

FAEGRE BAKER DANIELS

2016 Legislative Update #5

Indiana Society of Anesthesiologists



February 7, 2016

The 2016 General Assembly is now at the halfway point. When lawmakers return to the Statehouse on Monday, the House will begin hearings on bills passed by the Senate, and the Senate will start work on House bills.

Of the 841 bills and joint resolutions filed this year, a total of 572 died in the first chamber. Most of these proposals died because they failed to receive a hearing in their house of origin. A handful of bills were defeated, and a few others – including **Senate Bill 344**, the Senate Republicans' controversial LGBT civil rights bill -- were withdrawn from further consideration when it became apparent that they lacked sufficient support to pass.

The House and Senate now have four weeks to work on the 269 bills that survived the first half of session. By the time the final gavel falls on or before the March 14 deadline for adjournment, it's likely that at least 100 bills of these bills will also be dead. At the same time, however, some of the bills that were previously presumed dead may resurface as amendments to other bills.

In addition to the February 3 deadline for bills to pass their house of origin, last week legislators also faced a Friday deadline to file for re-election. Although the outcome of the November election is far from certain, the large number of retirements and primary challenges means that we can expect many new faces at the Statehouse next year.

On the Senate side, eight of the 24 members whose seats were up for re-election opted against seeking another term. Nine House members are also retiring. Another 20 lawmakers who filed for re-election are facing a challenge from a member of their own party in the May primary election.

Senate members who are not seeking reelection include: **Sen. Earline Rogers** (D-Gary), **Sen. Jim Arnold** (D-LaPorte), **Sen. John Broden** (D-South Bend), **Sen. Carlin Yoder** (R-Middlebury), **Sen. Scott Schneider** (R-Indianapolis), **Sen. Pat Miller** (R-Indianapolis), **Sen. Brent Waltz** (R-Indianapolis), and **Sen. Brent Steele** (R-Bedford).

House members who are not seeking reelection include: **Rep. Donna Harris** (D-East Chicago), **Rep. Gail Riecken** (D-Evansville), **Rep. Tim Harmon** (R-Bourbon), **Rep. Tom Dermody** (R-LaPorte), **Rep. Randy Truitt** (R-West Lafayette), **Rep. John Price** (R-Greenwood), and **Rep. Rhonda Rhoads** (R-Corydon). In addition, **Rep. David Niezgodski** (D-South Bend) and **Rep. Eric Koch** (R-Bedford) are seeking election to the Senate seats being vacated by Sen. John Broden and Sen. Brent Steele, respectively.

The following Democrat legislators are facing challenges in the May primary election: **Sen. Greg Taylor** (D-Indianapolis), **Sen. Mark Stoops** (D-Bloomington), and **Rep. Charlie Brown** (D-Gary).

The following Republican legislators have primary opposition: **Sen. David Long** (R-Fort Wayne), **Sen. Luke Kenley** (R-Noblesville), **Sen. Pete Miller** (R-Brownsburg), **Sen. Vaneta Becker** (R-Evansville), **Rep. Donna Schaibley** (R-Carmel), **Rep. Jeff Thompson** (R-Lizton), **Rep. Jerry Torr** (R-Carmel), **Rep. Dan Leonard** (R-Huntington), **Rep. Tom Saunders** (R-Lewisville), **Rep. Cindy Ziemke** (R-Batesville), **Rep. Milo Smith** (R-Columbus), **Rep. Jeff Ellington** (R-Bloomington), **Rep. Tom Washburne** (R-Inglefield), **Rep. Jim Lucas** (R-Seymour), **Rep. Steve Davisson** (R-Salem), **Rep. Casey Cox** (R-Fort Wayne) and **Rep. Bob Behning** (R-Indianapolis).

Following is a list of bills of potential interest to ISA that are still alive, along with brief summaries. In addition, up-to-date summaries may be found at any time during the legislative session by clicking on this [link](#).

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

HB 1156 DENTAL HYGIENISTS (FRIZZELL D) Increases from 45 days to 90 days the amount of time a written order for specific dental care is valid under prescriptive supervision. Increases from 14 hours to 19 hours the continuing education that a dental hygienist must receive during a license period. Urges the legislative council to assign the topic of loan forgiveness for dentists and dental hygienists who treat Medicaid patients to an interim committee.

