FAEGRE BAKER DANIELS

2017 Legislative Update #2 Indiana Society of Anesthesiologists



January 15, 2017

The pace of the 2017 legislative session picked up last week as committee meetings began in earnest and long lists of newly filed bills were released on a daily basis.

To date, 788 bills have been filed and released to the public. Based on the total number of bills filed during the 2013 and 2015 long sessions, we expect that as many as 400 additional bills will be released over the next 10 days.

The upcoming week will be shorter than usual. State offices are closed on Monday for the Martin Luther King holiday. Committees will meet on Wednesday as usual, but the week will wrap up by Thursday morning to accommodate the travel schedules of lawmakers who are headed to DC for the inauguration.

The following bills on ISA's tracking list are scheduled for hearing next week:

HB 1271 REPEAL OF INSPECT OVERSIGHT COMMITTEE (GUTWEIN D) Repeals the INSPECT

oversight committee.

Current Status: 1/24/2017 - House Select Committee on Government Reduction,

Time & Location: 8:30 AM, Rm. 156-D

State Bill Page: HB1271

HB 1307 PREEMPTION OF CERTAIN LOCAL ORDINANCES (GUTWEIN D) Preempts the ability

of a unit to license, register, or certify a person generally to practice the person's profession or occupation within the unit, whether or not the person's profession or occupation is licensed, registered, or certified under the Indiana Code. Provides that the preemption does not apply to an ordinance or regulation that requires a person to obtain permits or other approvals to undertake particular instances of the practice of the person's profession or occupation.

Current Status: 1/24/2017 - House Select Committee on Government Reduction,

Time & Location: 8:30 AM, Rm. 156-D

State Bill Page: HB1307

SB 15 HEMP OIL REGISTRY FOR THE TREATMENT OF EPILEPSY (TOMES J) Establishes a

hemp oil registry for board certified neurologists affiliated with a state educational institution, individuals, and caregivers for the use of hemp oil in the treatment of a child with intractable epilepsy. Establishes a pilot study registry for physicians who want to study the use of hemp oil in the treatment of intractable epilepsy. Requires the state department of health (state department) to develop and maintain both registries. Provides civil, criminal, and administrative immunity for physicians in the use of hemp oil in the treatment

of intractable epilepsy if certain requirements are met. Exempts caregivers and individuals from criminal penalties for possession or use of hemp oil if the caregivers and individuals are registered with the state department and are using the hemp oil for the individual and in the manner approved for registration. Encourages state educational institutions to research the use of hemp oil in the treatment of intractable epilepsy.

Current Status: 1/17/2017 - Senate Corrections and Criminal Law, Time &

Location: 9:00 AM, Senate Chamber

State Bill Page: SB15

SB 51 IMMUNIZATIONS PROVIDED BY PHARMACISTS (GROOMS R) Adds the following immunizations to the list of immunizations that pharmacists may administer if certain conditions are met: (1) Measles, mumps, and rubella. (2) Varicella. (3) Hepatitis A. (4) Hepatitis B. (5) Haemophilus influenzae type b (Hib).

Current Status: 1/18/2017 - Senate Health and Provider Services, Time &

Location: 10:00 AM, Rm. 431

State Bill Page: SB51

SB 73 ELECTRONIC AUTHORIZATION FOR PRESCRIPTION DRUGS (GROOMS R) Requires certain health plans to accept and respond to electronic prior authorization requests according to a particular electronic transaction standard.

Current Status: 1/18/2017 - Senate Health and Provider Services, Time &

Location: 10:00 AM, Rm. 431

State Bill Page: SB73

Following are summaries of bills of potential interest to ISA that were filed and released to the public as of 5 p.m. Friday, January 13. You can read both the bill and its fiscal note by clicking on the link in the bill number.

Additional bills are expected to be released throughout the upcoming week and will be included in next week's legislative update. In the meantime, up-to-date summaries and real-time information about every bill on the tracking list may be found by clicking on this link.

