

January 30, 2025

SENATE BILL No. 486

DIGEST OF SB 486 (Updated January 29, 2025 10:48 am - DI 140)

Citations Affected: IC 11-12; IC 12-15; IC 12-17.2; IC 12-21.

Synopsis: Family and social services matters. Requires a sheriff to assist an individual who: (1) has been incarcerated for at least 30 days in a: (A) county jail; (B) community based correctional facility for children; (C) juvenile detention facility; or (D) secure facility other than a child caring institution; and (2) is eligible for Medicaid; in applying for Medicaid before the individual's release from the facility. Provides that if a child loses Medicaid coverage while confined in a juvenile detention facility or secure facility, the division of family resources shall, upon receiving notice that the child will be released, take action necessary ensure that the child is eligible to receive specified federally mandated services for 30 days before and after the child's release. Requires an insurer to respond within 60 days to an inquiry from the office of Medicaid policy and planning regarding a Medicaid claim that is made within three years from the date on which the service that is the subject of the claim was provided. Provides that an insurer other than Medicare, Medicare Advantage, or Medicare Part D may not deny a Medicaid claim solely due to lack of prior authorization in accordance with federal Medicaid law. Provides that the requirement that an individual who receives payment for medical expenses from Medicaid must cede to the state the individual's rights to third party payment for the medical expenses extends to settlement amounts for both past medical expenses and rights to payment of future (Continued next page)

Effective: July 1, 2025.

Charbonneau, Crider

January 13, 2025, read first time and referred to Committee on Health and Provider Services. January 29, 2025, reported favorably — Do Pass; reassigned to Committee on Appropriations.



Digest Continued

medical expenses. Amends the duties, membership, and terms of office of the Medicaid advisory commission. Creates the Medicaid beneficiary advisory commission. Repeals a provision requiring that employees of a child care provider be tested for tuberculosis in order for the child care provider to be eligible to receive voucher payments under the federal Child Care and Development Fund program. Provides the following with regard to a licensed child care center, licensed child care home, or registered child care ministry (child care provider): (1) Requires all employees of a child care provider to be trained in pediatric first aid and pediatric cardiopulmonary resuscitation applicable to all age groups of children cared for by the child care provider. (2) Requires at least one adult who is certified in pediatric cardiopulmonary resuscitation applicable to all age groups of children cared for by the child care provider to be present at all times when a child is in the care of the child care provider. Amends the membership of the division of mental health and addiction planning and advisory council.



January 30, 2025

First Regular Session of the 124th General Assembly (2025)

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 2024 Regular Session of the General Assembly.

SENATE BILL No. 486

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

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

1	SECTION 1. IC 11-12-5-9, AS ADDED BY P.L.185-2015,
2	SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2025]: Sec. 9. (a) This section is effective beginning
4	September 1, 2015.
5	(b) For an offender who is incarcerated for less than thirty (30) days,
6	a sheriff, in consultation with the county executive or a person
7	designated by the county executive, may:
8	(1) assist an offender in applying for Medicaid; and
9	(2) act as the offender's Medicaid authorized representative as
10	described in IC 11-10-3-7;
11	so that the offender might be eligible for coverage when the offender
12	is subsequently released from the county jail.
13	(c) Before discharge or release from an offender who has been
14	incarcerated in a county jail of an offender incarcerated or a facility
15	listed in IC 12-15-1-20.4(a)(1) for at least thirty (30) days is released



or discharged from the county jail or facility, the sheriff, in consultation with the county executive or a person designated by the county executive in the county in which the incarcerated person is located shall assist the offender in applying for Medicaid, if eligible, as the authorized representative as described in IC 11-10-3-7 or as a health navigator under the requirements of IC 27-19-2-12, so that the offender might be eligible for coverage when the offender is subsequently released from the county jail.

(d) The sheriff shall provide the assistance described in subsection (c) in sufficient time to ensure that the offender will be able to receive coverage at the time the offender is released from the county jail.