Current Status: 2/2/2016 - Third reading passed; Roll Call 134: yeas 96, nays 0

State Bill Page: [HB 1156](#)

HB 1263 PRESCRIPTIONS AND TELEMEDICINE (KIRCHHOFER C) Sets forth requirements that must be met before a prescriber may prescribe medicine to a patient receiving telemedicine services.

Current Status: 2/3/2016 - Third reading passed; Roll Call 165: yeas 74, nays 24

State Bill Page: [HB 1263](#)

HB 1272 PROFESSIONAL LICENSING MATTERS (ZENT D)

- Requires a practitioner to provide the Indiana professional licensing agency (agency) and the practitioner's specific board with certain information concerning continuing education. (Current law requires a practitioner to provide the information to a specific board.)
- Allows an individual who holds a professional or occupational license and is called to active duty to fulfill all continuing education requirements through distance learning.
- Allows the practitioner's specific board to conduct random audits of license renewals of practitioners required to take continuing education courses.
- Provides that an employee of the agency must keep information concerning a complaint regarding a regulated occupation confidential unless disclosure is required under law, required for the advancement of an investigation, or made to a law enforcement agency that has jurisdiction or is reasonably believed to have jurisdiction over a person or matter involved in the complaint.

Current Status: 1/26/2016 - Senator Brown L added as sponsor

Recent Status: 1/26/2016 - Third reading passed; Roll Call 51: yeas 95, nays 0

HB 1278 INSPECT PROGRAM (DAVISSON S)

- Allows a dentist, physician, advanced practice nurse (excluding CRNAs), physician assistant, and podiatrist to include an INSPECT program report in a patient's file.
- Allows an individual who holds a temporary fellowship permit to access the INSPECT program. Allows a county coroner conducting a medical investigation of the cause of death to access the INSPECT program.
- Makes certain changes to the immunity granted to practitioners who use the INSPECT program. (Current law extends immunity to both practitioners who use and do not use the INSPECT program.)
- Allows a practitioner's agent to check INSPECT program reports on behalf of the practitioner.
- Allows a patient to access an INSPECT program report that is in the patient's medical file.
- Requires the boards that regulate health care providers that prescribe or dispense prescription drugs to establish prescribing norms and dispensing guidelines that, if exceeded, justify the unsolicited dissemination of exception reports.
- Specifies the exception reports that a board's designee may forward to a law enforcement agency or the attorney general for purposes of an investigation.

Current Status: 1/26/2016 - Senator Miller, Pat added as sponsor

Recent Status: 1/26/2016 - Senator Grooms added as second sponsor
1/26/2016 - Third reading passed; Roll Call 50: yeas 95, nays 0

State Bill Page: [HB 1278](#)

SB 30 ACCIDENT AND SICKNESS INSURANCE CLAIM DENIALS (MILLER P) Requires the department of insurance to develop, post, and maintain on the department's Internet web site information concerning internal and external grievances for accident and sickness insurance policies and health maintenance organization contracts. Provides for certain grievance related notice to be provided upon request. Requires the commissioner of insurance to analyze certain complaints received by the department and report a pattern of complaints to the legislative council. (The introduced version of this bill was prepared by the interim study committee on public health, behavioral health, and human services).

Current Status: 2/2/2016 - Third reading passed; Roll Call 124: yeas 50, nays 0

State Bill Page: [SB 30](#)

SB 41 PHARMACY BENEFITS (LONG D) Specifies requirements for the establishment and use of a prescription drug step therapy protocol by a state employee health plan, an accident and sickness insurer, or a health maintenance organization.

Current Status: 2/1/2016 - Third reading passed; Roll Call 76: yeas 50, nays 0

State Bill Page: [SB 41](#)

SB 80 PHARMACISTS AND EPHEDRINE (HEAD R) Defines "drug related felony" and provides that the offense of possession of a precursor by a methamphetamine offender (which prohibits the possession of pseudoephedrine or ephedrine without a prescription by persons convicted of certain offenses) applies to a person who has been convicted of a drug related felony. Allows a pharmacist to deny the sale of ephedrine or pseudoephedrine on the basis of the pharmacist's professional judgment, and provides the pharmacist with civil immunity for the exercise of the pharmacist's professional judgment. Allows the Indiana board of pharmacy to: (1) adopt rules regarding professional determinations made; (2) review professional determinations made; and (3) discipline a pharmacist for a professional determination made; concerning refusal to sell ephedrine or pseudoephedrine.

