

# FAEGRE BAKER DANIELS

## 2013 Legislative Update #10

### Indiana Society of Anesthesiologists



**March 24, 2013**

With only two weeks remaining in the 2013 General Assembly for committees to act on proposed legislation, the pace at the Statehouse has picked up considerably as panels work long hours to meet the upcoming April 8 deadline for committee reports.

Both **SB 273** (anesthesiologist assistants) and **SB 268** (CRNAs) were heard on Wednesday in the House Public Health Committee. As expected, the IANA came out in full force to support SB 268 and to voice serious concerns with SB 273. Among other things, IANA urged legislators to allow CRNAs to administer anesthesia under the direction of a podiatrist in an ambulatory surgical center and to classify CRNAs as advanced practice nurses. A total of five different CRNAs testified, telling members of the committee that:

- CRNAs cannot get jobs in Indiana;
- The number of CRNAs practicing in Indiana is ridiculously low compared to our surrounding states;
- Indiana has the most restrictive practice environment in the United States;
- CRNAs are trained to practice independently and are just as qualified as anesthesiologists;
- Indiana CRNAs cannot practice in the military because an APN designation is required;
- CRNAs can administer anesthesia for podiatrists in 31 other states without any restrictions;
- The AA care team model is outdated, costly and anti-competitive.

Dr. McNiece did a great job both explaining the practice of anesthesiologists and rebutting some of the more outrageous statements made by the CRNAs. I provided the committee with an overview of the bill and corrected some of the erroneous statements made IANA, pointing out (for example) that Indiana is one of 33 states that require physician supervision of CRNAs and that many states impose restrictions on both the types of anesthetic that a CRNA may administer for a podiatric patient and the sites where a CRNA may practice with a podiatrist.

Rep. Clere had informed us in advance that he was not planning to take a vote on the bills at the March 20 meeting. At this point, it appears that the bills will be up for amendment and vote on either April 1 or April 3. That will give us time to continue to meet with committee members to clear up the erroneous statements made by IANA and also to address concerns raised by both the governor's office and the tea party legislators regarding licensure in general.

Looking ahead, **HB 1135** (midwives) has been scheduled for a hearing on Wednesday in the Senate Health & Provider Services Committee. Among other things, the bill allows a certified direct entry midwife to administer local anesthetics by infiltration or topical application, only for postpartum repair

of lacerations, tears, and episiotomy. The last time that Sen. Miller granted this bill a hearing (2009), ISA was prepared to offer an amendment that would strike “by infiltration,” thereby limiting the midwife’s scope of practice to topical anesthetics only.

Following are highlights of other action last week on bills of interest to ISA:

- **HB 1034** (physical therapy services without a referral) was approved by the Senate on a 45-4, and now returns to the House, where the bill’s author (Rep. David Frizzell) may either concur with the changes or file a dissent and send the bill to conference committee.
- **HB 1038** (blood donation testing) was amended and approved by the Senate Health & Provider Services Committee. The amendment allows a blood center to distribute blood or plasma before the results of the screening test are available if a health care provider has determined that the patient is in imminent danger of death and the patient or the patient’s representative has consented in writing.
- **HB 1099** (physician assistants) was amended and approved by the Senate Health & Provider Services Committee. The amendment requires the supervising physician to review 100% of the patient charts in the first year that a physician assistant obtains authority to prescribe a controlled substance.
- **HB 1105** (anatomic pathology services) is awaiting the governor’s signature.
- **HB 1182** (Physician order for scope of treatment form) passed the Senate 48-1. Because the bill was amended in the Senate, it has been returned to the House for further action.
- **HB 1315** (biosimilar biological products) was stripped of its substantive provisions on second reading, and now requires the Health Finance Commission to study, during the 2013 legislative interim, how Indiana law should address the prescribing and substituting of biosimilar biological products.
- **HB 1464** (immunizations by pharmacists and pharmacy students) was amended and approved by the Senate Health & Provider Services Committee.
- **SB 471** (prescriptions for brand name drugs) was approved unanimously without amendment by the House and now moves to the governor for his signature.
- As passed by the Senate, **SB 554** would require OMPP to reimburse: (1) a home health agency for telehealth services; and (2) a federally qualified health center and a rural health clinic for telemedicine services; under the Medicaid program. The bill was amended in the House to (1) add behavioral health evaluations and treatment, including those for substance abuse, to the definition of “telemedicine”; (2) require OMPP to also reimburse community mental health centers and critical access hospitals for telemedicine services; and (3) require the Health Finance Commission to study issues concerning extending telehealth services and telemedicine services under the Medicaid program.

Following are summaries of the bills on the tracking list that are still alive. Bills that have received action in the second chamber are highlighted in blue.

As always, please let us know if you have any questions or need additional information.