12 (e) A county executive may contract with any entity that complies 13 with IC 27-19-2-12, including a hospital or outreach eligibility worker, to assist with Medicaid applications under this section. A county 14 15 executive may develop intergovernmental agreements with other 16 counties to provide both authorized representative and health navigator 17 services required under this section. Upon a determination that an 18 incarcerated individual qualifies for Medicaid coverage, the office of 19 the secretary of family and social services, division of family resources, 20 shall authorize and then immediately suspend Medicaid coverage for 21 those inmates not requiring immediate medical attention.

22 SECTION 2. IC 12-15-1-20.4, AS AMENDED BY P.L.57-2021, 23 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 24 JULY 1, 2025]: Sec. 20.4. (a) If a Medicaid recipient is: 25 (1) adjudicated to be a delinquent child and placed in: 26 (A) a community based correctional facility for children; 27 (B) a juvenile detention facility; or 28 (C) a secure facility, not including a facility licensed as a child 29 caring institution under IC 31-27; or 30 (2) incarcerated in a prison or jail; and 31 ineligible to participate in the Medicaid program during the placement 32 described in subdivision (1) or (2) because of federal Medicaid law, the division of family resources, upon notice that a child has been 33 34 adjudicated to be a delinquent child and placed in a facility described 35 in subdivision (1) or upon notice that a person is incarcerated in a prison or jail and placed in a facility described in subdivision (2), shall 36 37 suspend the person's participation in the Medicaid program. 38 (b) If the division of family resources receives: 39 (1) a dispositional decree under IC 31-37-19-28; or 40

- (2) a modified disposition order under IC 31-37-22-9;
- regarding a person described in subsection (a)(2) and the 41 42 department of correction gives the division of family resources at least

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1 forty (40) days notice that a the person will be released from a facility 2 described in subsection $\frac{(a)(1)(C)}{(a)}$ or (a)(2), the division of family 3 resources shall take action necessary to ensure that a the person 4 described in subsection (a) is eligible to participate in the Medicaid 5 program upon the person's release, if the person is eligible to 6 participate.

7 (c) A facility described in subsection (a)(1) shall, not less than 8 forty-five (45) days before the release date of a person placed in the 9 facility as described in subsection (a)(1), provide notice of the 10 person's release date to the division of family resources. The division of family resources shall take action necessary to ensure 11 12 that the person is eligible to: 13 (1) participate in the Medicaid program upon the person's

14 release, if the person is eligible to participate; and 15 (2) receive services mandated under 42 U.S.C. 1396a for thirty (30) days before the person's release date and for thirty (30) 16 days after the person's release date. 17

18 SECTION 3. IC 12-15-29-4.5, AS AMENDED BY P.L.265-2019, 19 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 20 JULY 1, 2025]: Sec. 4.5. (a) An insurer shall:

(1) accept a Medicaid claim for a Medicaid recipient for three (3) years from the date the service was provided; and

(2) respond to an inquiry by the office regarding the claim not later than sixty (60) days after receiving the inquiry.

(b) An insurer may not deny a Medicaid claim submitted by the office solely on the basis of:

(1) the date of submission of the claim;

- (2) the type or format of the claim form; 28
- 29 (3) the method of submission of the claim; or

30 (4) a failure to provide proper documentation at the point of sale 31 that is the basis of the claim;

if the claim is submitted by the office within three (3) years from the date the service was provided as required in subsection (a) and the office commences action to enforce the office's rights regarding the claim within six (6) years of the office's submission of the claim.

36 (c) In accordance with 42 U.S.C. 1396a, an insurer, other than 37 Medicare, Medicare Advantage, and Medicare Part D, may not deny a Medicaid claim submitted by the office solely due to a lack of 39 prior authorization. An insurer shall:

- 40 (1) after December 31, 2020, meet the requirements set forth in 41 IC 27-1-37.5;
 - (2) conduct the prior authorization on a retrospective basis for