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

SCOPE OF PRACTICE & LICENSURE

HB 1221 OCCUPATIONAL LICENSING AND CRIMINAL CONDUCT (WASHB URNE T) Provides, subject to certain statutes, that a license that an individual is required by law to hold to engage in a business, profession, or occupation may not be denied, revoked, or suspended solely because the applicant has been convicted of an offense. Provides that a license applicant's or holder's conviction may be considered to determine if the applicant or holder should currently be entrusted to serve the public in a specific capacity. Allows a board, commission, or committee to suspend, deny, or revoke a license issued under the professional licensing laws solely based on the conviction of a felony that has a direct bearing on the practitioner's ability to continue to practice competently or that

Current Status: 1/10/2017 - Referred to House Employment, Labor and Pensions

State Bill Page: HB 1221

HB 1224 RIGHT TO JURY TRIAL IN CERTAIN ADMINISTRATIVE PROCEEDINGS (BORDERS

demonstrates that the practitioner is a threat or may cause harm to the public.

B) Provides that a person seeking judicial review of the final revocation of a professional license has the right to a jury trial.

Current Status: 1/10/2017 - Referred to House Judiciary

State Bill Page: HB 1224

HB 1308 VARIOUS PROFESSIONAL LICENSING MATTERS (ZENT D) Among other things:

- Eliminates the certificate of registration for professional corporations requirement.
- Allows all boards under the authority of the professional licensing agency (agency) to impose sanctions on a licensee as a result of an administrative complaint filed by the attorney general after renewal of a license.
- Removes from the boards under the authority of the agency the requirements to establish prescribing norms and dispensing guidelines.

Current Status: 1/10/2017 - Referred to House Employment, Labor and Pensions

State Bill Page: HB 1308

SB 51 IMMUNIZATIONS PROVIDED BY PHARMACISTS (GROOMS R) Adds the following immunizations to the list of immunizations that pharmacists may administer if certain conditions are met: (1) Measles, mumps, and rubella. (2) Varicella. (3) Hepatitis A. (4) Hepatitis B. (5) Haemophilus influenzae type b (Hib).

Current Status: 1/18/2017 - Senate Health and Provider Services, (Bill Scheduled for

Hearing); Time & Location: 10:00 AM, Rm. 431

State Bill Page: SB 51

SB 63 COMMUNITY MENTAL HEALTH CENTER TELEMEDICINE PILOT (HEAD R) Establishes a two year community mental health center telemedicine pilot program (program) to be administered by the division of mental health and addiction (division). Provides that the purpose of the program is to provide mental health counseling and services to children through the use of telemedicine. Sets forth requirements for the program and for participation in the program. Requires the reporting of certain information. Allows a physician providing telemedicine services in the program to prescribe any prescription drug for a patient that is within the physician's scope of practice for the treatment of the patient's mental health. Specifies that the physician may not prescribe an abortion inducing drug. Requires the division to submit a report to the general assembly concerning the effectiveness of the program. Specifies that a physician is not required to have a prior established physician-patient relationship in order to provide telemedicine services in Indiana.

Current Status: 1/12/2017 - Senator Charbonneau added as second author

State Bill Page: SB 63

SB 114 PROFESSIONAL LICENSING (KRUSE D) Eliminates the jobs creation committee (committee).

Transfers duties of the committee to the Indiana professional licensing agency.

Current Status: 1/4/2017 - Referred to Senate Commerce and Technology

State Bill Page: SB 114

SB 437 CHIROPRACTORS (ALTING R) Among other things:

• Removes a prohibition on chiropractors taking x-rays of any organ other than the vertebral column and extremities.

 Allows a chiropractor to perform certain acts and functions to the extent the chiropractor was taught in a chiropractic college or as approved in rules of the board.

