



# **ENGROSSED HOUSE BILL No. 1497**

DIGEST OF HB 1497 (Updated March 31, 2021 2:16 pm - DI 104)

Citations Affected: IC 16-27.

Synopsis: Home health services. Amends the definition of "home health agency", for purposes of the home health agency licensure laws, to provide that a person may provide or offer to provide nursing services and at least one home health service for compensation. Specifies that the term does not include: (1) services under the Program of All-Inclusive Care for the Elderly (PACE); or a person that only administers home infusion therapy based on a specialty medication prescription.

Effective: July 1, 2021.

## **Barrett**

(SENATE SPONSORS — CHARBONNEAU, RAATZ)

January 14, 2021, read first time and referred to Committee on Public Health. February 8, 2021, amended, reported — Do Pass. February 16, 2021, read second time, amended, ordered engrossed. February 17, 2021, engrossed. February 18, 2021, read third time, passed. Yeas 85, nays 0.

SENATE ACTION

March 4, 2021, read first time and referred to Committee on Health and Provider Services. April 1, 2021, amended, reported favorably — Do Pass.



First Regular Session of the 122nd General Assembly (2021)

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 2020 Regular Session of the General Assembly.

# ENGROSSED HOUSE BILL No. 1497

A BILL FOR AN ACT to amend the Indiana Code concerning health.

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

1	SECTION 1. IC 16-27-1-2, AS AMENDED BY P.L.141-2006,
2	SECTION 80, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2021]: Sec. 2. (a) As used in this chapter, "home health
4	agency" means a person that provides or offers to provide: only a
5	(1) nursing services; or
6	(2) nursing services and at least one (1) home health service;
7	for compensation.
8	(b) The term does not include the following:
9	(1) An individual health care professional who provides
10	professional services to a patient in the temporary or permanent
11	residence of the patient.
12	(2) A local health department as described in IC 16-20 or
13	IC 16-22-8.
14	(3) A person that:
15	(A) is approved by the division of disability and rehabilitative
16	services to provide supported living services or supported
17	living supports to individuals with developmental disabilities;



1	(B) is subject to rules adopted under IC 12-11-2.1; and
2	(C) serves only individuals with developmental disabilities
3	who are in a placement authorized under IC 12-11-2.1-4.
4	(4) A person providing services under the Program of
5	All-Inclusive Care for the Elderly (PACE) described in
6	IC 12-15-43.
7	(5) A person that only administers home infusion therapy
8	based on a specialty medication prescription received from a
9	pharmacy.



## COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1497, 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:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 10-17-13.5-6, AS AMENDED BY P.L.156-2019, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JUNE 29, 2021]: Sec. 6. (a) As used in this section, "hyperbaric oxygen treatment" means treatment for traumatic brain injury or posttraumatic stress disorder that is ordered by a health care provider and delivered in a hyperbaric chamber.

- (b) The department shall establish a pilot program for the purpose of providing assistance for each provider that has been approved by the state department of health to provide diagnostic testing and hyperbaric oxygen treatment to veterans receiving treatment under section 4(b) of this chapter.
- (c) The state department of health shall issue a request for proposals to select up to five (5) providers that collectively represent the north, south, east, west, and central geographic areas of twice annually within Indiana to offer the treatment described in section 4(b) of this chapter.
- (d) An individual veteran is eligible to begin treatment if the service related event that caused the traumatic brain injury or posttraumatic stress disorder is documented by a licensed physician.
- (e) An individual veteran may not be required to pay a co-pay under the pilot program.
- (f) A grant under the pilot program established under subsection (b) may be provided only to the provider chosen by the state department of health to provide diagnostic testing and hyperbaric oxygen treatment to veterans.
- (g) The state department of health, after consulting with the department, shall adopt rules under IC 4-22-2 to implement section 4(b) of this chapter, including standards for the following:
  - (1) Determination by a provider that an individual is a veteran eligible for participation in the pilot program.
  - (2) Determination by the state department of health that a provider is eligible to participate in the pilot program, including:
    - (A) a requirement that the provider must maintain compliance with applicable fire codes, treatment protocols, and state