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1 claims where prior authorization is necessary; and 2 (3) adjudicate any claim authorized in this manner as if the claim 3 received prior authorization. 4 SECTION 4. IC 12-15-29-9, AS AMENDED BY P.L.187-2007, 5 SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 6 JULY 1, 2025]: Sec. 9. (a) IC 27-8-23 applies to this section. 7 (b) To the extent that payment for covered medical expenses has 8 been made under the state Medicaid program for health care items or 9 services furnished to a person, in a case where a third party has a legal 10 liability to make payments, the state is considered to have acquired the rights of the person to payment by any other party for the health care 11 12 items or services. 13 (c) As required under 42 U.S.C. 1396a(a)(25), an insurer shall 14 accept the state's right of recovery and the assignment to the state of 15 any right of the individual or entity to payment for a health care item 16 or service for which payment has been made under the state Medicaid 17 plan. 18 (d) The state may seek reimbursement under 42 U.S.C. 1396k(a) 19 from settlement amounts representing: 20 (1) past medical expenses; and 21 (2) rights to payment of future medical expenses. 22 SECTION 5. IC 12-15-33-2, AS AMENDED BY P.L.42-2024, 23 SECTION 86, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 24 JULY 1, 2025]: Sec. 2. The Medicaid advisory commission is created 25 to act in an advisory capacity to the following: office in matters related to policy development and in the effective administration 26 27 of the Medicaid program. 28 (1) The office in the administration of the Medicaid program. 29 (2) The children's health policy board established by IC 4-23-27-2 30 in the board's responsibility to direct policy coordination of 31 children's health programs. 32 SECTION 6. IC 12-15-33-3, AS AMENDED BY P.L.42-2024, 33 SECTION 87, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 34 JULY 1, 2025]: Sec. 3. (a) The commission shall be appointed as 35 follows: 36 (1) One (1) member Sixteen (16) members shall be appointed by 37 the administrator of the office to represent each of the following 38 organizations: as follows: 39 (A) Six (6) members representing Medicaid providers, with 40 no more than one (1) representative of each Medicaid type. 41 (B) Two (2) members representing managed care entities. 42 (C) Two (2) members representing:

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1	(i) state or local consumer advocacy groups; or
2	(ii) other community based organizations;
3	that represent the interests of, or provide direct service to,
4	Medicaid beneficiaries.
5	(D) Six (6) members of the Medicaid beneficiary advisory
6	commission established by IC 12-15-33.3-2.
7	(A) Indiana Council of Community Mental Health Centers.
8	(B) Indiana State Medical Association.
9	(C) Indiana State Chapter of the American Academy of
10	Pediatrics.
11	(D) Indiana Hospital Association.
12	(E) Indiana Dental Association.
13	(F) Indiana State Psychiatric Association.
14	(G) Indiana State Osteopathic Association.
15	(II) Indiana State Nurses Association.
16	(I) Indiana State Licensed Practical Nurses Association.
17	(J) Indiana State Podiatry Association.
18	(K) Indiana Health Care Association.
19	(L) Indiana Optometric Association.
20	(M) Indiana Pharmaceutical Association.
21	(N) Indiana Psychological Association.
22	(O) Indiana State Chiropractic Association.
23	(P) Indiana Ambulance Association.
24	(Q) Indiana Association for Home Care.
25	(R) Indiana Academy of Ophthalmology.
26	(S) Indiana Speech and Hearing Association.
27	(T) Indiana Academy of Physician Assistants.
28	(U) Indiana Association of Rehabilitation Facilities.
29	(V) Indiana Association of Health Plans.
30	(W) Indiana Primary Health Care Association.
31	(2) Ten (10) members shall be appointed by the governor as
32	follows:
33	(A) One (1) member who represents agricultural interests.
34	(B) One (1) member who represents business and industrial
35	interests.
36	(C) One (1) member who represents labor interests.
37	(D) One (1) member who represents insurance interests.
38	(E) One (1) member who represents a statewide taxpayer
39	association.
40	(F) Two (2) members who are parent advocates.
41	(G) Three (3) members who represent Indiana eitizens.
42	(3) (2) Three (3) Two (2) members of the senate appointed by the

