



# SENATE MOTION

**MADAM PRESIDENT:**

**I move** that Engrossed House Bill 1169 be amended to read as follows:

- 1           Page 1, between the enacting clause and line 1, begin a new  
2 paragraph and insert:  
3           "SECTION 1. IC 5-10-8-7.3, AS AMENDED BY P.L.133-2020,  
4 SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
5 JULY 1, 2022]: Sec. 7.3. (a) As used in this section, "covered  
6 individual" means an individual who is:  
7           (1) covered under a self-insurance program established under  
8 section 7(b) of this chapter to provide group health coverage; or  
9           (2) entitled to services under a contract with a prepaid health care  
10 delivery plan that is entered into or renewed under section 7(c) of  
11 this chapter.  
12           (b) As used in this section, "early intervention services" means  
13 services provided to a first steps child under IC 12-12.7-2 and 20  
14 U.S.C. 1432(4).  
15           (c) As used in this section, "first steps child" means an infant or  
16 toddler from birth through two (2) years of age who is enrolled in the  
17 Indiana first steps program and is a covered individual.  
18           (d) As used in this section, "first steps program" refers to the  
19 program established under IC 12-12.7-2 and 20 U.S.C. 1431 et seq. to  
20 meet the needs of:  
21           (1) children who are eligible for early intervention services; and  
22           (2) their families.  
23           The term includes the coordination of all available federal, state, local,  
24 and private resources available to provide early intervention services  
25 within Indiana.  
26           (e) As used in this section, "health benefits plan" means a:  
27           (1) self-insurance program established under section 7(b) of this

- 1 chapter to provide group health coverage; or  
 2 (2) contract with a prepaid health care delivery plan that is  
 3 entered into or renewed under section 7(c) of this chapter.
- 4 (f) A health benefits plan that provides coverage for early  
 5 intervention services shall reimburse the first steps program a monthly  
 6 fee established by the division of disability and rehabilitative services  
 7 established by IC 12-9-1-1. Except when the monthly fee is less than  
 8 the product determined under IC 12-12.7-2-23(b), the monthly fee shall  
 9 be provided instead of claims processing of individual claims.
- 10 (g) The reimbursement required under subsection (f) may not be  
 11 applied to any annual or aggregate lifetime limit on the first steps  
 12 child's coverage under the health benefits plan.
- 13 (h) The first steps program may pay required deductibles,  
 14 copayments, or other out-of-pocket expenses for a first steps child  
 15 directly to a provider. A health benefits plan shall apply any payments  
 16 made by the first steps program to the health benefits plan's  
 17 deductibles, copayments, or other out-of-pocket expenses according to  
 18 the terms and conditions of the health benefits plan.
- 19 (i) A health benefits plan may not require authorization for services  
 20 specified in the covered individual's individualized family service plan,  
 21 if those services are a covered benefit under the plan, once the  
 22 individualized family service plan is signed by a physician **or an**  
 23 **advanced practice registered nurse.**
- 24 (j) The department of insurance shall adopt rules under IC 4-22-2  
 25 to ensure compliance with this section.
- 26 Page 18, between lines 5 and 6, begin a new paragraph and insert:  
 27 "SECTION 44. IC 21-38-6-1, AS AMENDED BY P.L.133-2020,  
 28 SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
 29 JULY 1, 2022]: Sec. 1. (a) An employee health plan that provides  
 30 coverage for early intervention services shall reimburse the first steps  
 31 program a monthly fee established by the division of disability and  
 32 rehabilitative services. Except when the monthly fee is less than the  
 33 product determined under IC 12-12.7-2-23(b), the monthly fee shall be  
 34 provided instead of claims processing of individual claims.
- 35 (b) An employee health plan may not require authorization for  
 36 services specified in the covered individual's individualized family  
 37 service plan, if those services are a covered benefit under the plan,  
 38 once the individualized family service plan is signed by a physician **or**  
 39 **an advanced practice registered nurse.**
- 40 (c) The department of insurance shall adopt rules under IC 4-22-2  
 41 to ensure compliance with this section."
- 42 Page 18, between lines 12 and 13, begin a new paragraph and insert:  
 43 "SECTION 45. IC 25-27-1-2, AS AMENDED BY P.L.196-2021,  
 44 SECTION 16, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
 45 JULY 1, 2022]: Sec. 2. (a) Except as otherwise provided in this chapter  
 46 and IC 25-27-2, it is unlawful for a person or business entity to do the

