

HB1001 STATE BUDGET (THOMPSON J) Appropriates money for capital expenditures, the operation of the state, K-12 and higher education, the delivery of Medicaid and other services, and various other distributions and purposes. Requires a researcher to execute a data sharing agreement that is approved by the management performance hub (MPH) to receive access to confidential records. Provides that the auditor of state is officially known as the state comptroller. Provides that, after June 30, 2023, the auditor of state shall use the title "state comptroller" in conducting state business, in all contracts, on business cards, on stationery, and with other means of communication as necessary. Provides that the change in title does not invalidate any documents or transactions conducted in the name of the auditor of state. Requires the legislative services agency, under the direction of the code revision commission, to prepare legislation for introduction in the 2024 regular session of the general assembly to make appropriate amendments to the Indiana Code to change references from the "auditor of state" to the "state comptroller" and to make any other necessary implementation changes. Establishes the opioid settlement fund into which funds received from opioid litigation settlements must be deposited. Allows the budget committee to submit the budget report and budget bill or bills to the governor on or before the second Monday of January, or the third Monday of January in the year in which a gubernatorial election is held (instead of before that date). Provides that each taxing unit and soil and water conservation district shall be charged an amount equal to 50% of the actual direct and indirect cost of performing an examination for certain individuals engaged in making examinations or investigations. Allows the Indiana economic development corporation (corporation) to certify an applicable tax credit that exceeds the maximum allowable amount after review by the budget committee. Provides that a taxpayer is entitled to a refund of a research expense tax credit if the taxpayer meets certain conditions. Provides the corporation with discretion to refund unused amounts of certain credits. Defines "core public health services" for purposes of public health laws. Provides a process by which a county or a health and hospital corporation may elect to establish a maximum permissible ad valorem health services property tax levy. Provides that a new city health department cannot be established after December 31, 2022, but allows current city health departments to continue to operate. Requires each local board of health to establish a local public health services fund to receive state funding from the local public health fund. Provides a method of allocation of state funding to local boards of health. Allows certain members of the public employees' retirement fund or Indiana state teachers' retirement fund to file an election to begin receiving retirement benefits while holding a position. Changes the state police pre-1987 benefit and supplemental pension benefit calculation from being based on the sixth year of service to the fourth year of service. Repeals the public mass transportation fund. Repeals the financial responsibility compliance verification fund. Changes the number of years of service on which the salary matrix for state police employees is based to 15 years (instead of 20 years). Requires the department of correction to deposit the amount appropriated for the county misdemeanor fund by a county's multiplier. Deletes minimum allocation amounts for purposes of the county misdemeanor fund. Provides that a part of state user fees shall be deposited in the Indiana secured school fund. Repeals the distribution schedule for appropriations made for certain child development programs. Deletes reimbursement rate parameters for reimbursement of managed care organizations under the healthy Indiana plan. Extends the sunset of the collection of hospital assessment fees and health facility quality assessment fees from June 30, 2023, to June 30, 2025. Increases the total number of adult learner students at the Excel Centers for Adult Learners for whom the school may receive state funding. Establishes early literacy achievement grants and requires that the grants be used to pay cash stipends to certain teachers, instructional coaches, and other staff employed in the classroom. Requires each public school to provide curricular materials at no cost to each student enrolled in the public school. Provides that the parent of a student or an emancipated minor who attends an accredited nonpublic school and who meets financial eligibility requirements may request reimbursement of fees charged for curricular materials. Establishes the curricular materials fund to provide state advancements for costs incurred by public schools in providing curricular materials to students at no cost and reimbursements to parents of certain students and emancipated minors who attend an accredited nonpublic school. Appropriates from the state general fund to the office of the secretary of family and social services an amount sufficient to meet maintenance of effort requirements in the state budget for the biennium beginning July 1, 2023, and ending June 30, 2025. Establishes the Indiana education scholarship account donation fund to accept donations for administration of the Indiana education scholarship account program. Repeals the special education fund. Establishes the outcomes based formula fund from which the commission for higher education may annually request distributions from the outcomes based formula fund for each state educational institution. Provides that state user fees remaining after required distributions shall be distributed to the state general fund (instead of the court technology fund). Requires the auditor of state to deposit distributions of pro bono legal services fees received from the: (1) clerk of a circuit court; (2) clerk of a city or town court; or (3) Marion County small claims court; in the pro bono legal services fund. Removes the prohibition on the use of money in the public defense fund for reimbursement of misdemeanor cases. Provides for the calculation of salary increases for the governor and state elected officials. Provides for the calculation of salary increases for court officers. Provides that \$10,000,000 of unexpended and unencumbered amounts appropriated to the department of education in the state fiscal year ending before July 1, 2023, do not revert to the state general fund but remain available to fund matching grants from the Lilly Endowment for early literacy improvements. Requires the auditor of state to transfer \$80,000,000 from the tobacco master settlement agreement fund to the state construction fund on July 1, 2023. Provides that unexpended and unencumbered amounts appropriated from the federal economic stimulus fund in the state fiscal year ending before July 1, 2023, do not revert to the state general fund. Makes conforming changes.