Current Status: 1/12/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 437

TELEMEDICINE (MERRITT J) Requires the office of Medicaid policy and planning (office) to reimburse any Medicaid provider (not just specified providers) for Medicaid covered services provided through the use of telemedicine services if certain requirements are met. Prohibits the office from setting any distance restrictions under Medicaid on telehealth services and telemedicine services. Requires reimbursement for telemedicine services under the healthy Indiana plan. Gives a telemedicine services provider the discretion in contacting the patient's primary care provider if the telemedicine services provider has provided care to the patient at least two consecutive times through the use of telemedicine services. Allows a provider to issue a controlled substance prescription to a patient if the provider has previously examined the patient in person.

Current Status: 1/12/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 444

INSURANCE & HEALTH CARE COSTS

HB 1011 HEALTH CARE CHARGES (CULVER W) Beginning in 2018, requires health care providers to publish and provide to patients the charges for procedures rendered by the health care provider. Beginning in 2020, requires health care providers to publish and provide to patients the charges for each product or service rendered by the health care provider.

Current Status: 1/4/2017 - Referred to House Public Health

State Bill Page: HB 1011

MEDICAL PAYMENT COVERAGE (FRYE R) Specifies that medical payment coverage is supplemental to coverage under a health plan or public health coverage program. Specifies that: (1) the amount paid under medical payment coverage must not exceed the amount to which the health care provider agreed as payment in full for a health care service under the covered individual's health plan or public health coverage program; and (2) the covered individual is not liable for any amount that exceeds the amount to which the health care provider agreed as described in (1).

Current Status: 1/5/2017 - Referred to House Insurance

State Bill Page: HB 1086

PUBLICATION OF MEDICARE INFORMATION (BRAUN M) Requires a hospital to publish Medicare reimbursement amounts for health care services provided by the hospital and Medicare quality rating information concerning the hospital.

Current Status: 1/10/2017 - Representatives Lehman and Austin added as coauthors

State Bill Page: HB 1138

HB 1140 HOSPITAL PUBLICATION OF CONTRACTS (BRAUN M) Requires a hospital or a physician practice that is owned by the hospital to make public contracts related to terms and conditions of third party payment for health care services.

Current Status: 1/10/2017 - Representative Lehman added as coauthor

State Bill Page: HB 1140

HEALTH PROVIDER NOTICE TO COVERED INDIVIDUALS (BAIRD J) Requires a health provider that has not entered into a payment agreement with a health carrier and provides health care services to a covered individual in a facility that has entered into a payment agreement with the health carrier to inform the covered individual that payment made to the health provider by the health carrier may not be payment in full. Makes conforming amendments.

Current Status: 1/12/2017 - Representative Heaton added as coauthor

State BIII Page: HB 1273

SB 69 STUDY OF DRUG PRICING AND ACCESS (BREAUX J) Urges the legislative council to assign to an interim study committee a study of prescription drug pricing and access to specialty prescription drugs. Requires submission of a report and recommendations to the legislative council.

Current Status: 1/3/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 69

SB 73 ELECTRONIC AUTHORIZATION FOR PRESCRIPTION DRUGS (GROOMS R) Requires certain health plans to accept and respond to electronic prior authorization requests according to a particular electronic transaction standard.

Current Status: 1/18/2017 - Senate Health and Provider Services, (Bill Scheduled for

Hearing); Time & Location: 10:00 AM, Rm. 431

State Bill Page: SB 73

SB 303 DIRECT PRIMARY CARE AGREEMENTS (KOCH E) Specifies that a direct primary care agreement is not insurance and a primary care provider that enters into a direct primary care agreement is not required to obtain an insurance certificate of authority. Sets forth requirements of a direct primary care agreement. Specifies justifiable reasons for a primary care provider to discontinue a direct primary care agreement and specifies conditions to be met in order to do so.

Current Status: 1/9/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 303

OPIOIDS

SB 11 COVERAGE FOR ABUSE DETERRENT OPIOIDS (MERRITT J) Requires that, if an abuse deterrent opioid analgesic is available with a certain active ingredient, state employee health plans, policies of accident and sickness insurance, and health maintenance organization contracts must provide coverage for at least one abuse deterrent opioid analgesic that provides that active ingredient.