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1 president pro tempore of the senate. 2 (4) (3) Three (3) Two (2) members of the senate appointed by the 3 president pro tempore of the senate after consultation with the 4 minority leader of the senate. 5 (5) (4) Three (3) Two (2) members of the house of representatives 6 appointed by the speaker of the house. (6) (5) Three (3) Two (2) members of the house of representatives 7 8 appointed by the speaker of the house after consultation with the 9 minority leader of the house. 10 (b) The president pro tempore of the senate shall appoint three (3) 11 of the commission members appointed under subsection (a)(3) and 12 (a)(4) to the standing fiscal subcommittee created under section 8(b) 13 of this chapter. 14 (c) The speaker of the house shall appoint three (3) of the 15 commission members appointed under subsection (a)(5) and (a)(6) to 16 the standing fiscal subcommittee created under section 8(b) of this 17 chapter. 18 SECTION 7. IC 12-15-33-4, AS AMENDED BY P.L.42-2024, 19 SECTION 88, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 20 JULY 1, 2025]: Sec. 4. (a) Subject to subsection (b), an appointment 21 to the commission expires in accordance with section 5 of this chapter, 22 but a member serves until the member's successor is designated. 23 (b) A member of the commission serves at the pleasure of the 24 appointing authority who appointed the member to the commission. 25 (c) A member of the commission may be reappointed to successive 26 terms. 27 (d) (c) A vacancy on the commission shall be filled by the 28 appropriate appointing authority. An individual appointed to fill a 29 vacancy serves for the unexpired term of the individual's predecessor. 30 SECTION 8. IC 12-15-33-5, AS AMENDED BY P.L.42-2024, 31 SECTION 89, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 32 JULY 1, 2025]: Sec. 5. (a) This subsection does not apply to a member 33 of the general assembly appointed to the commission under section 3 34 of this chapter. Except as provided in subsection (c), an appointment 35 to the commission is for a four (4) year term that expires as follows: 36 (1) For a member appointed under section $\frac{3(a)(1)(A)}{A}$ through 37 3(a)(1)(Q) 3(1)(A) or 3(1)(B) of this chapter, December 31, 2025, 2027, and every fourth year thereafter. 38 39 (2) For a member appointed under section $\frac{3(a)(1)(R)}{2}$ through 40 3(a)(1)(W) 3(1)(C) or 3(1)(D) of this chapter, or under section 41 $\frac{3(a)(2)}{2}$ of this chapter. December 31, $\frac{2027}{2029}$, and every 42 fourth year thereafter.

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1 (b) This subsection applies only to a member of the general 2 assembly appointed to the commission under section 3 of this chapter. 3 The member serves a term of two (2) years that expires June 30 of each 4 odd-numbered year. 5 (c) A member described in subsection (a)(2) who is appointed to 6 the commission in 2025 serves until the member's term expires on 7 December 31, 2029. 8 SECTION 9. IC 12-15-33-6, AS AMENDED BY P.L.42-2024, 9 SECTION 90, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 10 JULY 1, 2025]: Sec. 6. The following shall serve as ex officio members 11 of the commission: 12 (1) The state health commissioner or the commissioner's 13 designee. 14 (2) The director of the division of mental health and addiction or 15 the director's designee. 16 (3) The administrator of the office. 17 (4) The director of the department of child services or the 18 director's designee. 19 SECTION 10. IC 12-15-33-8 IS REPEALED [EFFECTIVE JULY 20 1, 2025]. Sec. 8. (a) A subcommittee may be created as the commission 21 considers necessary. 22 (b) The commission shall create a standing fiscal subcommittee. 23 (c) The chairman of each subcommittee must be a member of the 24 commission. 25 (d) Subcommittees may convene as often as needed. 26 SECTION 11. IC 12-15-33.3 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS 27 28 [EFFECTIVE JULY 1, 2025]: 29 **Chapter 33.3. Medicaid Beneficiary Advisory Commission** 30 Sec. 1. As used in this chapter, "commission" refers to the 31 Medicaid beneficiary advisory commission created by section 2 of 32 this chapter. 33 Sec. 2. The Medicaid beneficiary advisory commission is created 34 under the executive branch of government to act in an advisory 35 capacity to the office in matters related to policy development and 36 in the effective administration of the Medicaid program. 37 Sec. 3. (a) The commission is composed of individuals who: 38 (1) are: 39 (A) current and former Medicaid beneficiaries; and 40 (B) family members and caregivers of current and former 41 Medicaid beneficiaries; and 42 (2) are appointed as follows:



1(A) Four (4) members appointed by the administrator2the office.3(B) One (1) member who is not a member of the gene	
3 (B) One (1) member who is not a member of the game	ral
4 assembly, appointed by the president pro tempore of	
5 senate.	
6 (C) One (1) member who is not a member of the gene	ral
7 assembly, appointed by the minority leader of the sena	
8 (D) One (1) member who is not a member of the gene	
9 assembly, appointed by the speaker of the house.	
10 (E) One (1) member who is not a member of the gene	ral
11 assembly, appointed by the minority leader of the hous	
12 (b) The administrator of the office shall appoint the chair of	
13 commission from among the members of the commission a	
14 serves at the pleasure of the administrator.	
15 Sec. 4. (a) Except as provided in subsection (b), and subject	t to
16 subsection (c), an appointment to the commission is for a four	
17 year term that expires as follows:	
18 (1) For a member appointed under section 3(a)(2)(A) of t	his
19 chapter, December 31, 2027, and every fourth year thereaft	
20 (2) For a member appointed under section 3(a)(2)(B) throu	
21 3(a)(2)(E) of this chapter, December 31, 2029, and even	0
22 fourth year thereafter.	•
23 (b) A member described in subsection (a)(2) who is appointed	l to
24 the commission in 2025 serves until the member's term expires	on
25 December 31, 2029.	
26 (c) A member of the commission:	
27 (1) serves at the pleasure of the appointing authority w	ho
28 appointed the member to the commission; and	
29 (2) serves until the member's successor is designated.	
30 (d) A vacancy on the commission shall be filled by	
31 appointing authority of the member whose position on	the
32 commission is vacant. An individual appointed to fill a vacan	ncy
33 serves for the unexpired term of the individual's predecessor.	
34 Sec. 5. The office shall provide staff support to the commissi	on.
35 Sec. 6. The commission shall:	
36 (1) meet at least four (4) times each year, with one (1) meet	ing
37 held in each calendar quarter; and	
38 (2) hold special meetings at the request of the commission	or
39 the secretary.	
40 Sec. 7. (a) Each member of the commission who is not a st	
41 employee is entitled to the minimum salary per diem provided	·
42 IC 4-10-11-2.1(b). The member is also entitled to reimbursem	ent



1 for mileage, traveling expenses as provided under IC 4-13-1-4, and 2 other expenses actually incurred in connection with the member's 3 duties as provided in the state policies and procedures established 4 by the Indiana department of administration and approved by the 5 budget agency. 6 (b) Each member of the commission who is a state employee is 7 entitled to reimbursement for traveling expenses as provided under 8 IC 4-13-1-4 and other expenses actually incurred in connection 9 with the member's duties as provided in the state policies and 10 procedures established by the Indiana department of 11 administration and approved by the budget agency. 12 (c) Expenses paid under subsections (a) and (b) shall be paid 13 from appropriations made to the family and social services 14 administration. 15 SECTION 12. IC 12-17.2-3.5-6 IS REPEALED [EFFECTIVE JULY 16 1, 2025]. Sec. 6. (a) A provider who is an individual shall have an 17 intradermal tuberculosis test before the provider is eligible for a 18 voucher payment. 19 (b) A provider shall assure that an individual who is at least 20 eighteen (18) years of age and: 21 (1) who, if the provider operates a child care program in the 22 provider's home, resides with the provider; or 23 (2) who: 24 (A) is employed; or 25 (B) volunteers; 26 as a caregiver at the facility where the provider operates a child 27 care program; 28 has an intradermal tuberculosis test before the individual resides with 29 the provider or is employed or allowed to volunteer as a caregiver. 30 (c) A provider shall maintain documentation of an annual health 31 assessment by a physician reflecting the results of symptom screening 32 for tuberculosis for: 33 (1) the provider, if the provider is an individual; and 34 (2) an individual described in subsection (b); 35 who has a history of latent or active tuberculosis. (d) A provider shall provide the results of the tests and screening 36 37 required under this section to the division upon request. 38 SECTION 13. IC 12-17.2-3.5-8, AS AMENDED BY P.L.92-2024, 39 SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 40 JULY 1, 2025]: Sec. 8. (a) At least one (1) adult individual who 41 maintains certification in a course of pediatric cardiopulmonary 42 resuscitation applicable to all age groups of children cared for by a



