

January 27, 2017

HOUSE BILL No. 1306

DIGEST OF HB 1306 (Updated January 25, 2017 7:28 pm - DI 77)

Citations Affected: IC 10-17; IC 27-1; IC 34-13.

Synopsis: Veterans' recovery program. Establishes, for five years, the veterans' recovery program and fund to provide treatment for veterans with a traumatic brain injury or posttraumatic stress disorder and to obtain reimbursement from third parties. Requires the commissioner of insurance (commissioner) to establish program standards. Allows the commissioner to appoint an advisory board for the program. Requires annual reporting.

Effective: July 1, 2017.

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January 10, 2017, read first time and referred to Committee on Public Health. January 26, 2017, reported — Do Pass. Referred to Committee on Ways and Means pursuant to Rule 127.



January 27, 2017

First Regular Session of the 120th General Assembly (2017)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2016 Regular Session of the General Assembly.

HOUSE BILL No. 1306

A BILL FOR AN ACT to amend the Indiana Code concerning military and veterans.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. IC 10-17-16 IS ADDED TO THE INDIANA CODE
2	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2017]:
4	Chapter 16. Veterans' Recovery Program
5	Sec. 1. As used in this chapter, "program" refers to the
6	veterans' recovery program established under IC 27-1-45.
7	Sec. 2. The director of veterans' affairs and the adjutant general
8	of the Indiana National Guard shall enter into a memorandum of
9	understanding with any institutional review board as necessary to
10	provide assistance to veterans under the program.
11	Sec. 3. The director of veterans' affairs shall give notice of the
12	existence of the program to each individual in Indiana who has a
13	traumatic brain injury or posttraumatic stress disorder related to
14	the individual's service, as follows:
15	(1) As a member of the armed forces of the United States.
16	(2) As a commissioned officer of the:
17	(A) United States Public Health Service;



1	(B) Environmental Science Services Administration; or		
2	(C) National Oceanic and Atmospheric Administration		
3	(including the National Geodetic Survey);		
4	who actively served and was discharged or released from		
5	service under conditions other than dishonorable.		
6	(3) As a member of the:		
7	(A) reserve component of the United States armed forces;		
8	or		
9	(B) Indiana National Guard;		
10	who was not required to actively serve and is eligible for or		
11	has received retirement under 10 U.S.C. 12731 et seq.		
12	Sec. 4. This chapter expires November 1, 2022.		
13	SECTION 2. IC 27-1-45 IS ADDED TO THE INDIANA CODE AS		
14	A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY		
15	1, 2017]:		
16	Chapter 45. Veterans' Recovery Program and Fund		
17	Sec. 1. As used in this chapter, "active service" means service		
18	described in 38 U.S.C. 101 et seq.		
19	Sec. 2. As used in this chapter, "facility" means:		
20	(1) a hospital;		
21	(2) a public health clinic;		
22	(3) an outpatient health clinic;		
23	(4) a community health center; or		
24	(5) another entity;		
25	that is authorized by the department under this chapter to provide		
26	hyperbaric oxygen treatment.		
27	Sec. 3. As used in this chapter, "fund" refers to the veterans'		
28	recovery fund established by section 14 of this chapter.		
29	Sec. 4. As used in this chapter, "health care provider" means an		
30	individual who:		
31	(1) is licensed in Indiana to provide health care services (as		
32	defined in IC 27-8-11-1); and		
33	(2) has prescriptive authority;		
34	under IC 25.		
35	Sec. 5. As used in this chapter, "hyperbaric oxygen treatment"		
36	means treatment for a traumatic brain injury or posttraumatic		
37	stress disorder that is ordered by a health care provider and		
38	delivered in:		
39	(1) a hyperbaric chamber approved by the federal Food and		
40	Drug Administration; or		
41	(2) a hyperbaric oxygen device that is approved by the federal		
42	Food and Drug Administration for investigational use under		