- 1 following:
- 2 (1) Practice physical therapy without first obtaining from the
- 3 board a license authorizing the person to practice physical therapy
- 4 in this state.
- 5 (2) Profess to be or promote an employee to be a physical
- 6 therapist, physiotherapist, doctor of physiotherapy, doctor of
- 7 physical therapy, or registered physical therapist or to use the
- 8 initials "P.T.", "D.P.T.", "L.P.T.", or "R.P.T.", or any other letters,
- 9 words, abbreviations, or insignia indicating that physical therapy
- 10 is provided by a physical therapist, unless physical therapy is
- 11 provided by or under the direction of a physical therapist.
- 12 (3) Advertise services for physical therapy or physiotherapy
- 13 services, unless the individual performing those services is a
- 14 physical therapist.
- 15 (b) Except as provided in subsection (e) and section 2.5 of this
- 16 chapter, it is unlawful for a person to practice physical therapy other
- 17 than upon the order or referral of a physician, a podiatrist, a
- 18 psychologist, a chiropractor, a dentist, ~~nurse practitioner~~, **an advanced**
- 19 **practice registered nurse**, or a physician assistant holding an
- 20 unlimited license to practice medicine, podiatric medicine, psychology,
- 21 chiropractic, dentistry, nursing, or as a physician assistant, respectively.
- 22 It is unlawful for a physical therapist to use the services of a physical
- 23 therapist assistant except as provided under this chapter. For the
- 24 purposes of this subsection, the function of:
- 25 (1) teaching;
- 26 (2) doing research;
- 27 (3) providing advisory services; or
- 28 (4) conducting seminars on physical therapy;
- 29 is not considered to be a practice of physical therapy.
- 30 (c) Except as otherwise provided in this chapter and IC 25-27-2, it
- 31 is unlawful for a person to profess to be or act as a physical therapist
- 32 assistant or to use the initials "P.T.A." or any other letters, words,
- 33 abbreviations, or insignia indicating that the person is a physical
- 34 therapist assistant without first obtaining from the board a certificate
- 35 authorizing the person to act as a physical therapist assistant. It is
- 36 unlawful for the person to act as a physical therapist assistant other
- 37 than under the general supervision of a licensed physical therapist who
- 38 is in responsible charge of a patient. However, nothing in this chapter
- 39 prohibits a person licensed or registered in this state under another law
- 40 from engaging in the practice for which the person is licensed or
- 41 registered. These exempted persons include persons engaged in the
- 42 practice of osteopathic medicine, chiropractic, or podiatric medicine.
- 43 (d) Except as provided in section 2.5 of this chapter, this chapter
- 44 does not authorize a person who is licensed as a physical therapist or
- 45 certified as a physical therapist assistant to:
- 46 (1) evaluate any physical disability or mental disorder except

1 upon the order or referral of a physician, a podiatrist, a  
2 psychologist, a chiropractor, a physician assistant, ~~nurse~~  
3 ~~practitioner~~, **an advanced practice registered nurse**, or a  
4 dentist;

5 (2) practice medicine, surgery (as described in  
6 IC 25-22.5-1-1.1(a)(1)(C)), dentistry, optometry, osteopathic  
7 medicine, psychology, chiropractic, or podiatric medicine; or

8 (3) prescribe a drug or other remedial substance used in medicine.

9 (e) Upon the referral of a licensed school psychologist, a physical  
10 therapist who is:

11 (1) licensed under this article; and

12 (2) an employee or contractor of a school corporation;

13 may provide mandated school services to a student that are within the  
14 physical therapist's scope of practice.

15 SECTION 46. IC 27-8-14.5-6 IS AMENDED TO READ AS  
16 FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 6. (a) A health  
17 insurance plan issued by an insurer must provide coverage for diabetes  
18 self-management training that is:

19 (1) medically necessary;

20 (2) ordered in writing by a physician licensed under IC 25-22.5,  
21 ~~or a podiatrist licensed under IC 25-29~~, **or an advanced practice**  
22 **registered nurse licensed under IC 25-23**; and

23 (3) provided by a health care professional who:

24 (A) is licensed, registered, or certified under IC 25; and

25 (B) has specialized training in the management of diabetes.

26 (b) Coverage for diabetes self-management training may be limited  
27 to the following:

28 (1) One (1) or more visits after receiving a diagnosis of diabetes.

29 (2) One (1) or more visits after receiving a diagnosis by a  
30 physician licensed under IC 25-22.5 or a podiatrist licensed under  
31 IC 25-29 that:

32 (A) represents a significant change in the insured's symptoms  
33 or condition; and

34 (B) makes changes in the insured's self-management medically  
35 necessary.

36 (3) One (1) or more visits for reeducation or refresher training.

37 (c) Coverage for diabetes self-management training is subject to the  
38 requirements of the health insurance plan regarding the use of  
39 participating providers.

40 SECTION 47. IC 27-8-27-6, AS AMENDED BY P.L.133-2020,  
41 SECTION 19, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
42 JULY 1, 2022]: Sec. 6. (a) A health insurance plan that provides  
43 coverage for early intervention services shall reimburse the first steps  
44 program a monthly fee established by the division of disability and  
45 rehabilitative services. Except when the monthly fee is less than the  
46 product determined under IC 12-12.7-2-23(b), the monthly fee shall be

1 provided instead of claims processing of individual claims.  
2 (b) A health insurance plan may not require authorization for  
3 services specified in the covered individual's individualized family  
4 service plan, if those services are a covered benefit under the plan,  
5 once the individualized family service plan is signed by a physician **or**  
6 **an advanced practice registered nurse.**  
7 (c) The department of insurance shall adopt rules under IC 4-22-2  
8 to ensure compliance with this section."  
9 Renumber all SECTIONS consecutively.  
(Reference is to EHB 1169 as printed February 25, 2022.)

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Senator CRIDER