<p>HB 1001</p>	<p><i>Biennial budget.</i> (T. Brown, Kenley, Tallian)</p> <p>Appropriates money for capital expenditures, the operation of the state, the delivery of Medicaid and other services, and various other distributions and purposes. Provides a school funding formula. Authorizes a hospital assessment fee. Extends the health facility quality assessment fee indefinitely. Allocates 1.5% of state gross retail tax collections to the motor vehicle highway account. Removes state police expenses from motor vehicle highway account distributions. Provides that the inheritance tax expires on January 1, 2018, rather than on January 1, 2022. Repeals the Indiana estate tax and Indiana generation skipping transfer tax. Reallocates certain racetrack casino revenues and cigarette tax revenues. Repeals the nursing scholarship and scholarships for special education, occupational therapy, and physical therapy students. Establishes student teaching stipends for minority students and high need fields. Transfers \$150,000,000 to the state tuition reserve fund in each year of the biennium. Makes numerous changes to the administration of state programs.</p> <table border="1" data-bbox="280 919 1101 1094"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/27/2013</td> <td><b>S: Committee Sched</b></td> <td>4:00 PM Room 431 Appropriations</td> </tr> <tr> <td>03/28/2013</td> <td><b>S: Committee Sched</b></td> <td>9:00 AM Room 431 Appropriations</td> </tr> <tr> <td>04/04/2013</td> <td><b>S: Committee Sched</b></td> <td>9:00 AM Room 431 Appropriations</td> </tr> </tbody> </table>	Date	Action		03/27/2013	<b>S: Committee Sched</b>	4:00 PM Room 431 Appropriations	03/28/2013	<b>S: Committee Sched</b>	9:00 AM Room 431 Appropriations	04/04/2013	<b>S: Committee Sched</b>	9:00 AM Room 431 Appropriations
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<p>HB 1024</p>	<p><i>Private sector impacts of administrative rules.</i> (Koch, Hershman)</p> <p>Provides that for the required cost benefit analysis prepared by the office of management and budget (OMB) for a proposed administrative rule, an analysis prepared after June 30, 2013, must include a private sector employment impact statement that sets forth the OMB's estimate of the economic impact of the proposed rule on private sector employment in Indiana. Specifies the particular impacts that the OMB must identify in the statement. Provides that if the OMB determines that the preparation of a private sector employment impact statement is unnecessary or impractical with respect to a particular proposed rule, the OMB may decline to prepare a statement with respect to the rule. Provides that for the required cost benefit analysis prepared by the OMB for the three year period following an adopted rule's effective date, an analysis prepared after June 30, 2013, must include: (1) the private sector employment impact statement, if any, prepared by the OMB before the rule's adoption; and (2) the actual economic impact of the adopted rule on private sector employment during the three year period covered by the analysis.</p> <table border="1" data-bbox="280 1675 971 1839"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>01/22/2013</td> <td><b>H: Referred</b></td> <td>Referred to the Senate</td> </tr> <tr> <td>01/22/2013</td> <td><b>H: Sponsor</b></td> <td>Added Brandt Hershman</td> </tr> <tr> <td>02/25/2013</td> <td><b>S: 1st Reading</b></td> <td>Assigned Tax and Fiscal Policy</td> </tr> </tbody> </table>	Date	Action		01/22/2013	<b>H: Referred</b>	Referred to the Senate	01/22/2013	<b>H: Sponsor</b>	Added Brandt Hershman	02/25/2013	<b>S: 1st Reading</b>	Assigned Tax and Fiscal Policy
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02/25/2013	<b>S: 1st Reading</b>	Assigned Tax and Fiscal Policy											
<p>HB 1034</p>	<p><i>Physical therapy services without a referral.</i> (Frizzell, Becker, Pat Miller)</p>												

Allows a physical therapist to evaluate and treat a patient without a referral for not more than 24 calendar days. Requires a physical therapist to obtain a referral from the patient's provider if further treatment by the physical therapist is needed. Provides that a physical therapist may not perform spinal manipulation of the spinal column or the vertebral column unless: (1) the physical therapist is acting on the order or referral of a physician, an osteopath, or a chiropractor; and (2) the referring physician, osteopath, or chiropractor has examined the patient before issuing the order or referral. Provides that a physical therapist may not perform sharp debridement unless a physical therapist has an order or referral of a licensed physician, osteopath, or podiatrist.

Date	Action	
03/18/2013	<b>S: 2nd Reading</b>	Amended Order Engrossed
03/19/2013	<b>S: Ret 1st House</b>	Amendments
03/19/2013	<b>S: 3rd Reading</b>	Pass (45-4)

HB 1051

*Credentialing of music therapists.* (Crouch, Becker)

Provides that an individual may not profess to be a certified music therapist unless the individual holds and maintains the credentialing administered by the Certification Board for Music Therapists (CBMT). Provides that language concerning certification of music therapists does not apply to the practice of an occupation or a profession for which an individual is licensed, certified, or registered in Indiana by a state agency if the individual is practicing within the scope of the license, certificate, or registration of the individual. Requires the Indiana professional licensing agency (agency) to maintain a hyperlink to the Internet web site for the Certification Board for Music Therapists on the Internet web site of the agency.

Date	Action	
01/29/2013	<b>H: Referred</b>	Referred to the Senate
01/29/2013	<b>H: Sponsor</b>	Added Vaneta Becker
02/25/2013	<b>S: 1st Reading</b>	Assigned Commerce, Economic Development and Technology

HB 1055

*Emergency rulemaking statute.* (McMillin, M. Young, Zakas)

Removes from the statute providing the procedure by which Indiana administrative agencies may adopt emergency rules (emergency rules statute) a list enumerating the statutes that convey emergency rulemaking authority, and codifies in substantive administrative law emergency rulemaking authority that is currently codified only in this list. Relocates exceptions and conditions applicable only to certain emergency rules from the emergency rules statute to the statute establishing the authority for adoption of the emergency rule to which the exception or condition applies. Provides that the publisher of the Indiana administrative code shall annually publish a list of agencies authorized to adopt rules under the emergency rules statute. Makes other technical corrections. (The introduced version of this bill was prepared by the code revision commission.)

Date	Action	
02/25/2013	<b>S: 1st Reading</b>	Assigned Commerce, Economic Development and Technology
03/11/2013	<b>S: Committee Sched</b>	10:00 AM Room 130 Commerce, Economic Development and Technology

