

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.

SENATE ENROLLED ACT No. 491

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

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

SECTION 1. IC 10-17-13.5-6, AS AMENDED BY P.L.155-2018, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: 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~~ **may not be required to** pay a co-pay **under the pilot program.** ~~equal to ten percent (10%) of the cost of treatment billed to the department or the state department of~~

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health.

(f) 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) 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;

(iii) neurological imaging; or

(iv) clinical examination; and

(C) receipt by the state department of health of pretreatment and posttreatment evaluation documentation.

(5) Confidentiality of all individually identifiable patient information of a veteran. However, subject to the requirements of the federal Health Insurance Portability and Accountability Act and any other applicable medical record laws, all data and information from which the identity of an individual veteran cannot be reasonably ascertained must be available to the general assembly, participating institutional review boards, participating health care providers, medical researchers, and other governmental agencies.

(h) A provider under this section, including a physician who supervises treatment, shall bill the pilot program and be paid at cost out of the grant amount awarded to the provider. No providers may profit from services provided under the pilot program. Services offered under the pilot program are provided as a service to veterans.

(i) Each provider shall quarterly file a status report concerning the services provided by the provider under the pilot program with the following:

(1) The department.

(2) The state department of health.

(j) At the conclusion of the pilot program, the department, in collaboration with the state department of health, shall prepare a written final report and transmit it to the following:

(1) The governor.

(2) The leadership of the legislative council in electronic format under IC 5-14-6.

(3) The chairperson of the house committee on veterans affairs and public safety.

(4) The chairperson of the senate committee on veterans affairs



and the military.

The report required under this subsection must be made available on the department's Internet web site.

(k) This section expires June 30, ~~2020~~ 2021.

SECTION 2. [EFFECTIVE UPON PASSAGE] (a) The following definitions apply throughout this SECTION:

(1) "Department" refers to the Indiana department of veterans' affairs.

(2) "Pilot program" refers to the pilot program established under IC 10-17-13.5-6, as amended by this act, to provide assistance to approved providers that furnish diagnostic testing and hyperbaric oxygen treatment to veterans.

(b) Money appropriated to the department in P.L.217-2017, SECTION 8, for purposes of the pilot program for state fiscal years beginning July 1, 2017, and ending June 30, 2019, and remaining unspent at the end of the state fiscal year ending June 30, 2019:

(1) remains available to the department for the purposes of the pilot program; and

(2) does not revert to the state general fund.

(c) Money appropriated to the department for purposes of the pilot program for state fiscal years beginning July 1, 2017, and ending June 30, 2019, may not be spent after June 30, 2021. Any money appropriated to the department for the pilot program that remains unspent after June 30, 2021, reverts to the state general fund.

(d) This SECTION expires July 1, 2021.

SECTION 3. [EFFECTIVE UPON PASSAGE] (a) 410 IAC 37-1-2 is void. The publisher of the Indiana Administrative Code and Indiana Register shall remove this section from the Indiana Administrative Code.

(b) Before July 1, 2019, the state department of health shall adopt an emergency rule in the manner provided under IC 4-22-2-37.1 to amend 410 IAC 37-1-11(b) to remove the requirement that for a veteran to be eligible to participate in the pilot program established under IC 10-17-13.5-6, as amended by this act, the veteran must pay a co-pay equal to ten percent (10%) of the cost of treatment billed to the Indiana department of veterans' affairs. Notwithstanding IC 4-22-2-37.1(g), an emergency rule adopted by the state department of health under this subsection and in the manner provided under IC 4-22-2-37.1 expires July 1, 2021.

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(c) Before July 1, 2019, the state department of health shall adopt an emergency rule in the manner provided under IC 4-22-2-37.1 to amend 410 IAC 37-1-13(c) to provide that grants may not be made under the pilot program established under IC 10-17-13.5-6, as amended by this act, after June 30, 2021. Notwithstanding IC 4-22-2-37.1(g), an emergency rule adopted by the state department of health under this subsection and in the manner provided under IC 4-22-2-37.1 expires July 1, 2021.

(d) This SECTION expires July 1, 2021.

SECTION 4. 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: _____

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