1	provider shall be present at all times when a child is in the care of the
2	provider.
3	(b) The following apply to an individual who is employed or
4	volunteers as a caregiver at a facility where a provider operates a child
5	care program:
6	(1) The individual shall maintain current certification in pediatric
7	first aid applicable to all age groups of children cared for by the
8	provider.
9	(2) If the individual is:
10	(A) at least eighteen (18) years of age, the individual may act
11	as a caregiver without supervision of another caregiver; or
12	(B) less than eighteen (18) years of age, the individual may act
12	as a caregiver only if the individual:
14	(i) is at least fourteen (14) years of age; and
15	(ii) is, at all times when child care is provided, directly
16	supervised by a caregiver who is at least eighteen (18) years
17	of age.
18	(3) Before beginning employment or volunteer duties, the
19	individual must receive a formal orientation to the facility and the
20	child care program.
20	(4) Beginning July 1, 2015, unless the provider is a parent,
21	stepparent, guardian, custodian, or other relative to each child in
22	the care of the provider, the individual annually must receive at
23 24	least twelve (12) hours of continuing education approved by the
24	division and related to the age appropriate educational
23 26	development, care, and safety of children. The hours of
20 27	
27	continuing education required by this subdivision may include the
28 29	training described in this chapter concerning child abuse
29 30	detection and prevention, first aid, cardiopulmonary resuscitation,
30 31	and safe sleeping practices.
31	(5) Not more than three (3) months after the individual begins
	employment or volunteer duties, the individual must receive
33	training approved by the division concerning child abuse
34	detection and prevention.
35	(6) Not more than ninety (90) days after the individual begins
36	employment or volunteer duties, the individual must be
37	trained in pediatric cardiopulmonary resuscitation applicable
38	to all age groups of children cared for by the child care
39 40	provider.
40	(c) A provider shall: (1) maintain at the facility where the provider experts a shild
41	(1) maintain at the facility where the provider operates a child
42	care program documentation of all training and completion of



1 continuing education required by this section; and 2 (2) make the documentation available to the division upon 3 request. 4 SECTION 14. IC 12-17.2-4-2, AS AMENDED BY P.L.246-2023, 5 SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 6 JULY 1, 2025]: Sec. 2. (a) A license may be issued only if a child care 7 center is in compliance with food, health, safety, and sanitation 8 standards as determined by the division under rules adopted by the division under IC 12-17.2-2-4 or in accordance with a variance or 9 10 waiver approved by the division under IC 12-17.2-2-10. (b) A license may be issued only if the child care center is in 11 12 substantial compliance with the fire and life safety rules as determined 13 by the state fire marshal under rules adopted by the division under 14 IC 12-17.2-2-4 or in accordance with a variance or waiver approved by 15 the division under IC 12-17.2-2-10. 16 (c) The division may issue a waiver or variance regarding a 17 determination by the division or the state fire marshal under 18 subsections (a) and (b). 19 (d) At least one (1) adult individual who maintains current 20 certification in a course of **pediatric** cardiopulmonary resuscitation 21 applicable to all age groups of children cared for by the child care 22 center shall be present at all times when a child is in the care of a child 23 care center. Certifications accepted under this subsection must include 24 a live return demonstration of skills. 25 (e) An individual who (1) is employed or (2) volunteers as a 26 caregiver at a child care center: 27 (1) must, not more than ninety (90) days after the individual 28 begins employment or volunteer duties, be trained in pediatric 29 cardiopulmonary resuscitation applicable to all age groups of 30 children cared for by the child care center; and 31 (2) shall maintain current certification in pediatric first aid 32 applicable to all age groups of children cared for by the child care 33 center. 34 SECTION 15. IC 12-17.2-5-18.2, AS AMENDED BY 35 P.L.246-2023, SECTION 6, IS AMENDED TO READ AS FOLLOWS 36 [EFFECTIVE JULY 1, 2025]: Sec. 18.2. (a) At least one (1) adult 37 individual who maintains current certification in a course of pediatric 38 cardiopulmonary resuscitation applicable to all age groups of children 39 cared for by the child care home shall be present at all times when a 40 child is in the care of a child care home. Certifications accepted under 41

this subsection must include a live return demonstration of skills.(b) An individual who (1) is employed or (2) volunteers as a