	03/25/2013	<b>S: Committee Sched</b>	10:00 AM Room 130 Commerce, Economic Development and Technology												
HB 1099	<p><i>Physician assistants.</i> (Davisson, Pat Miller, Skinner, Grooms)</p> <p>Amends the definition of "supervision" for purposes of the physician assistant law concerning where the supervising physician or physician designee is located. Allows a physician assistant that meets certain practice requirements to prescribe schedule II controlled substances. Allows a supervising physician to delegate a physician assistant to prescribe a controlled substance for an aggregate 30 day supply. (Current law limits the prescription to a one time 30 day supply.) Changes the percentages of patient charts that a supervising physician or physician designee must review based on the number of years the physician assistant has been employed. Specifies that a physician may supervise not more than two physician assistants at the same time.</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/20/2013</td> <td><b>S: Committee Sched</b></td> <td>8:00 AM Room 431 Health and Provider Services</td> </tr> <tr> <td>03/20/2013</td> <td><b>S: Committee Action</b></td> <td>Pass Amend(10-0) Health and Provider Services</td> </tr> <tr> <td>03/21/2013</td> <td><b>S: Committee Report</b></td> <td>amend do pass, adopted</td> </tr> </tbody> </table>			Date	Action		03/20/2013	<b>S: Committee Sched</b>	8:00 AM Room 431 Health and Provider Services	03/20/2013	<b>S: Committee Action</b>	Pass Amend(10-0) Health and Provider Services	03/21/2013	<b>S: Committee Report</b>	amend do pass, adopted
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HB 1135	<p><i>Midwives.</i> (Lehe, Pat Miller)</p> <p>Requires the local health officer to make a permanent record of the person in attendance at a birth. Establishes the midwifery board (board). Sets qualifications for a certified direct entry midwife (CDEM). Requires the board to: (1) establish continuing education requirements; (2) develop peer review procedures; and (3) adopt rules concerning liability insurance and the competent practice of CDEMs. Establishes procedures and qualifications for certain practicing CDEMs to receive a license. Establishes a Class D felony for practicing midwifery without a license. Provides that certain individuals may not be held jointly or severally liable for the acts or omissions of a client's CDEM. Adds culpability standards to the crimes of practicing medicine or osteopathic medicine and acting as a physician assistant without a license. Allows CDEMs to administer certain prescription drugs. Allows certain individuals to act under the supervision of a CDEM. Repeals the definition of "midwife" in the medical malpractice law, and adds the definition of "certified nurse midwife". Makes conforming changes.</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>02/25/2013</td> <td><b>H: Sponsor</b></td> <td>Added Patricia L. Miller</td> </tr> <tr> <td>02/27/2013</td> <td><b>S: 1st Reading</b></td> <td>Assigned Health and Provider Services</td> </tr> <tr> <td>03/27/2013</td> <td><b>S: Committee Sched</b></td> <td>9:00 AM Room 431 Health and Provider Services</td> </tr> </tbody> </table>			Date	Action		02/25/2013	<b>H: Sponsor</b>	Added Patricia L. Miller	02/27/2013	<b>S: 1st Reading</b>	Assigned Health and Provider Services	03/27/2013	<b>S: Committee Sched</b>	9:00 AM Room 431 Health and Provider Services
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HB 1152	<p><i>Practice of occupational therapy.</i> (Kirchhofer, Pat Miller)</p> <p>Revises the definition of "practice of occupational therapy". Adds a definition of "occupational therapy services". Adds osteopaths or physician assistants to the practitioners that may provide a referral or order to an occupational therapist. Provides that an occupational therapist must report to the practitioner as specified by the practitioner who provided the referral or order. However, if the practitioner does not specify a reporting requirement, the occupational therapist shall report to the practitioner upon completion or termination of occupational therapy services. Makes a conforming change.</p>														

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		02/21/2013	<b>H: Sponsor</b> Added Patricia L. Miller
		02/27/2013	<b>S: 1st Reading</b> Assigned Health and Provider Services
		03/27/2013	<b>S: Committee Sched</b> 9:00 AM Room 431 Health and Provider Services
HB 1182	<p><i>Physician order for scope of treatment forms.</i> (T. Brown, Pat Miller, Holdman)</p> <p>Establishes a process for the execution of a physician order for scope of treatment (POST) form by an individual, or the individual's representative, and the individual's treating physician to indicate treatment the individual would like to have or have withheld under specified circumstances. Requires the state department of health to: (1) develop and distribute the POST form; and (2) place the POST form on the state department's Internet web site. Specifies provisions that must be included in the POST form. Allows for the modification or revocation of the POST form. Specifies that the existence of an executed POST form cannot affect life insurance policies or premiums. Provides civil and criminal immunity for certain actions taken by a health care provider or its employees under an executed POST form. Provides civil immunity concerning the use or misuse of the POST form placed on the state department of health's Internet web site.</p>		
		<b>Date</b>	<b>Action</b>
		03/12/2013	<b>S: Sponsor</b> Added Travis Holdman
		03/19/2013	<b>S: Ret 1st House</b> Amendments
		03/19/2013	<b>S: 3rd Reading</b> Pass (48-1)
HB 1242	<p><i>Licensing of diabetes educators.</i> (Frizzell, Pat Miller)</p> <p>Creates the diabetes educators board, and provides for the licensure of diabetes educators. Makes a technical correction.</p>		
		<b>Date</b>	<b>Action</b>
		02/19/2013	<b>H: Sponsor</b> Added Patricia L. Miller
		02/25/2013	<b>S: 1st Reading</b> Assigned Health and Provider Services
		03/27/2013	<b>S: Committee Sched</b> 9:00 AM Room 431 Health and Provider Services
HB 1272	<p><i>Dietitian licensure.</i> (Bacon, Pat Miller)</p> <p>Requires that, with certain exceptions, an individual who: (1) professes to be a licensed dietitian; or (2) implies by words or letters that the individual is a licensed dietitian; must be licensed. Repeals provisions providing for certification of dietitians. Changes the name of the Indiana dietitians certification board to the Indiana dietitians licensing board. Specifies that an individual who is a certified dietitian on June 30, 2013, becomes a licensed dietitian beginning July 1, 2013. Makes other conforming changes.</p>		
		<b>Date</b>	<b>Action</b>
		02/25/2013	<b>H: Referred</b> Referred to the Senate
		02/25/2013	<b>H: Sponsor</b> Added Patricia L. Miller
		02/27/2013	<b>S: 1st Reading</b> Assigned Commerce, Economic Development and Technology

