



Adopted	Rejected
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COMMITTEE REPORT

YES:	11
NO:	0

MR. SPEAKER:

*Your Committee on Family, Children and Human Affairs, to which was referred House Bill 1118, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill **be amended** as follows:*

- 1 Delete everything after the enacting clause and insert the following:
- 2 SECTION 1. IC 12-21-5-6, AS ADDED BY P.L.225-2019,
- 3 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
- 4 JULY 1, 2021]: Sec. 6. (a) The division shall establish a standard
- 5 format for an individualized mental health safety plan that may be
- 6 disclosed without a patient's consent under IC 16-39-2-6(b).
- 7 (b) An individualized mental health safety plan format approved by
- 8 the division under this section must:
- 9 (1) provide that a mental health provider develop the
- 10 individualized mental health safety plan collaboratively with the
- 11 patient; and
- 12 (2) include the following:
- 13 (A) The patient's name, address, and contact information.

- 1 (B) Early warning signs that a crisis may be developing.
- 2 (C) Internal coping strategies.
- 3 (D) Contact information for individuals and social settings that
- 4 may provide distraction for the patient.
- 5 (E) Contact information for persons from whom the patient
- 6 can ask for help.
- 7 (F) Contact information for professionals or agencies that the
- 8 patient can contact at the onset of or during a crisis.
- 9 (G) A plan for making the environment safe for the patient.
- 10 (H) The one (1) thing that matters most to the patient and for
- 11 which the patient considers life worth living.
- 12 (I) Other information identified by the division, **including**
- 13 **issues concerning the patient's physical health.**

14 SECTION 2. IC 16-31-12-1, AS ADDED BY P.L.100-2019,
 15 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 16 JULY 1, 2021]: Sec. 1. **(a)** As used in this chapter, "mobile integrated
 17 healthcare" means community based health care in which paramedics
 18 and emergency medical technicians employed by an emergency
 19 medical services provider agency function outside of customary
 20 emergency response and transport to do the following:

- 21 (1) Facilitate more appropriate use of emergency care services.
- 22 (2) Enhance access to:
 - 23 (A) primary care for medically underserved populations; or
 - 24 (B) underutilized and appropriate health care services.

25 **(b) The emergency medical services provider agency described**
 26 **in subsection (a) shall be operated by a city, town, or township in**
 27 **accordance with this chapter and under the guidance of the**
 28 **commission.**

29 SECTION 3. IC 16-39-2-5.5, AS ADDED BY P.L.225-2019,
 30 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 31 JULY 1, 2021]: Sec. 5.5. **(a)** Each psychiatric crisis center, psychiatric
 32 inpatient unit, and psychiatric residential treatment provider shall do
 33 the following:

- 34 (1) Collaboratively develop an individualized mental health safety
- 35 plan with each patient.
- 36 (2) Explain the benefits of coordinating care and sharing
- 37 individualized mental health safety plans with mental health
- 38 providers in the community that can help with the patient's safe

1 transition back into the community.
 2 (3) Make a good faith effort before a patient leaves the facility at
 3 which the patient is receiving care to obtain the patient's consent
 4 to disclose the patient's individualized mental health safety plan
 5 with mental health providers, integrated school based mental
 6 health providers, **mobile integrated healthcare programs (as**
 7 **described in IC 16-31-12)**, and mental health community
 8 paramedicine programs that will be supporting the patient's safe
 9 transition back into the community and, if applicable, school.

10 **(b) Upon disclosure of the patient's individualized mental health**
 11 **safety plan described in subsection (a), a mobile integrated**
 12 **healthcare program (as described in IC 16-31-12) or a mental**
 13 **health community paramedicine program may do the following:**

- 14 **(1) Help facilitate services that are determined to be necessary**
 15 **for a patient.**
- 16 **(2) Coordinate, cooperate, and communicate with other**
 17 **licensed mental health professionals, health care**
 18 **professionals, and service providers in the community to**
 19 **implement or continue the individualized mental health safety**
 20 **plan.**
- 21 **(3) Monitor the services to determine the effectiveness of the**
 22 **services.**
- 23 **(4) Adapt the patient's mental health safety plan as needed for**
 24 **the patient's welfare and safety.**

25 SECTION 4. IC 16-39-2-6, AS AMENDED BY P.L.45-2020,
 26 SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 27 JULY 1, 2021]: Sec. 6. (a) Without the consent of the patient, the
 28 patient's mental health record may only be disclosed as follows:

- 29 (1) To individuals who meet the following conditions:
 30 (A) Are employed by:
 31 (i) the provider at the same facility or agency;
 32 (ii) a managed care provider (as defined in IC 12-7-2-127);
 33 or
 34 (iii) a health care provider or mental health care provider, if
 35 the mental health records are needed to provide health care
 36 or mental health services to the patient.
 37 (B) Are involved in the planning, provision, and monitoring of
 38 services.