- department of health oversight; and
- (B) other facility standards determined by the state department of health.
- (3) Treatment plan requirements, including the following:
  - (A) A provider's submission to the state department of health, before providing hyperbaric oxygen treatment to a veteran, of a treatment plan that includes:
    - (i) a health care provider's prescription for hyperbaric oxygen treatment;
    - (ii) verification by the provider that the veteran is eligible for participation in the pilot program and voluntarily accepts treatment through the pilot program;
    - (iii) an estimate of the cost of the veteran's treatment; and
    - (iv) any other information required by the state department of health.
  - (B) A reasonable time frame for:
    - (i) approval or disapproval by the state department of health of a treatment plan described in clause (A); and
    - (ii) notice to the provider of approval or disapproval of the treatment plan.
  - (C) Contingent on sufficient funding available in the fund, approval of each treatment plan that meets the requirements established by the state department of health under this section.
  - (D) The sources of funding for the estimated treatment cost for each veteran whose treatment plan is approved under this section.
- (4) Criteria for approval of payment for treatment that has been verified by the state department of health to have been provided under a treatment plan approved under subdivision (3), including:
  - (A) whether a drug or device used in the treatment plan has been approved for any purpose by the federal Food and Drug Administration; **and**
  - (B) health improvement verification of the veteran receiving the treatment, as demonstrated through:
    - (i) standardized, independent pretreatment and posttreatment neuropsychological testing; billing documentation from the provider of the hyperbaric oxygen therapy treatments; or
    - (ii) nationally accepted survey instruments; attendance documentation signed by the provider and treatment recipient attesting to the receipt of the prescribed



#### treatments.

- (iii) neurological imaging; or
- (iv) clinical examination; and
- (C) receipt by the state department of health of pretreatment and posttreatment evaluation documentation.
- (5) Confidentiality of all individually identifiable patient information of a veteran. However, subject to the requirements of the federal Health Insurance Portability and Accountability Act and any other applicable medical record laws, all data and information from which the identity of an individual veteran cannot be reasonably ascertained must be available to the general assembly, participating institutional review boards, participating health care providers, medical researchers, and other governmental agencies.
- (h) A provider under this section, including a physician who supervises treatment, shall bill the pilot program and be paid at cost out of the grant amount awarded to the provider. No providers may profit from services provided under the pilot program. Services offered under the pilot program are provided as a service to veterans.
- (i) Each provider shall quarterly file a status report concerning the services provided by the provider under the pilot program with the following:
  - (1) The department.
  - (2) The state department of health.
- (j) At the conclusion of the pilot program, the department, in collaboration with the state department of health, shall prepare a written final report and transmit it to the following:
  - (1) The governor.
  - (2) The leadership of the legislative council in electronic format under IC 5-14-6.
  - (3) The chairperson of the house committee on veterans affairs and public safety.
  - (4) The chairperson of the senate committee on veterans affairs and the military.

The report required under this subsection must be made available on the department's Internet web site.

- (k) This section expires <del>June 30, 2021.</del> **June 30, 2025.**".
- Page 1, line 5, delete "and" and insert "or".
- Page 1, line 6, after "(2)" insert "nursing services and".
- Page 2, after line 3, begin a new line block indented and insert:
  - "(4) A person providing services under the Program of All-Inclusive Care for the Elderly (PACE) described in



### IC 12-15-43.

SECTION 3. P.L.156-2019, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: (a) The following definitions apply throughout this SECTION:

- (1) "Department" refers to the Indiana department of veterans' affairs.
- (2) "Pilot program" refers to the pilot program established under IC 10-17-13.5-6, as amended by this act, to provide assistance to approved providers that furnish diagnostic testing and hyperbaric oxygen treatment to veterans.
- (b) Money appropriated to the department in P.L.217-2017, SECTION 8, for purposes of the pilot program for state fiscal years beginning July 1, 2017, and ending June 30, 2019, and remaining unspent at the end of the state fiscal year ending June 30, 2019:
  - (1) remains available to the department for the purposes of the pilot program; and
  - (2) does not revert to the state general fund.
- (c) Money appropriated to the department for purposes of the pilot program for state fiscal years beginning July 1, 2017, and ending June 30, 2019, may not be spent after June 30, <del>2021.</del> **2025.** Any money appropriated to the department for the pilot program that remains unspent after June 30, <del>2021,</del> **2025,** reverts to the state general fund.
  - (d) This SECTION expires July 1, 2021. 2025.

SECTION 4. An emergency is declared for this act.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1497 as introduced.)

**BARRETT** 

Committee Vote: yeas 11, nays 0.

## **HOUSE MOTION**

Mr. Speaker: I move that House Bill 1497 be amended to read as follows:

Page 1, line 14, delete "twice annually".

Page 4, line 37, after "PASSAGE]:" insert "SECTION 2.".



(Reference is to HB 1497 as printed February 8, 2021.)

**BARRETT** 

## **HOUSE MOTION**

Mr. Speaker: I move that House Bill 1497 be amended to read as follows:

Page 4, between lines 35 and 36, begin a new line block indented and insert:

"(5) A person that only administers home infusion therapy based on a specialty medication prescription received from a pharmacy.".

Page 4, line 37, after "PASSAGE]:" insert "SECTION 2.".

(Reference is to HB 1497 as printed February 8, 2021.)

**BARRETT** 

## COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1497, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, delete lines 1 through 17.

Delete pages 2 and 3.

Page 4, delete lines 1 through 11.

Page 4, delete lines 38 through 42.

Delete page 5.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1497 as reprinted February 17, 2021.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 10, Nays 0.