<p>HB 1315</p>	<p><i>Biosimilar biological products.</i> (Clere, Pat Miller, Grooms)</p> <p>Requires the health finance commission to study, during the 2013 legislative interim, how Indiana law should address the prescribing and substituting of biosimilar biological products.</p> <table border="1" data-bbox="280 323 1247 499"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/11/2013</td> <td><b>S: Committee Action</b></td> <td>Pass Amend(8-4) Health and Provider Services</td> </tr> <tr> <td>03/12/2013</td> <td><b>S: Committee Report</b></td> <td>amend do pass, adopted</td> </tr> <tr> <td>03/18/2013</td> <td><b>S: 2nd Reading</b></td> <td>Amended Order Engrossed</td> </tr> </tbody> </table>	Date	Action		03/11/2013	<b>S: Committee Action</b>	Pass Amend(8-4) Health and Provider Services	03/12/2013	<b>S: Committee Report</b>	amend do pass, adopted	03/18/2013	<b>S: 2nd Reading</b>	Amended Order Engrossed
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<p>HB 1319</p>	<p><i>Health benefit exchange provisions.</i> (Lehman, Pat Miller)</p> <p>Provides for implementation of the federal Patient Protection and Affordable Care Act with respect to a health benefit exchange in Indiana. Specifies that Indiana insurance law applies to a health plan offered through a health benefit exchange to the same extent the law applies to a health plan offered independent of the health benefit exchange. Specifies requirements for health plans issued through a health benefit exchange. Requires a navigator to be certified and an application organization to be registered before providing services with respect to a health benefit exchange. Provides for dissolution of the Indiana comprehensive health insurance association.</p> <table border="1" data-bbox="280 892 1101 1068"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>02/21/2013</td> <td><b>H: Sponsor</b></td> <td>Added Patricia L. Miller</td> </tr> <tr> <td>02/27/2013</td> <td><b>S: 1st Reading</b></td> <td>Assigned Appropriations</td> </tr> <tr> <td>03/28/2013</td> <td><b>S: Committee Sched</b></td> <td>9:00 AM Room 431 Appropriations</td> </tr> </tbody> </table>	Date	Action		02/21/2013	<b>H: Sponsor</b>	Added Patricia L. Miller	02/27/2013	<b>S: 1st Reading</b>	Assigned Appropriations	03/28/2013	<b>S: Committee Sched</b>	9:00 AM Room 431 Appropriations
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<p>HB 1376</p>	<p><i>Various privacy issues.</i> (Koch, Steele)</p> <p>Makes the following changes to the statute concerning telephone caller identification services: (1) Repeals the definition of "telecommunications service provider". (2) Adds the definition of "provider". In the statutes concerning: (1) telephone caller identification services; and (2) telephone solicitations; replaces the term "caller ID" with the term "caller identification", as used in the federal Caller ID Act of 2009. Provides that a person shall not knowingly and with the intent to defraud or cause harm to another person, or to wrongfully obtain anything of value, cause any caller identification service to transmit misleading or inaccurate caller identification information to a subscriber in Indiana. Exempts certain activities from the prohibition. Provides that a violation of the prohibition is: (1) a Class B misdemeanor; and (2) a deceptive act actionable by the attorney general. Specifies that the attorney general may recover a civil penalty of not more than \$10,000 for a knowing violation. Provides that a subsequent violation is a Class A misdemeanor. Provides a cause of action for: (1) damages; and (2) injunctive relief; for any person aggrieved by a violation. Prohibits the professional licensing agency (PLA) or a board administered by the PLA from disclosing to the public personal information of an individual who: (1) applies for or holds a license, certificate, registration, or permit issued by a board; or (2) is a member of a board administered by the PLA; subject to certain exceptions specified by law. Makes conforming amendments.</p> <table border="1" data-bbox="280 1780 1295 1913"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/19/2013</td> <td><b>S: Committee Sched</b></td> <td>10:00 AM Room 233 Corrections and Criminal Law</td> </tr> <tr> <td>03/19/2013</td> <td><b>S: Committee Action</b></td> <td>Pass Amend(8-0) Corrections and Criminal Law</td> </tr> </tbody> </table>	Date	Action		03/19/2013	<b>S: Committee Sched</b>	10:00 AM Room 233 Corrections and Criminal Law	03/19/2013	<b>S: Committee Action</b>	Pass Amend(8-0) Corrections and Criminal Law			
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03/19/2013	<b>S: Committee Action</b>	Pass Amend(8-0) Corrections and Criminal Law											

03/21/2013	<b>S: Committee Report</b>	amend do pass, adopted
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HB 1464

*Immunizations by pharmacists and pharmacy students.* (Davisson, Walker, Banks, Grooms)

Adds immunizations for pneumonia, tetanus, diphtheria, acellular pertussis (Tdap), human papillomavirus (HPV) infection, and meningitis to the immunizations that a pharmacist is allowed to administer to an individual or a group of individuals under a drug order, under a prescription, or according to a protocol approved by a physician if certain requirements are met. Provides that if a physician uses a protocol, the protocol may apply only to an individual or group of individuals who are: (1) at least 65 years old for the pneumonia immunization; or (2) at least 11 years old for the other allowable immunizations. (Current law provides that an individual given an immunization by a pharmacist under a protocol must be at least 14 years of age.) Specifies consent requirements. Requires the physician who writes the protocol to actively practice with a medical office in Indiana. Requires certain information to be available when an immunization is administered under a protocol. Requires a pharmacist or pharmacist's designee to provide immunization data to the immunization data registry unless the patient or the patient's parent or guardian completes an immunization data exemption form. Allows a pharmacist intern or a pharmacist student to administer an immunization to an individual under a drug order or prescription or to administer an immunization to a group of individuals under a drug order or prescription or according to a protocol, subject to rules adopted by the Indiana board of pharmacy. Provides that the rules: (1) must provide for the direct supervision by a pharmacist, a physician, a physician assistant, or an advanced practice nurse; and (2) may not be less stringent than the requirements applying to a pharmacist who administers an immunization to an individual. Establishes the interim study committee on adult and children immunization issues.

Date	Action	
03/20/2013	<b>S: Committee Sched</b>	8:00 AM Room 431 Health and Provider Services
03/20/2013	<b>S: Committee Action</b>	Pass Amend(10-0) Health and Provider Services
03/21/2013	<b>S: Committee Report</b>	amend do pass, adopted

HB 1465

*INSPECT program.* (Davisson, Pat Miller)

Allows prescriptions for schedule V controlled substances to be transmitted by an electronic prescription from the practitioner or the agent of the practitioner to a pharmacy. Provides that the controlled substances registration fees must be deposited into the controlled substances data fund. (Current law requires the deposit of 16% of the fees into the fund.) Establishes the INSPECT interim study committee.

Date	Action	
03/13/2013	<b>S: Committee Action</b>	Pass Amend(12-0) Health and Provider Services
03/14/2013	<b>S: Committee Report</b>	amend do pass, reassigned Appropriations
03/28/2013	<b>S: Committee Sched</b>	9:00 AM Room 431 Appropriations

HB 1518

*State board of nursing.* (M. Smith, Merritt)

Allows the Indiana state board of nursing (board) to hire an education compliance officer. Allows the board to use the impaired nurses account to fund the education compliance officer and to carry out any of the duties of the board. Limits the amount that may be paid from the impaired nurses account in a state fiscal year to fund the education compliance officer.