1	direction of an institutional review board with a national
2	clinical trial number.
3	Sec. 6. As used in this chapter, "institutional review board"
4	means a committee that:
5	(1) has been formally designated to approve, monitor, and
6	review biomedical and behavioral research involving humans;
7	and
8	(2) is regulated under 45 CFR 46.
9	Sec. 7. As used in this chapter, "program" refers to the
10	veterans' recovery program established under this chapter.
11	Sec. 8. As used in this chapter, "traumatic brain injury" means
12	an acquired injury to the brain. The term does not include brain
13	dysfunction caused by birth trauma or by a congenital or
14	degenerative disorder.
15	Sec. 9. As used in this chapter, "veteran" means an individual
16	who:
17	(1) is a resident of Indiana;
18	(2) was a:
19	(A) member of the armed forces of the United States;
20	(B) commissioned officer of the:
21	(i) United States Public Health Service;
22	(ii) Environmental Science Services Administration;
23	(iii) National Oceanic and Atmospheric Administration;
24	or
25	(iv) United States Coast and Geodetic Survey;
26	who was in active service and was discharged or released
27	from service under conditions other than dishonorable; or
28	(C) member of the:
29	(i) reserve component of the armed forces of the United
30	States; or
31	(ii) Indiana National Guard;
32	who was not required to actively serve and who is eligible
33	for or has received retirement under 10 U.S.C. 12731 et
34	seq.; and
35	(3) has a traumatic brain injury or posttraumatic stress
36	disorder that is related to the individual's service described in
37 38	subdivision (2).
38 39	Sec. 10. (a) The department shall establish and administer a
39 40	veterans' recovery program to provide diagnostic testing and hyperbaric oxygen treatment to veterans.
40 41	
41 42	(b) Hyperbaric oxygen treatment provided through the program must be provided:
42	must be provided:



1	(1) under a mustagel surgerized by an institutional variant
1 2	(1) under a protocol supervised by an institutional review board; and
3	(2) in compliance with the standards of the International
4	Hyperbaric Medical Foundation.
5	(c) The department shall adopt rules under IC 4-22-2 to
6	implement this chapter, including standards for the following:
7	(1) Determination by the department that an individual is a
8	veteran eligible for participation in the program, with priority
9	for participation given to a veteran who participates in a
10	treatment plan established by a veterans' court in Indiana.
11	(2) Determination by the department that a facility is eligible
12	to participate in the program, including:
13	(A) a requirement that the facility must maintain
14	compliance with applicable fire codes, treatment protocols,
15	and department oversight; and
16	(B) other facility standards determined by the department.
17	(3) Treatment plan requirements, including the following:
18	(A) A facility's submission to the department, before
19	providing hyperbaric oxygen treatment to a veteran, of a
20	treatment plan that includes:
21	(i) a health care provider's prescription for hyperbaric
22	oxygen treatment;
23	(ii) verification by the department that the veteran is
24	eligible for participation in the program and voluntarily
25	accepts the treatment through the program;
26	(iii) an estimate of the cost of the treatment; and
27	(iv) any other information required by the department.
28	(B) A reasonable time frame for:
29	(i) approval or disapproval by the department of a
30	treatment plan described in clause (A); and
31	(ii) notice to the facility of approval or disapproval of the
32	treatment plan.
33	(C) Contingent on sufficient funding available in the fund,
34 35	approval of each treatment plan that meets the
33 36	requirements established by the department under this
30 37	chapter. (D) Reservation in the fund of an amount equal to the
38	estimated treatment cost for each veteran whose treatment
38 39	plan is approved under this chapter.
40	(4) Criteria for approval of payment for treatment that has
40	been verified by the department to have been provided under
42	a treatment plan approved under subdivision (3), including:



1(A) whether a drug or device used in the treatment plan has been approved for any purpose by the federal Food and Drug Administration;4(B) health improvement of the veteran receiving the treatment, as demonstrated through:5(i) standardized, independent pretreatment and posttreatment neuropsychological testing;8(ii) nationally accepted survey instruments;9(iii) neurological imaging; or10(iv) clinical examination; and11(C) receipt by the department of pretreatment and posttreatment evaluation documentation.13(5) Payment from the fund for treatments approved for payment under subdivision (4), not more than thirty (30) days after the veteran, or health care provider on behalf of the veteran, submits documentation required by the program.17(6) Confidentiality of all individually identifiable patient information of a veteran. However, all data and information from which the identity of an individual veteran cannot be reasonably ascertained must be available to the general assembly, participating third party payers, participating institutional review boards, participating health care
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22 institutional review boards, participating health care
23 providers, and other governmental agencies.
24 (7) Determining whether a treatment for which approval is
25 granted under subdivision (1) is considered to have been
26 medically necessary for purposes of any third party payment.
27 (d) The commissioner may appoint an advisory board to assist
28 the department in development of the program.
29 Sec. 11. The commissioner shall do the following:
30 (1) Be responsible for the management of all aspects of the
31 program.
32 (2) Hire any necessary staff and enter into any necessary
33 agreements with third parties to implement and evaluate the
34 program.
35 (3) Prepare and provide program information.
36 (4) Use money in the fund to pay for diagnostic testing and
37 hyperbaric oxygen treatment for veterans with a traumatic
38 brain injury or posttraumatic stress disorder when other
39 funding is unavailable, according to the program guidelines.
40 (5) With the assistance of the attorney general, pursue
41 reimbursement from:
42 (A) the federal government; and



1	
1	(B) any other responsible third party payer;
2	for payments made under subdivision (4), for deposit in the
3	fund.
4	(6) Act as a liaison to the federal government and other
5	parties regarding the program.
6	(7) Enter into memoranda of understanding, as necessary,
7	with other state agencies concerning the administration and
8 9	management of the fund and the program.
-	Sec. 12. A health care provider or facility providing treatment
10 11	under the program, including a physician who supervises
11	treatment, shall bill the program and be paid at:
12	(1) the Medicare rate for the treatment; (2) a negative due to that is less than the Medicare rate for the
13	(2) a negotiated rate that is less than the Medicare rate for the
14	treatment; or (2) if a vote under subdivision (1) or (2) does not early the
15	(3) if a rate under subdivision (1) or (2) does not apply, the fair market rate for the treatment, as approved by the
10	commissioner.
18	Sec. 13. (a) If a facility or health care provider or a veteran fails
19	to request payment from the program within six (6) months after
20	the date on which treatment is concluded, the department shall
20	send written notice to the facility or health care provider and to the
$\frac{21}{22}$	veteran that unless the facility, health care provider, or veteran,
$\frac{22}{23}$	within ninety (90) days after the date on which the notice from the
24	department is sent:
25	(1) notifies the department that treatment has not concluded
26	and the veteran is receiving continued treatment under the
27	program; or
28	(2) requests payment from the program for the incurred
29	treatment;
30	the funding reserved for the treatment will be terminated on the
31	ninetieth day after the date on which the notice from the
32	department was sent.
33	(b) If a facility, health care provider, or veteran to whom notice
34	is sent under subsection (a) does not notify the department as
35	required by subsection (a), the commissioner shall terminate the
36	reservation of funds made for the veteran's treatment plan under
37	section 10(c) of this chapter.
38	Sec. 14. (a) The veterans' recovery fund is established.
39	(b) The purpose of the fund is to:
40	(1) be used as a revolving fund to provide payments under the
41	program for diagnostic testing and hyperbaric oxygen
42	treatment of veterans with traumatic brain injury or