- 1 (2) To the extent necessary to obtain payment for services
2 rendered or other benefits to which the patient may be entitled, as
3 provided in IC 16-39-5-3.
- 4 (3) To the patient's court appointed counsel and to the Indiana
5 protection and advocacy services commission.
- 6 (4) For research conducted in accordance with IC 16-39-5-3 and
7 the rules of the division of mental health and addiction, the rules
8 of the division of disability and rehabilitative services, the rules
9 of the provider, or the rules of the Indiana archives and records
10 administration and the oversight committee on public records.
- 11 (5) To the division of mental health and addiction for the purpose
12 of data collection, research, and monitoring managed care
13 providers (as defined in IC 12-7-2-127) who are operating under
14 a contract with the division of mental health and addiction.
- 15 (6) To the extent necessary to make reports or give testimony
16 required by the statutes pertaining to admissions, transfers,
17 discharges, and guardianship proceedings.
- 18 (7) To a law enforcement agency if any of the following
19 conditions are met:
 - 20 (A) A patient escapes from a facility to which the patient is
21 committed under IC 12-26.
 - 22 (B) The superintendent of the facility determines that failure
23 to provide the information may result in bodily harm to the
24 patient or another individual.
 - 25 (C) A patient commits or threatens to commit a crime on
26 facility premises or against facility personnel.
 - 27 (D) A patient is in the custody of a law enforcement officer or
28 agency for any reason and:
 - 29 (i) the information to be released is limited to medications
30 currently prescribed for the patient or to the patient's history
31 of adverse medication reactions; and
 - 32 (ii) the provider determines that the release of the
33 medication information will assist in protecting the health,
34 safety, or welfare of the patient.
- 35 Mental health records released under this clause must be
36 maintained in confidence by the law enforcement agency
37 receiving them.
- 38 (8) To a coroner or medical examiner, in the performance of the

- 1 individual's duties.
- 2 (9) To a school in which the patient is enrolled if the
- 3 superintendent of the facility determines that the information will
- 4 assist the school in meeting educational needs of the patient.
- 5 (10) To the extent necessary to satisfy reporting requirements
- 6 under the following statutes:
 - 7 (A) IC 12-10-3-10.
 - 8 (B) IC 12-24-17-5.
 - 9 (C) IC 16-41-2-3.
 - 10 (D) IC 31-25-3-2.
 - 11 (E) IC 31-33-5-4.
 - 12 (F) IC 34-30-16-2.
 - 13 (G) IC 35-46-1-13.
- 14 (11) To the extent necessary to satisfy release of information
- 15 requirements under the following statutes:
 - 16 (A) IC 12-24-11-2.
 - 17 (B) IC 12-24-12-3, IC 12-24-12-4, and IC 12-24-12-6.
 - 18 (C) IC 12-26-11.
- 19 (12) To another health care provider in a health care emergency.
- 20 (13) For legitimate business purposes as described in
- 21 IC 16-39-5-3.
- 22 (14) Under a court order under IC 16-39-3.
- 23 (15) With respect to records from a mental health or
- 24 developmental disability facility, to the United States Secret
- 25 Service if the following conditions are met:
 - 26 (A) The request does not apply to alcohol or drug abuse
 - 27 records described in 42 U.S.C. 290dd-2 unless authorized by
 - 28 a court order under 42 U.S.C. 290dd-2(b)(2)(c).
 - 29 (B) The request relates to the United States Secret Service's
 - 30 protective responsibility and investigative authority under 18
 - 31 U.S.C. 3056, 18 U.S.C. 871, or 18 U.S.C. 879.
 - 32 (C) The request specifies an individual patient.
 - 33 (D) The director or superintendent of the facility determines
 - 34 that disclosure of the mental health record may be necessary
 - 35 to protect a person under the protection of the United States
 - 36 Secret Service from serious bodily injury or death.
 - 37 (E) The United States Secret Service agrees to only use the
 - 38 mental health record information for investigative purposes

- 1 and not disclose the information publicly.
- 2 (F) The mental health record information disclosed to the
- 3 United States Secret Service includes only:
- 4 (i) the patient's name, age, and address;
- 5 (ii) the date of the patient's admission to or discharge from
- 6 the facility; and
- 7 (iii) any information that indicates whether or not the patient
- 8 has a history of violence or presents a danger to the person
- 9 under protection.
- 10 (16) To the statewide waiver ombudsman established under
- 11 IC 12-11-13, in the performance of the ombudsman's duties.
- 12 (b) If a licensed mental health professional, ~~or a licensed paramedic,~~
- 13 **a representative of a mobile integrated healthcare program (as**
- 14 **described in IC 16-31-12), or a representative of a mental health**
- 15 **community paramedicine program** in the course of rendering a
- 16 treatment intervention, determines that a patient may be a harm to
- 17 himself or herself or others, the licensed mental health professional, ~~or~~
- 18 **the licensed paramedic, the representative of the mobile integrated**
- 19 **healthcare program (as described in IC 16-31-12), or the**
- 20 **representative of the mental health community paramedicine**
- 21 **program** may request a patient's individualized mental health safety
- 22 plan from a psychiatric crisis center, psychiatric inpatient unit, or
- 23 psychiatric residential treatment provider. Each psychiatric crisis
- 24 center, psychiatric inpatient unit, and psychiatric residential treatment
- 25 provider shall, upon request and without the consent of the patient,
- 26 share a patient's individualized mental health safety plan that is in the
- 27 standard format established by the division of mental health and
- 28 addiction under IC 12-21-5-6 with the following individuals who
- 29 demonstrate proof of licensure and commit to protecting the
- 30 information in compliance with state and federal privacy laws:
- 31 (1) A licensed mental health professional.
- 32 (2) A licensed paramedic.
- 33 **(3) A representative of a mobile integrated healthcare**
- 34 **program (as described in IC 16-31-12).**
- 35 **(4) A representative of a mental health community**
- 36 **paramedicine program.**
- 37 An individualized mental health safety plan disclosed under this
- 38 subsection may be used only to support a patient's welfare and safety

1 and is considered otherwise confidential information under applicable
2 state and federal laws.

3 (c) After information is disclosed under subsection (a)(15) and if the
4 patient is evaluated to be dangerous, the records shall be interpreted in
5 consultation with a licensed mental health professional on the staff of
6 the United States Secret Service.

7 (d) A person who discloses information under subsection (a)(7),
8 (a)(15), or (b) in good faith is immune from civil and criminal liability.
(Reference is to HB 1118 as introduced.)

and when so amended that said bill do pass.

Representative DeVon