Current Status: 1/3/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 11

MEDICAL RESEARCH CONTROLLED SUBSTANCES (LEISING J) Provides that a physician who has obtained approval from certain entities to obtain, administer, and dispense or prescribe a controlled substance is immune from criminal liability for the possession or distribution of the controlled substance. Provides that an ultimate user who possesses or uses a controlled substance from that prescribing or dispensing physician is immune from criminal liability for the possession or use of the controlled substance. Provides certain exceptions.

Current Status: 1/4/2017 - Referred to Senate Corrections and Criminal Law

State Bill Page: SB 132

SB 151 INFORMATION IN INSPECT PRESCRIPTION DRUG DATA BASE (MERRITT J) Requires the ephedrine, pseudoephedrine, and controlled substance prescription monitoring program to include an entry for a dispenser to indicate, when applicable, if a patient has entered into a pain management contract with a designated practitioner.

Current Status: 1/4/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 151

SB 157 CONTROLLED SUBSTANCES AND REPORTING (MERRITT J) Requires the professional licensing agency (agency) to establish a workgroup consisting of emergency medical technicians, registered nurses, paramedics, pharmacists, physicians, and law enforcement officers for the purpose of evaluating the cost and feasability of cataloging: (1) each administration of an overdose intervention drug by an emergency medical services provider; and (2) data related to certain controlled substance investigations by law enforcement; in the INSPECT data base. Requires the agency to provide: (1) statutory recommendations; and (2) a written report; to the legislative council not later than December 1, 2017.

Current Status: 1/4/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 157

PRESCRIBING AND DISPENSING OF OPIOIDS (MERRITT J) Limits the amount of an opioid prescription a prescriber may issue for: (1) an adult who is being prescribed an opioid for the first time; and (2) a child; unless the prescription is for the treatment of specified conditions or circumstances. Requires a prescriber to issue a prescription for an opioid in a lesser amount if requested by specified individuals and to document the request. Requires a pharmacist, upon the request of a specified individual, to partially fill the opioid prescription and void the remainder of the unfilled opioid prescription. Requires the pharmacist to document that the opioid prescription was partially filled and that the remainder of the unfilled prescription is void.

Current Status: 1/12/2017 - Senator Ruckelshaus J added as second author

State Bill Page: SB 226

SB 243 PHYSICIAN WAIVER TRAINING REIMBURSEMENT PILOT PROGRAM (MERRITT

J) Establishes the physician waiver training reimbursement pilot program to reimburse qualified physicians who undergo certain training, for the purpose of increasing the number of physicians in Indiana allowed under the federal Drug Addiction Treatment Act of 2000 to prescribe certain controlled substances to treat opioid dependency in settings other than an opioid treatment program. Establishes requirements for participation in the pilot program.

Current Status: 1/9/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 243

SB 247 INSPECT PROGRAM CERTIFICATION (HEAD R) Requires that a practitioner who issues a prescription for a controlled substance must be certified to receive information from the INSPECT program.

Current Status: 1/9/2017 - Referred to Senate Corrections and Criminal Law

State Bill Page: SB 247

SB 408

INSPECT PROGRAM (HOUCHIN E) Requires a dispenser of ephedrine, pseudoephedrine, or a controlled substance to transmit certain information to the INSPECT program on a real time basis beginning January 1, 2018. Provides that, to the extent considered appropriate by the state board of pharmacy (board), the INSPECT data base must be interoperable with other similar registries operated by federal and state governments. Adds an investigator for the state Medicaid fraud control unit to the list of persons who can receive certain confidential INSPECT program information. Requires a practitioner to obtain information about a patient from the INSPECT data base before prescribing ephedrine, pseudoephedrine, or a controlled substance to the patient. Requires the

board to establish procedures for a patient or a patient's authorized representative to access the patient's report from the INSPECT program. (Current law allows a patient to access a report that has been included in the patient's medical file by a practitioner.) Provides that if a patient or patient's authorized representative disputes information in the patient's INSPECT report, the board shall investigate the claim and promptly revise any inaccurate information. Requires the board to seek and apply for grants and other money from federal agencies and other entities for the controlled substances data fund.