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	03/11/2013	<b>S: Committee Sched</b>	10:00 AM Room 130 Commerce, Economic Development and Technology												
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HB 1583	<p><i>Review of administrative rules.</i> (Harman, Mishler, Yoder)</p> <p>Sets forth procedures for the appointment of: (1) the members of the administrative rules oversight committee (committee); and (2) the committee's chair; to more closely align to the actual schedule of appointments made before the election of the one hundred eighteenth general assembly. Permits committee members to participate in committee meetings from remote locations if at least five committee members are physically present at the place where the meeting is held. For a rule proposed by an agency after July 15, 2013, requires the agency to submit the rule to the committee for review if the agency determines the rule will have a total estimated economic impact greater than \$500,000 on all regulated persons. Requires the agency to submit the rule to the committee not later than the date the agency submits the rule to the attorney general for review. Allows an agency to submit a rule to the committee for review if the agency determines the rule will have a total estimated economic impact less than \$500,000. Permits the committee to recommend that the governor approve or disapprove the rule.</p> <table border="1"> <thead> <tr> <th><b>Date</b></th> <th><b>Action</b></th> <th></th> </tr> </thead> <tbody> <tr> <td>03/20/2013</td> <td><b>S: Committee Sched</b></td> <td>1:30 PM Room 431 Public Policy</td> </tr> <tr> <td>03/20/2013</td> <td><b>S: Committee Action</b></td> <td>Pass(8-0) Public Policy</td> </tr> <tr> <td>03/21/2013</td> <td><b>S: Committee Report</b></td> <td>do pass, adopted</td> </tr> </tbody> </table>			<b>Date</b>	<b>Action</b>		03/20/2013	<b>S: Committee Sched</b>	1:30 PM Room 431 Public Policy	03/20/2013	<b>S: Committee Action</b>	Pass(8-0) Public Policy	03/21/2013	<b>S: Committee Report</b>	do pass, adopted
<b>Date</b>	<b>Action</b>														
03/20/2013	<b>S: Committee Sched</b>	1:30 PM Room 431 Public Policy													
03/20/2013	<b>S: Committee Action</b>	Pass(8-0) Public Policy													
03/21/2013	<b>S: Committee Report</b>	do pass, adopted													
SB 105	<p><i>Child abuse and neglect inquiries.</i> (Steele, Koch)</p> <p>Provides that when confronted with a potential case of child abuse or neglect, any law enforcement employee, judiciary employee, medical doctor, employee of a medical doctor, or school official may contact a local office of the department of child services to report the suspected child abuse or neglect.</p> <table border="1"> <thead> <tr> <th><b>Date</b></th> <th><b>Action</b></th> <th></th> </tr> </thead> <tbody> <tr> <td>01/29/2013</td> <td><b>S: Referred</b></td> <td>Referred to the House</td> </tr> <tr> <td>01/29/2013</td> <td><b>S: Sponsor</b></td> <td>Added Eric Koch</td> </tr> <tr> <td>02/26/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Family, Children and Human Affairs</td> </tr> </tbody> </table>			<b>Date</b>	<b>Action</b>		01/29/2013	<b>S: Referred</b>	Referred to the House	01/29/2013	<b>S: Sponsor</b>	Added Eric Koch	02/26/2013	<b>H: 1st Reading</b>	Assigned Family, Children and Human Affairs
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01/29/2013	<b>S: Referred</b>	Referred to the House													
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02/26/2013	<b>H: 1st Reading</b>	Assigned Family, Children and Human Affairs													
SB 246	<p><i>Certification of controlled drug clinics.</i> (Pat Miller, Grooms, Davisson)</p> <p>Allows only specified persons to have an ownership interest in an entity that prescribes, dispenses, or administers controlled substances. Requires the board, before October 1, 2013, to adopt rules to establish standards and protocols for the prescribing of controlled substances. Requires the state board of pharmacy and other boards that oversee controlled substance registrations to adopt necessary rules to complement rules adopted by the board concerning standards and protocols for the prescribing of controlled substances.</p>														

	<b>Date</b>	<b>Action</b>													
	02/25/2013	<b>S: Sponsor</b>	Added Steve Davisson												
	03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health												
	03/25/2013	<b>H: Committee Sched</b>	10:30 AM Room House Chamber Public Health												
SB 265	<p><i>Health care provider peer review committees.</i> (Pat Miller, Stoops, Frizzell)</p> <p>Amends the definition of "professional health care provider" for purposes of the law concerning privileged communications of peer review committees.</p> <table border="1"> <thead> <tr> <th><b>Date</b></th> <th><b>Action</b></th> <th></th> </tr> </thead> <tbody> <tr> <td>03/18/2013</td> <td><b>H: 2nd Reading</b></td> <td>Order Engrossed</td> </tr> <tr> <td>03/19/2013</td> <td><b>H: Ret 1st House</b></td> <td>No Amendments</td> </tr> <tr> <td>03/19/2013</td> <td><b>H: 3rd Reading</b></td> <td>Pass (95-0)</td> </tr> </tbody> </table>			<b>Date</b>	<b>Action</b>		03/18/2013	<b>H: 2nd Reading</b>	Order Engrossed	03/19/2013	<b>H: Ret 1st House</b>	No Amendments	03/19/2013	<b>H: 3rd Reading</b>	Pass (95-0)
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03/19/2013	<b>H: 3rd Reading</b>	Pass (95-0)													
SB 268	<p><i>Certified registered nurse anesthetists.</i> (Pat Miller, Frizzell)</p> <p>Allows a registered certified nurse anesthetist to administer anesthesia under the direction of and in the immediate presence of a podiatrist if specified conditions are met. (Current law allows a registered certified nurse anesthetist to administer anesthesia under the direction of and in the immediate presence of a physician.)</p> <table border="1"> <thead> <tr> <th><b>Date</b></th> <th><b>Action</b></th> <th></th> </tr> </thead> <tbody> <tr> <td>02/26/2013</td> <td><b>S: Referred</b></td> <td>Referred to the House</td> </tr> <tr> <td>02/26/2013</td> <td><b>S: Sponsor</b></td> <td>Added David Nason Frizzell</td> </tr> <tr> <td>03/04/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Public Health</td> </tr> </tbody> </table>			<b>Date</b>	<b>Action</b>		02/26/2013	<b>S: Referred</b>	Referred to the House	02/26/2013	<b>S: Sponsor</b>	Added David Nason Frizzell	03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health
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03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health													
SB 272	<p><i>Opioid treatment program and controlled substances.</i> (Pat Miller, Davisson)</p> <p>Requires the Indiana professional licensing agency to report to the health finance commission during the 2013 legislative interim concerning: (1) the expansion of the Indiana scheduled prescription electronic collection and tracking program (INSPECT) ; and (2) how to implement a program to require an opioid treatment program to transmit specified information concerning a patient to INSPECT before dispensing or administering a controlled substance to the patient. Requires the medical licensing board of Indiana to adopt rules establishing standards and protocols in the prescribing of controlled substances. Beginning January 1, 2015, requires dispensers to transmit certain prescription drug information to INSPECT. Requires, during the 2013 legislative interim, the division of mental health and addiction to provide the health finance commission with specified information concerning opioid treatment programs.</p> <table border="1"> <thead> <tr> <th><b>Date</b></th> <th><b>Action</b></th> <th></th> </tr> </thead> <tbody> <tr> <td>02/25/2013</td> <td><b>S: Sponsor</b></td> <td>Added Steve Davisson</td> </tr> <tr> <td>03/04/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Public Health</td> </tr> <tr> <td>03/25/2013</td> <td><b>H: Committee Sched</b></td> <td>10:30 AM Room House Chamber Public Health</td> </tr> </tbody> </table>			<b>Date</b>	<b>Action</b>		02/25/2013	<b>S: Sponsor</b>	Added Steve Davisson	03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health	03/25/2013	<b>H: Committee Sched</b>	10:30 AM Room House Chamber Public Health
<b>Date</b>	<b>Action</b>														
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03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health													
03/25/2013	<b>H: Committee Sched</b>	10:30 AM Room House Chamber Public Health													
SB 273	<p><i>Anesthesiologist assistant licensure.</i> (Pat Miller, Clere)</p>														