1	posttraumatic stress disorder; and
2	(2) fund the administrative expenses of the program.
3	(c) The commissioner shall:
4	(1) administer the fund; and
5	(2) in cooperation with other state agencies, seek federal and
6	state government grants, including funding from the
7	following:
8	(A) The United States Department of Health and Human
9	Services, Substance Abuse and Mental Health
10	Administration, Gains Center for Behavioral Health and
11	Justice Transformation.
12	(B) The United States Department of Justice, Office of
13	Justice Programs, Bureau of Justice Assistance.
14	(C) The United States Department of Defense.
15	(D) The United States Department of Veterans Affairs.
16	(d) Expenses of administering the fund shall be paid from
17	money in the fund.
18	(e) The fund consists of the following:
19	(1) Grants and gifts intended for deposit in the fund.
20	(2) Interest, premiums, gains, or other earnings on the fund.
21	(3) Any reimbursement received from the federal government
22	or third parties.
23	(4) Appropriations made by the general assembly.
24	(f) The treasurer of state shall invest the money in the fund not
25	currently needed to meet the obligations of the fund in the same
26	manner as other public money may be invested. Interest that
27	accrues from these investments shall be deposited in the fund.
28	(g) Money in the fund at the end of a state fiscal year does not
29	revert to the state general fund.
30	(h) All expenditures from the fund must be made by the
31	treasurer of state following approval by the budget agency.
32	(i) Upon expiration of this chapter on November 1, 2022, under
33	section 17 of this chapter, any money remaining in the fund and not
34	obligated for a previously approved treatment plan shall be
35	transferred as follows:
36	(1) Any money remaining in the fund that does not exceed the
37	total of any amounts appropriated by the general assembly shall be transformed to the general fund
38	shall be transferred to the general fund.
39 40	(2) Unless otherwise prohibited by law, any money remaining in the fund often the transfer required by subdivision (1) shall
40 41	in the fund after the transfer required by subdivision (1) shall be transformed to the military family relief fund established by
41	be transferred to the military family relief fund established by IC 10-17-12-8.
4 2	10 10-1/-12-0.



1 Sec. 15. (a) An individual who receives treatment under the 2 program may not be subject to retaliation of any kind. 3 (b) Except as provided in this chapter, the program and the 4 fund are not subject to any budget review or approval process 5 otherwise required under state law. However, the commissioner 6 shall file an annual audited financial statement in an electronic 7 format under IC 5-14-6 with the legislative council and the budget 8 agency. 9 Sec. 16. The commissioner shall, not later than August 1 of each 10 year, file a report concerning the program in an electronic format 11 with the governor and, under IC 5-14-6, with the legislative 12 council. The report shall include all of the following: 13 (1) The number of individuals for whom payments were made 14 from the fund for treatment under the program. 15 (2) The condition for which each individual counted under 16 subdivision (1) received treatment, and the success rate of 17 each treatment. 18 (3) Treatment methods for which payment was made under 19 the program, and the success rate of each method. 20 (4) Recommendations concerning integration of the treatment 21 methods described in subdivision (3) with treatments 22 provided in facilities of the United States Department of 23 Defense and the United States Department of Veterans 24 Affairs. 25 Sec. 17. This chapter expires November 1, 2022. 26 SECTION 3. IC 34-13-3-2, AS AMENDED BY P.L.198-2016, 27 SECTION 666, IS AMENDED TO READ AS FOLLOWS 28 [EFFECTIVE JULY 1, 2017]: Sec. 2. This chapter applies to a claim 29 or suit in tort against any of the following: 30 (1) A member of the bureau of motor vehicles commission board 31 established under IC 9-14-9-2. 32 (2) An employee of the bureau of motor vehicles commission. 33 (3) A member of the driver education advisory board established 34 by IC 9-27-6-5. 35 (4) An approved postsecondary educational institution (as defined in IC 21-7-13-6(a)(1)), or an association acting on behalf of an 36 37 approved postsecondary educational institution, that: 38 (A) shares data with the commission for higher education 39 under IC 21-12-12-1; and 40 (B) is named as a defendant in a claim or suit in tort based on 41 any breach of the confidentiality of the data that occurs after 42 the institution has transmitted the data in compliance with

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1	IC 21-12-12-1.
2	(5) A health car

(5) A health care provider, with respect to any damages 3 resulting from the health care provider's use of hyperbaric

- 4 oxygen treatment to treat a veteran under the Indiana 5
- veterans' recovery program under IC 27-1-45.



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1306, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

(Reference is to HB 1306 as introduced.)

KIRCHHOFER

Committee Vote: Yeas 11, Nays 0

