voluntarily accepts
treatment through the pilot program;
(iii) an estimate of the cost of the veteran's treatment; and
(iv) any other information required by the state department
of health.
(B) A reasonable time frame for:
(i) approval or disapproval by the state department of health
of a treatment plan described in clause (A); and
(ii) notice to the provider of approval or disapproval of the
treatment plan.
(C) Contingent on sufficient funding available in the fund,
approval of each treatment plan that meets the requirements
established by the state department of health under this
section.
(D) The sources of funding for the estimated treatment cost for
each veteran whose treatment plan is approved under this
section.
(4) Criteria for approval of payment for treatment that has been
verified by the state department of health to have been provided
under a treatment plan approved under subdivision (3), including:
(A) whether a drug or device used in the treatment plan has
been approved for any purpose by the federal Food and Drug
Administration;
(B) health improvement of the veteran receiving the treatment,
as demonstrated through:
(i) standardized, independent pretreatment and
posttreatment neuropsychological testing;
(ii) nationally accepted survey instruments;



1	(iii) neurological imaging; or
2	(iv) clinical examination; and
3	(C) receipt by the state department of health of pretreatment
4	and posttreatment evaluation documentation.
5	(5) Confidentiality of all individually identifiable patient
6	information of a veteran. However, subject to the requirements of
7	the federal Health Insurance Portability and Accountability Act
8	and any other applicable medical record laws, all data and
9	information from which the identity of an individual veteran
10	cannot be reasonably ascertained must be available to the general
11	assembly, participating institutional review boards, participating
12	health care providers, medical researchers, and other
13	governmental agencies.
14	(h) (g) A provider under this section, including a physician who
15	supervises treatment, shall bill the pilot program and be paid at cost out
16	of the grant amount awarded to the provider. No providers may profit
17	from services provided under the pilot program. Services offered under
18	the pilot program are provided as a service to veterans.
19	(i) (h) Each provider shall quarterly file a status report concerning
20	the services provided by the provider under the pilot program with the
21	following:
22	(1) The department.
23	(2) The state department of health.
24	(i) At the conclusion of the pilot program, the department, in
25	collaboration with the state department of health, shall prepare a
26	written final report and transmit it to the following:
27	(1) The governor.
28	(2) The leadership of the legislative council in electronic format
29	under IC 5-14-6.
30	(3) The chairperson of the house committee on veterans affairs
31	and public safety.
32	(4) The chairperson of the senate committee on veterans affairs
33	and the military.
34	The report required under this subsection must be made available on
35	the department's Internet web site.
36	(k) (j) This section expires June 30, <del>2020.</del> <b>2021.</b>
37	SECTION 3. [EFFECTIVE UPON PASSAGE] (a) The following
38	definitions apply throughout this SECTION:
39	(1) "Department" refers to the Indiana department of
40	veterans' affairs.
41	(2) "Pilot program" refers to the pilot program established
42	under IC 10-17-13.5-6, as amended by this act, to provide



1	assistance to approved providers that furnish diagnostic
2	testing and hyperbaric oxygen treatment to veterans.
3	(b) Money appropriated to the department in P.L.217-2017,
4	SECTION 8, for purposes of the pilot program for state fiscal
5	years beginning July 1, 2017, and ending June 30, 2019, and
6	remaining unspent at the end of the state fiscal year ending June
7	30, 2019:
8	(1) remains available to the department for the purposes of
9	the pilot program; and
10	(2) does not revert to the state general fund.
11	(c) Money appropriated to the department for purposes of the
12	pilot program for state fiscal years beginning July 1, 2017, and
13	ending June 30, 2019, may not be spent after June 30, 2021. Any
14	money appropriated to the department for the pilot program that
15	remains unspent after June 30, 2021, reverts to the state general
16	fund.
17	(d) This SECTION expires July 1, 2021.
18	SECTION 4. An emergency is declared for this act.



#### COMMITTEE REPORT

Madam President: The Senate Committee on Veterans Affairs and The Military, to which was referred Senate Bill No. 491, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS and be reassigned to the Senate Committee on Appropriations.

(Reference is to SB 491 as introduced.)

TOMES, Chairperson

Committee Vote: Yeas 9, Nays 0

#### COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Senate Bill No. 491, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS.

(Reference is to SB 491 as printed January 23, 2019.)

MISHLER, Chairperson

Committee Vote: Yeas 13, Nays 0

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Veterans Affairs and Public Safety, to which was referred Senate Bill 491, 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, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 10-17-13.5-4, AS AMENDED BY P.L.155-2018, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 4. (a) The department may make grants to qualified entities to be used for the purpose of providing services to veterans, including the following:

(1) Programs focused on eliminating homelessness, preventing



near term homelessness, and providing safe and secure living conditions.

- (2) Assisting veterans in moving from public housing assistance programs to:
  - (A) home ownership; or
  - (B) stable, long term rental status.

A grant under this chapter for the purpose specified in clause (B) may include up to nine (9) months of rental assistance.

- (3) Assisting veterans in finding and using available federal and state resources.
- (4) Providing therapeutic services.
- (5) Providing job training and job search assistance.
- (b) The department may make grants to the provider chosen by the state department of health under section 6 of this chapter to be used for the purpose of providing assistance to the provider to provide diagnostic testing and hyperbaric oxygen treatment to veterans receiving treatment under the pilot program established under section 6 of this chapter. However, a grant under this chapter may not be awarded for the purposes specified in this subsection unless the state department of health has adopted the rules required by section  $\frac{6(g)}{g} 6(f)$  of this chapter. In addition, a grant may not be awarded for the purposes specified in this subsection after the expiration of the pilot program established under section 6 of this chapter."

Page 2, strike lines 2 through 4.

Page 2, line 5, strike "(f)" and insert "(e)".

Page 2, line 9, strike "(g)" and insert "(f)".

Page 3, line 27, strike "(h)" and insert "(g)".

Page 3, line 32, strike "(i)" and insert "(h)".

Page 3, line 37, strike "(j)" and insert "(i)".

Page 4, line 7, strike "(k)" and insert "(j)".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 491 as printed February 19, 2019.)

FRYE R

Committee Vote: yeas 11, nays 0.