Current Status: 2/3/2016 - Third reading passed; Roll Call 154: yeas 41, nays 8

State Bill Page: [SB 80](#)

- SB 162 HOSPITAL EMPLOYEE IMMUNIZATIONS (MILLER P)** Requires a hospital, beginning January 1, 2017, to administer or make available to be administered certain immunizations to hospital employees or contractors who routinely have direct contact with a patient of the hospital. Allows a hospital to elect to annually administer or make available certain immunizations to other employees and contractors. Provides for exceptions. Allows a hospital to establish a process for determining whether the tenets of the religion relied upon for an exemption prohibit the individual from receiving the immunization. Authorizes a hospital, if the hospital has a written policy in place before the individual's failure to receive the immunization, to: (1) make as a condition of employment or a contract an individual having an immunization; and (2) terminate an employee or contractor for not obtaining the immunization if the employee or contractor does not qualify for an exemption. Provides for immunity for the hospital.
Current Status: 2/2/2016 - Third reading passed; Roll Call 129: yeas 50, nays 0
State Bill Page: [SB 162](#)
- SB 165 HEALTHY INDIANA PLAN (MILLER P)** Repeals the prior healthy Indiana plan statutes and makes revisions to the currently operating healthy Indiana plan. Repeals statutes governing the high risk Indiana check-up plan.
Current Status: 1/25/2016 - Representative Brown, C. added as cosponsor
Recent Status: 1/25/2016 - Representative Brown, T. added as sponsor
1/25/2016 - Third reading passed; Roll Call 45: yeas 36, nays 14
State Bill Page: [SB 165](#)
- SB 171 STUDY OF ELECTRONIC HEALTH CARE CLAIM PAYMENTS (BECKER V)** Urges the legislative council to assign to a 2016 interim study committee the issue of use of electronic methods of health care claim payment.
Current Status: 2/1/2016 - Third reading passed; Roll Call 84: yeas 50, nays 0
State Bill Page: [SB 171](#)
- SB 174 CRIMINAL LAW MATTERS (YOUNG R)** Creates the offense of dealing in a controlled substance by a practitioner, and enhances the offense if the offenses causes the death of another person.
Current Status: 1/21/2016 - Representative Frizzell added as sponsor
Recent Status: 1/21/2016 - Third reading passed; Roll Call 39: yeas 48, nays 0
1/21/2016 - Senate Bills on Third Reading
State Bill Page: [SB 174](#)
- SB 214 CONTROLLED SUBSTANCES (HERSHMAN B)** Prohibits Medicaid reimbursement for Subutex, Suboxone, or a similar trade name or generic of the drug if the drug was prescribed for the treatment of pain or pain management and the drug is only indicated for addiction treatment. Requires the division of mental health and addiction to adopt rules concerning: (1) opioid treatment by an opioid treatment provider; (2) take home opioid treatment medications; (3) clinical standards for: (A) tapering of a patient on and off an opioid treatment medication; (B) relapse; and (C) overdose prevention; and (4) specified standards and protocols for an opioid treatment provider. Requires an opioid treatment provider to periodically and randomly test a patient for specified drugs during treatment.
Current Status: 2/1/2016 - Third reading passed; Roll Call 88: yeas 50, nays 0
State Bill Page: [SB 214](#)
- SB 297 OPIOID DEPENDENCE TREATMENT (MILLER P)** Requires Medicaid coverage for inpatient detoxification for the treatment of opioid or alcohol dependence. Specifies that the healthy Indiana plan includes coverage of counseling services for substance abuse treatment. Adds requirements for an opioid treatment program to meet in order to operate in Indiana. Requires the division of mental health and addiction (division) to adopt specified administrative rules concerning opioid treatment by an opioid treatment provider. Requires the office of the secretary and the division to develop treatment protocol containing best practice guidelines for the treatment of opiate dependent patients. Requires an opioid treatment program to provide specified information upon request by the division.
Current Status: 1/26/2016 - Senator Randolph added as coauthor

Recent Status: 1/26/2016 - Senator Charbonneau added as coauthor

1/26/2016 - Representatives Davisson, Brown, T., Ziemke added as cosponsors

State Bill Page: [SB 297](#)

SB 364 MEDICAID PROVIDER AUDIT WORK GROUP (BASSLER E) Requires the office of Medicaid policy and planning (office) to establish a work group to discuss the policies and procedures used in Medicaid provider audits. Requires the office to submit the work group's findings and any statutory recommendations to legislative council before December 1, 2016.

Current Status: 2/3/2016 - Third reading passed; Roll Call 171: yeas 49, nays 0

State Bill Page: [SB 364](#)