Current Status: 1/10/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 408

MISCELLANEOUS

HB 1001 BIENNIAL BUDGET (BROWN T) Appropriates money for capital expenditures, the operation of the state, the delivery of Medicaid and other services, and various other distributions and purposes.

Current Status: 1/10/2017 - Referred to House Ways and Means

State Bill Page: HB 1001

LYME DISEASE INFORMATION (SHACKLEFORD R) Requires a health care provider or health care provider's designee who orders a laboratory test for the presence of Lyme disease to provide the patient or the patient's legal representative with certain written information concerning Lyme disease.

Current Status: 1/9/2017 - Representative Nisly added as coauthor

State Bill Page: HB 1061

CANNABIS OIL FOR MEDICAL TREATMENT (GOODIN T) Exempts an individual and a physician from criminal penalties for possession or use of cannabis oil if: (1) the individual is the patient of the physician and has cannabis oil transferred, dispensed, or administered to the individual as part of the individual's treatment by the physician; and (2) the physician who is treating the individual transfers, dispenses, or administers cannabis oil as part of the individual's treatment.

Current Status: 1/10/2017 - Referred to House Courts and Criminal Code

State Bill Page: HB 1252

HB 1271 REPEAL OF INSPECT OVERSIGHT COMMITTEE (GUTWEIN D) Repeals the INSPECT oversight committee. Removes expired language.

Current Status: 1/24/2017 - House Select Committee on Government Reduction, (Bill

Scheduled for Hearing); **Time & Location:** 8:30 AM, Rm. 156-D

State Bill Page: HB 1271

MEDICAL MARIJUANA (CANDELARIA REARDON M) Establishes the medicinal marijuana excise tax, and requires a medicinal marijuana dispensary to transfer the tax to the department of state revenue for deposit in the system for teacher and student advancement grant fund and the local infrastructure revolving fund. Requires the executive board of the state department of health to adopt rules to regulate registered medicinal marijuana cardholders, medicinal marijuana dispensaries, and registered medicinal marijuana dispensary employees. Requires that medicinal marijuana sold in a medicinal marijuana dispensary must be harvested and processed in Indiana. Provides that certain crimes involving marijuana, hash oil, hashish, and paraphernalia do not apply in certain circumstances to medicinal marijuana cardholders, medicinal marijuana dispensaries, and registered medicinal marijuana dispensary employees.

Current Status: 1/10/2017 - Referred to House Public Policy

State Bill Page: HB 1303

HB 1307 PREEMPTION OF CERTAIN LOCAL ORDINANCES (GUTWEIN D) Preempts the ability of a unit

to license, register, or certify a person generally to practice the person's profession or occupation within the unit, whether or not the person's profession or occupation is licensed, registered, or certified under the Indiana Code. Provides that the preemption does not apply to an ordinance or regulation that requires a person to obtain permits or other approvals to undertake particular instances of the practice of the person's profession or occupation.

Current Status: 1/24/2017 - House Select Committee on Government Reduction, (Bill

Scheduled for Hearing); **Time & Location:** 8:30 AM, Rm. 156-D

State Bill Page: HB 1307

HB 1316 MEDICAL MARIJUANA (BROWN C) Establishes a medical marijuana program (program), and permits caregivers and patients who have received a physician recommendation to possess a certain quantity of marijuana for treatment of certain medical conditions. Establishes the department of marijuana enforcement (DOME) as a state agency to oversee the program, and creates the DOME advisory committee to review the effectiveness of the program and to consider recommendations from DOME. Authorizes DOME to grant research licenses to research facilities with a physical presence in Indiana. Repeals the controlled substance excise tax and the marijuana eradication program. Makes conforming amendments.