	<p>Requires anesthesiologist assistants to be licensed and to work under a supervising anesthesiologist. Establishes the anesthesiologist assistant committee to make recommendations to the medical licensing board concerning the licensure of anesthesiologist assistants. Establishes requirements of the protocol entered into between the supervising anesthesiologist and the anesthesiologist assistant. Makes it a Class D felony for a person who acts as an anesthesiologist assistant without the required license. Makes it a Class B misdemeanor for an individual who professes to be an anesthesiologist assistant or uses the title "anesthesiologist assistant" without being licensed.</p> <table border="1" data-bbox="280 470 889 642"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>02/26/2013</td> <td><b>S: Referred</b></td> <td>Referred to the House</td> </tr> <tr> <td>02/26/2013</td> <td><b>S: Sponsor</b></td> <td>Added Ed Clere</td> </tr> <tr> <td>03/04/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Public Health</td> </tr> </tbody> </table>	Date	Action		02/26/2013	<b>S: Referred</b>	Referred to the House	02/26/2013	<b>S: Sponsor</b>	Added Ed Clere	03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health
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02/26/2013	<b>S: Sponsor</b>	Added Ed Clere											
03/04/2013	<b>H: 1st Reading</b>	Assigned Public Health											
SB 362	<p><i>Battery by body waste.</i> (Crider, T. Brown)</p> <p>Makes it battery by body waste, a Class D felony, for a person to knowingly or intentionally: (1) in a rude, insolent, or angry manner place blood or another body fluid or waste on a health care professional identified as such and while engaged in the performance of official duties; or (2) coerce another person to place blood or another body fluid or waste on the health care professional. Enhances the penalties for committing the offense if the blood, bodily fluid, or waste is infected with hepatitis B or hepatitis C, HIV, or tuberculosis.</p> <table border="1" data-bbox="280 1010 1036 1178"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>02/11/2013</td> <td><b>S: Referred</b></td> <td>Referred to the House</td> </tr> <tr> <td>02/11/2013</td> <td><b>S: Sponsor</b></td> <td>Added Tim Brown</td> </tr> <tr> <td>02/26/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Courts and Criminal Code</td> </tr> </tbody> </table>	Date	Action		02/11/2013	<b>S: Referred</b>	Referred to the House	02/11/2013	<b>S: Sponsor</b>	Added Tim Brown	02/26/2013	<b>H: 1st Reading</b>	Assigned Courts and Criminal Code
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02/11/2013	<b>S: Sponsor</b>	Added Tim Brown											
02/26/2013	<b>H: 1st Reading</b>	Assigned Courts and Criminal Code											
SB 371	<p><i>Abortion inducing drugs.</i> (Holdman, Negele)</p> <p>Amends the definition of "abortion clinic" to include facilities that provide abortion inducing drugs. Specifies that only a physician may administer to a pregnant woman an abortion inducing drug. Sets forth the procedure an abortion clinic must follow before giving, selling, dispensing, administering, prescribing, or providing an abortion inducing drug to a pregnant woman. Requires certain physicians who learn of an adverse event following the use of an abortion inducing drug to report the adverse event to the medical licensing board. Specifies that the reports of adverse events related to abortion inducing drugs and maintained by the medical licensing board are public records. Makes a violation concerning distribution of an abortion inducing drug and failure to report an adverse event a Class A misdemeanor.</p> <table border="1" data-bbox="280 1646 889 1814"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>02/26/2013</td> <td><b>S: Referred</b></td> <td>Referred to the House</td> </tr> <tr> <td>02/26/2013</td> <td><b>S: Sponsor</b></td> <td>Added Sharon Negele</td> </tr> <tr> <td>03/04/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Public Policy</td> </tr> </tbody> </table>	Date	Action		02/26/2013	<b>S: Referred</b>	Referred to the House	02/26/2013	<b>S: Sponsor</b>	Added Sharon Negele	03/04/2013	<b>H: 1st Reading</b>	Assigned Public Policy
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02/26/2013	<b>S: Referred</b>	Referred to the House											
02/26/2013	<b>S: Sponsor</b>	Added Sharon Negele											
03/04/2013	<b>H: 1st Reading</b>	Assigned Public Policy											
SB 414	<p><i>Provisions related to high breast density.</i> (Pat Miller, Leising, Crouch)</p>												

Requires state employee health plans and certain policies of accident and sickness insurance and health maintenance organization contracts to provide coverage for certain services for women with high breast density. Requires the medical licensing board to adopt rules or protocol establishing an education program and standards for annual screening or diagnostic tests of women with high breast density. Requires certain notice to women with high breast density.

Date	Action	
03/20/2013	<b>H: Committee Sched</b>	10:30 AM Room 156-B Insurance
03/20/2013	<b>H: Committee Action</b>	Pass Amend(11-2) Insurance
03/21/2013	<b>H: Committee Report</b>	amend do pass, adopted

SB 417

*Health provider reporting of domestic violence.* (Waltz, McNamara)

Requires a health care provider to: (1) implement protocols and policies for the identification of domestic violence and to offer intervention and treatment services; and (2) report an incident of domestic violence to the local law enforcement agency. Specifies information to be included in the report. Provides civil and criminal immunity for a person who is required to report an incident of domestic violence.