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1	caregiver at a child care home:
2	(1) must, not more than ninety (90) days after the individual
3	begins employment or volunteer duties, be trained in pediatric
4	cardiopulmonary resuscitation applicable to all age groups of
5	children cared for by the child care home; and
6	(2) shall maintain current certification in pediatric first aid
7	applicable to all age groups of children cared for by the child care
8	home.
9	SECTION 16. IC 12-17.2-6-7.5, AS AMENDED BY P.L.246-2023,
10	SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
11	JULY 1, 2025]: Sec. 7.5. (a) At least one (1) adult individual who
12	maintains current certification in a course of pediatric
13	cardiopulmonary resuscitation applicable to all age groups of children
14	cared for by the child care ministry shall be present at all times when
15	a child is in the care of a child care ministry. Certifications accepted
16	under this subsection must include a live return demonstration of skills.
17	(b) An individual who (1) is employed or (2) volunteers as a
18	caregiver at a child care ministry:
19	(1) must, not more than ninety (90) days after the individual
20	begins employment or volunteer duties, be trained in pediatric
21	cardiopulmonary resuscitation applicable to all age groups of
22	children cared for by the child care ministry; and
23	(2) shall maintain current certification in pediatric first aid
24	applicable to all age groups of children cared for by the child care
25	ministry.
26	SECTION 17. IC 12-21-4-3, AS AMENDED BY P.L.207-2021,
27	SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
28	JULY 1, 2025]: Sec. 3. The council consists of the following
29	twenty-nine (29) members, not less than fifty percent (50%) of whom
30	must be individuals who are not state employees or providers of mental
31	health services:
32	(1) The director.
33	(2) The secretary of education or the secretary's designee.
34	(3) The director of the office of Medicaid policy and planning, or
35	the secretary's designee.
36	(4) The director of the bureau of rehabilitation services or the
37	director's designee.
38	(5) The executive director of the Indiana housing and community
39	development authority created by IC 5-20-1-3 or the executive
40	director's designee.
41	(6) The director of the criminal justice institute or the director's
42	designee.



1	(7) The director of the department of child services or the
2	director's designee.
3	(8) Twenty-two (22) individuals at least two (2) of whom are
4	community mental health center chief executive officers or a chief
5	executive officer's designee, who:
6	(A) are appointed by the secretary;
7	(B) have a recognized knowledge of or interest in the
8	programs administered by the division; including
9	representatives of parents of children with serious emotional
10	disturbances;
11	(C) include:
12	(i) at least two (2) community mental health center chief
13	executive officers or designees of community mental
14	health center chief executive officers;
15	(ii) at least one (1) individual who has a serious mental
16	illness and is receiving, or has received, mental health
17	services;
18	(iii) at least one (1) individual with personal or family
19	experience with mental illness;
20	(iv) at least one (1) individual representing a public
21	entity concerned with the need for, and the planning,
22	operation, funding, and use of, mental health services
23	and related support services;
24	(v) at least one (1) individual representing a private
25	entity concerned with the need for, and the planning,
26	operation, funding, and use of, mental health services
27	and related support services; and
28	(vi) parents of children with serious emotional
29	disturbances, in a sufficiently representative number in
30	relation to the number of other members of the council;
31	(C) (D) are appointed for a term of four (4) years; and
32	(D) (E) serve until a successor is appointed.
33	SECTION 18. IC 12-21-4-8 IS REPEALED [EFFECTIVE JULY 1,
34	2025]. Sec. 8. (a) This section applies to a member of the council who
35	is appointed under section 3(8) of this chapter.
36	(b) Notwithstanding section 3(8)(C) of this chapter, for the
37	appointments made in 2012, eleven (11) members shall be appointed
38	for a term of four (4) years, and eleven (11) members shall be
39	appointed for a term of three (3) years.

COMMITTEE REPORT

Mr. President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 486, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS and be reassigned to the Senate Committee on Appropriations.

(Reference is to SB 486 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 11, Nays 0