Current Status: 1/10/2017 - Referred to House Public Policy

State Bill Page: HB 1316

HEMP OIL REGISTRY FOR THE TREATMENT OF EPILEPSY (TOMES J) Establishes a hemp oil registry for certain physicians, individuals, and caregivers for the use of hemp oil in the treatment of a child with intractable epilepsy. Establishes a pilot study registry for physicians who want to study the use of hemp oil in the treatment of intractable epilepsy. Requires the state department of health (state department) to develop and maintain both registries. Provides civil, criminal, and administrative immunity for physicians in the use of hemp oil in the treatment of intractable epilepsy if certain requirements are met. Exempts caregivers and individuals from criminal penalties for possession or use of hemp oil if the caregivers and individuals are registered with the state department and are using the hemp oil for the individual and in the manner approved for registration. Encourages state educational institutions to research the use of hemp oil in the treatment of intractable epilepsy.

Current Status: 1/17/2017 - Senate Corrections and Criminal Law, (Bill Scheduled for

Hearing); **Time & Location:** 9:00 AM, Senate Chamber

State Bill Page: SB 15

MANDATORY ULTRASOUND BEFORE ABORTIONS (KRUSE D) Provides that an abortion provider must do the following at least 48 hours before an abortion is performed: (1) Inform the pregnant woman of the availability of fetal ultrasound imaging and auscultation of fetal heart tone services to enable the pregnant woman to view the image and hear the heartbeat of the fetus. (2) Immediately perform the fetal ultrasound imaging and allow the pregnant woman to hear the auscultation of the fetal heart tone if the fetal heart tone is audible. Requires the pregnant woman to view the fetal ultrasound imaging and listen to the auscultation of the fetal heart tone if the fetal heart tone is audible. Removes provisions allowing a pregnant woman to decline to view the fetal ultrasound imaging and hear the fetal heart tone.

Current Status: 1/4/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 118

HOSPITAL EMPLOYEE IMMUNIZATIONS (MRVAN F) Requires a hospital, beginning January 1, 2018, to administer or make available to be administered certain immunizations to hospital employees or contractors who routinely have direct contact with any patient of the hospital. Allows a hospital to elect to annually administer or make available certain immunizations to health care professionals, other employees, and contractors. Provides for exceptions. Requires a hospital to administer or make influenza immunizations available at certain times during the year. Allows a hospital to establish a process for determining whether the tenets of the religion relied upon for an exemption prohibit an individual from receiving an immunization. Authorizes a hospital, if the

hospital has a written policy in place before an individual's failure to receive an immunization, to: (1) impose, as a condition of employment or a contract, a requirement that an individual have 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: 1/4/2017 - Referred to Senate Health and Provider Services

State Bill Page: SB 133

SB 255 MEDICAL MARIJUANA (TALLIAN K) Establishes a medical marijuana program (program), and permits caregivers and patients who have received a physician recommendation to possess a certain quantity of marijuana for treatment of certain medical conditions. Establishes the department of marijuana enforcement (DOME) as a state agency to oversee the program, and creates the DOME advisory committee to review the effectiveness of the program and to consider recommendations from DOME. Authorizes DOME to grant research licenses to research facilities with a physical presence in Indiana. Repeals the controlled substance excise tax and the marijuana eradication program. Makes conforming amendments.

Current Status: 1/9/2017 - Referred to Senate Tax and Fiscal Policy

State Bill Page: SB 255

SB 273 END OF LIFE OPTIONS (RANDOLPH L) Allows an individual with a terminal illness who meets certain requirements to make a written request to an attending physician for medication that the individual may self administer to end the individual's life. Specifies requirements a physician must meet in order to prescribe the medication to a patient.

Current Status: 1/9/2017 - Referred to Senate Judiciary

State Bill Page: SB 273

SB 327 MEDICINAL USE OF CANNABIDIOL (HERSHMAN B) Defines "cannabidiol", and provides an affirmative defense to possession of cannabidiol if the person or the person's child has been diagnosed with certain medical conditions, the cannabidiol contains no THC, and other specified conditions are met.

Current Status: 1/9/2017 - Referred to Senate Corrections and Criminal Law

State Bill Page: SB 327