Date	Action	
02/14/2013	<b>S: Referred</b>	Referred to the House
02/14/2013	<b>S: Sponsor</b>	Added Wendy McNamara
02/26/2013	<b>H: 1st Reading</b>	Assigned Public Health

SB 471

*Prescriptions for brand name drugs.* (Grooms, Davisson)

Permits a health care practitioner to use words of similar meaning instead of the statutory phrase "Brand Medically Necessary" when writing a prescription for a brand name drug when the practitioner does not want the pharmacist to substitute, under certain government programs, a generically equivalent drug product for the brand name drug.

Date	Action	
03/14/2013	<b>H: 2nd Reading</b>	Order Engrossed
03/19/2013	<b>H: Ret 1st House</b>	No Amendments
03/19/2013	<b>H: 3rd Reading</b>	Pass (97-0)

SB 520

*ERASER committee.* (Head, Mahan)

Creates the eliminate, reduce, and streamline employee regulation (ERASER) committee to study professional licensing in Indiana. Provides that the office of management and budget staffs the committee. Repeals the regulated occupations evaluation committee. Creates a five year cycle for sunseting certain professional licenses, registrations, and certifications.

Date	Action	
02/19/2013	<b>S: Referred</b>	Referred to the House

	<p>02/19/2013 <b>S: Sponsor</b> Added Kevin Mahan</p> <p>02/26/2013 <b>H: 1st Reading</b> Assigned Select Committee on Government Reduction</p>												
SB 551	<p><i>Federal health care reform.</i> (Pat Miller, Tallian, Clere)</p> <p>Defines populations that may be subject to Medicaid resource requirements. Eliminates certain Medicaid eligibility resource requirements. Specifies Medicaid recipients who are eligible to receive payments related to certain Medicare premium and cost sharing amounts. Provides for negotiations between the office of Medicaid policy and planning (office) and the United States Department of Health and Human Services (HHS) concerning a block grant system related to Medicaid. Requires the office to apply to HHS to amend the state Medicaid plan to require Medicaid recipient cost sharing. Provides for implementation of the federal Patient Protection and Affordable Care Act with respect to a health benefit exchange (exchange) in Indiana. Specifies requirements for health plans issued through an exchange, including application of Indiana insurance law. Requires certification of navigators and registration of application organizations related to an exchange. Provides for dissolution of the Indiana comprehensive health insurance association. Requires the office to present specified information to the health finance commission (commission) before August 1, 2013. Requires certain state agencies to report to the commission related to an exchange in Indiana.</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/04/2013</td> <td><b>H: Sponsor</b></td> <td>Added Ed Clere</td> </tr> <tr> <td>03/12/2013</td> <td><b>H: 1st Reading</b></td> <td>Assigned Public Health</td> </tr> <tr> <td>03/27/2013</td> <td><b>H: Committee Sched</b></td> <td>3:30 PM Room House Chamber Public Health</td> </tr> </tbody> </table>	Date	Action		03/04/2013	<b>H: Sponsor</b>	Added Ed Clere	03/12/2013	<b>H: 1st Reading</b>	Assigned Public Health	03/27/2013	<b>H: Committee Sched</b>	3:30 PM Room House Chamber Public Health
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03/12/2013	<b>H: 1st Reading</b>	Assigned Public Health											
03/27/2013	<b>H: Committee Sched</b>	3:30 PM Room House Chamber Public Health											
SB 554	<p><i>Telehealth and telemedicine services under Medicaid.</i> (Becker, Bacon)</p> <p>Requires the office of Medicaid policy and planning to reimburse: (1) a home health agency for telehealth services; and (2) a federally qualified health center, a rural health clinic, a community mental health center, and a critical access hospital for telemedicine services; under the Medicaid program. Requires the health finance commission to study issues concerning extending telehealth and telemedicine services under the Medicaid program.</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Action</th> <th></th> </tr> </thead> <tbody> <tr> <td>03/18/2013</td> <td><b>H: Committee Report</b></td> <td>amend do pass, adopted</td> </tr> <tr> <td>03/18/2013</td> <td><b>H: Committee Action</b></td> <td>Pass(12-0) Public Health</td> </tr> <tr> <td>03/21/2013</td> <td><b>H: 2nd Reading</b></td> <td>Amended Order Engrossed</td> </tr> </tbody> </table>	Date	Action		03/18/2013	<b>H: Committee Report</b>	amend do pass, adopted	03/18/2013	<b>H: Committee Action</b>	Pass(12-0) Public Health	03/21/2013	<b>H: 2nd Reading</b>	Amended Order Engrossed
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03/21/2013	<b>H: 2nd Reading</b>	Amended Order Engrossed											
SB 559	<p><i>Fraud.</i> (Hershman, Turner)</p> <p>Specifies that all state agencies shall cooperate with the department of state revenue (department) in tax administration by providing, at no charge to the department, relevant information that the department requests, including monthly reports identifying the use of a fraudulent identity. Requires the department of correction to annually provide to the department an electronic file listing the name and Social Security number of each individual under the jurisdiction of the department of correction. Requires the state department of health to annually provide to the department an electronic file listing the name of each individual for whom an Indiana death certificate was issued during the last year. Requires the state excise police to investigate allegations of electronic benefit</p>												

transfer (EBT) fraud. Requires the division of family resources to establish a process for certain recipients to follow in order to receive a replacement EBT card. Sets forth the Medicaid ineligibility time frame for a person who is convicted of forgery, fraud, legend drug deception, and other deceptions related to the application for or receipt of Medicaid assistance. Requires a transportation provider that applies to enroll in the Medicaid program to file with the office of Medicaid policy and planning a surety bond to be used for specified purposes. Provides certain exceptions. Requires the office of Medicaid policy and planning to visit certain Medicaid providers and provider applicants if certain conditions are met. Requires a national criminal history background check on certain Medicaid provider applicants at the cost of the applicant. Allows an audit and inspection of completed school lunch program applications to ensure that applicants meet the requirements to participate in the program.

Date	Action	
02/26/2013	<b>S: Sponsor</b>	Added P. Eric Turner
03/12/2013	<b>H: 1st Reading</b>	Assigned Ways and Means
03/19/2013	<b>H: Committee Sched</b>	9:30 AM Room 404 Ways and Means

SB 573

*Massage therapists.* (Landske, Randolph, Frizzell)

Provides that an individual must be licensed by the state board of massage therapy to engage in the practice of massage therapy. (Under current law, massage therapists are certified by the board but certification is not required for the practice of massage therapy.) Makes it a Class B misdemeanor to practice massage therapy without a license. Provides that the massage therapy licensing requirements do not apply to a health care provider who is acting within the scope of the health care provider's license, registration, or certificate. Provides that the massage therapist licensing law preempts local ordinances, resolutions, rules, and policies concerning massage therapists except for zoning requirements and occupational license fees. Makes conforming changes.

Date	Action	
02/19/2013	<b>S: Referred</b>	Referred to the House
02/19/2013	<b>S: Sponsor</b>	Added David Nason Frizzell
02/26/2013	<b>H: 1st Reading</b>	Assigned Employment, Labor and Pensions

SB 589

*Occupational licensing issues.* (Mishler, Frizzell)

Permits professional licensing boards to include consumer restitution orders in cease and desist orders issued against persons who commit unlicensed practice. Permits medical and professional licensing boards to include orders requiring repayment of certain costs relating to cease and desist proceedings. Includes within the cease and desist statute failure to obtain a certificate required for sellers of preneed funeral services and merchandise. Allows the state board of funeral and cemetery service to issue a cease and desist order against a person who solicits or sells preneed funeral services and merchandise if the person has not obtained a preneed certificate from the board, even if the person possesses an active funeral director license, funeral home license, embalmer license, or cemetery registration. Authorizes the division of consumer protection in the attorney general's office to obtain mental health records without a court order if access to or inspection of the records is necessary for the investigation of a consumer protection or licensing complaint. Amends the law governing the auctioneer consumer recovery fund, real estate recovery fund, and plumbing recovery fund to provide that petitions requesting payment from the funds are filed with the respective

	<p>licensing commission instead of with the court in which the underlying judgment against the licensee was entered. Prohibits a person from misrepresenting the effect a purchase of prepaid funeral services and merchandise may have on the purchaser's eligibility for Medicaid.</p> <table border="1" data-bbox="280 296 1360 470"> <thead> <tr> <th data-bbox="280 296 431 338">Date</th> <th data-bbox="431 296 696 338">Action</th> <th data-bbox="696 296 1360 338"></th> </tr> </thead> <tbody> <tr> <td data-bbox="280 338 431 380">03/05/2013</td> <td data-bbox="431 338 696 380"><b>H: Committee Sched</b></td> <td data-bbox="696 338 1360 380">8:30 AM Room 156-A Employment, Labor and Pensions</td> </tr> <tr> <td data-bbox="280 380 431 422">03/05/2013</td> <td data-bbox="431 380 696 422"><b>H: Committee Action</b></td> <td data-bbox="696 380 1360 422">Pass(11-1) Employment, Labor and Pensions</td> </tr> <tr> <td data-bbox="280 422 431 470">03/07/2013</td> <td data-bbox="431 422 696 470"><b>H: Committee Report</b></td> <td data-bbox="696 422 1360 470">do pass, adopted</td> </tr> </tbody> </table>	Date	Action		03/05/2013	<b>H: Committee Sched</b>	8:30 AM Room 156-A Employment, Labor and Pensions	03/05/2013	<b>H: Committee Action</b>	Pass(11-1) Employment, Labor and Pensions	03/07/2013	<b>H: Committee Report</b>	do pass, adopted
Date	Action												
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03/05/2013	<b>H: Committee Action</b>	Pass(11-1) Employment, Labor and Pensions											
03/07/2013	<b>H: Committee Report</b>	do pass, adopted											
SB 590	<p><i>Dental matters.</i> (Mishler, Bacon)</p> <p>Establishes a limited voluntary charitable permit for dental hygienists and dentists. Adds "R.D.H." to the titles to be used for a dental hygienist. Adds a \$20 compliance fee that a dental hygienist must pay at license renewal. Repeals provisions requiring that continuing education courses for dental hygienists and dentists be made available in all Indiana geographic regions. Sets forth requirements for dental applicants who have graduated from an unaccredited dental college located outside the United States. Sets forth requirements that a person who is not a licensed dentist must meet in order to own, operate, conduct, or maintain a dental office. Removes a requirement that dentures must include a patient's Social Security number.</p> <table border="1" data-bbox="280 905 889 1073"> <thead> <tr> <th data-bbox="280 905 431 947">Date</th> <th data-bbox="431 905 889 947">Action</th> </tr> </thead> <tbody> <tr> <td data-bbox="280 947 431 989">02/19/2013</td> <td data-bbox="431 947 889 989"><b>S: Referred</b> Referred to the House</td> </tr> <tr> <td data-bbox="280 989 431 1031">02/19/2013</td> <td data-bbox="431 989 889 1031"><b>S: Sponsor</b> Added Ron Bacon</td> </tr> <tr> <td data-bbox="280 1031 431 1073">03/12/2013</td> <td data-bbox="431 1031 889 1073"><b>H: 1st Reading</b> Assigned Public Health</td> </tr> </tbody> </table>	Date	Action	02/19/2013	<b>S: Referred</b> Referred to the House	02/19/2013	<b>S: Sponsor</b> Added Ron Bacon	03/12/2013	<b>H: 1st Reading</b> Assigned Public Health				
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02/19/2013	<b>S: Referred</b> Referred to the House												
02/19/2013	<b>S: Sponsor</b> Added Ron Bacon												
03/12/2013	<b>H: 1st Reading</b> Assigned Public Health												
SB 616	<p><i>Study of electronic medical records.</i> (Breau, Clere)</p> <p>Requires the health finance commission to study during the 2013 legislative interim the coordination and efficiency of the collection, maintenance, sharing, and use of electronic health data in Indiana.</p> <table border="1" data-bbox="280 1283 992 1461"> <thead> <tr> <th data-bbox="280 1283 431 1325">Date</th> <th data-bbox="431 1283 992 1325">Action</th> </tr> </thead> <tbody> <tr> <td data-bbox="280 1325 431 1367">03/18/2013</td> <td data-bbox="431 1325 992 1367"><b>H: Committee Report</b> do pass, adopted</td> </tr> <tr> <td data-bbox="280 1367 431 1409">03/18/2013</td> <td data-bbox="431 1367 992 1409"><b>H: Committee Action</b> Pass(12-0) Public Health</td> </tr> <tr> <td data-bbox="280 1409 431 1461">03/21/2013</td> <td data-bbox="431 1409 992 1461"><b>H: 2nd Reading</b> Order Engrossed</td> </tr> </tbody> </table>	Date	Action	03/18/2013	<b>H: Committee Report</b> do pass, adopted	03/18/2013	<b>H: Committee Action</b> Pass(12-0) Public Health	03/21/2013	<b>H: 2nd Reading</b> Order Engrossed				
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