Current Status: 1/12/2023 - Referred to House Ways and Means

Recent Status: 1/12/2023 - First Reading
1/12/2023 - Coauthored by Representatives Porter and Cherry

State Bill Page: [HB1001](#)

HB1003 HEALTH MATTERS (SNOW C) Allows a credit against an employer's state tax liability if the employer has adopted a health reimbursement arrangement in lieu of a traditional employer provided health insurance plan. Provides that the amount of the credit depends on the number of employees employed by the employer. Provides that employers that claim and are allowed the credit must report certain information to the department of insurance. Provides that the amount of credits granted may not exceed \$10,000,000 in a taxable year. Provides that the credit may be carried over for 10 years, but may not be carried back. Prohibits a health provider facility from entering into a health provider contract with a health carrier if the reimbursement under the provider contract would result in the health provider facility being reimbursed at greater than 10% for a service or item of any other health provider contract the health provider facility has entered into with another health carrier. Requires a health plan to provide a peer to peer conversation if the health plan makes an adverse determination concerning a health care provider's request for prior authorization of a health care service. Prohibits a health plan, after December 31, 2024, from requiring a health provider to obtain prior authorization for a particular type of health care service if the health provider meets specified requirements. Specifies requirements a health plan must meet in order to rescind a health provider's exemption from prior authorization. Requires the insurance commissioner to adopt rules concerning the prior authorization exemption and rescission.

Current Status: 2/1/2023 - House Insurance, (Bill Scheduled for Hearing); **Time & Location:** 8:30 AM, Rm. 156-A

Recent Status: 1/23/2023 - added as coauthor Representative Andrade M
1/12/2023 - Referred to House Insurance

State Bill Page: [HB1003](#)

HB1004 HEALTH CARE MATTERS (SCHAIBLEY D) Provides a credit against state tax liability to a physician who has an ownership interest in a physician practice and meets other eligibility criteria. Provides that the credit amount for a particular taxable year is \$10,000. Provides that a physician may not claim the credit in more than three taxable years and that the credit is nonrefundable. Allows a credit to be carried forward for not more than 10 years. Sets forth requirements that a hospital or a health carrier must meet in order to employ a physician. Exempts certain specialties from the requirements. Provides that a bill for health care services provided by a provider in an office setting: (1) must not be submitted on an institutional provider form; and (2) must be submitted on an individual provider form. Provides that an insurer, health maintenance organization, employer, or other person responsible for the payment of the cost of health care services provided by a provider in an office setting is not required to accept a bill for the health care services that is submitted on an institutional provider form. Prohibits certain nonprofit hospitals from entering into physician noncompete agreements. Specifies provisions that may not be included in a health provider contract. Beginning in 2025, requires a nonprofit hospital operating in Indiana to annually submit to the department of insurance (department): (1) a certified statement of, and supporting documentation to demonstrate: (A) the average price charged by the hospital for each health care service provided to patients; and (B) the hospital's total patient service revenue generated from all health care services provided by the hospital; and (2) the federal Medicare reimbursement rate for the health care service; in the preceding calendar year. Provides that, if a nonprofit hospital charged amounts for health care services that exceeded 260% of the federal Medicare reimbursement rate, the department shall assess a penalty against the hospital. Specifies the calculation of the penalty amount. Provides that a nonprofit hospital that is assessed a penalty may petition the department for reconsideration of the assessment determination based on a clerical, mathematical, or typographical error in the information submitted. Provides that revenue collected from the penalty shall be deposited in the state general fund and may be used to pay the state's share of the cost of Medicaid services provided under the federal Medicaid program.

Current Status: 1/31/2023 - House Public Health, (Bill Scheduled for Hearing); **Time & Location:** 8:30 AM, House Chamber

Recent Status: 1/26/2023 - removed as coauthor Representative Shackelford
1/23/2023 - added as coauthor Representative Shackelford

State Bill Page: [HB1004](#)

HB1011 END OF LIFE OPTIONS (PIERCE M) Allows individuals with a terminal illness who meet certain requirements to make a request to an attending provider for medication that the individual may self-administer to bring about death. Specifies requirements a provider must meet in order to prescribe the medication to a patient. Prohibits an insurer from denying payment of benefits under a life insurance policy based upon a suicide clause in the life insurance policy if the death of the insured individual is the result of medical aid in dying. Establishes a Level 1 felony if a person: (1) without authorization of the patient, willfully alters, forges, conceals, or destroys a request for medication or a rescission of a request for medication with the intent or effect of causing the individual's death; or (2) knowingly or intentionally coerces or exerts undue influence on an individual to request medication to bring about death or to destroy a rescission of a request for medication to bring about death. Establishes a Class A misdemeanor if a person, without authorization of the patient, willfully alters, forges, conceals, or destroys a request for medication or a rescission of a

request for medication in order to affect a health care decision by the individual. Establishes certain criminal and civil immunity for health care providers.

Current Status: 1/9/2023 - Referred to House Public Health

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Matt Pierce

State Bill Page: [HB1011](#)

HB1013 INDIANA DEPARTMENT OF HEALTH (SNOW C) Changes references from the state department of health to the Indiana department of health. Provides directions for publication of affected provisions. Makes technical corrections. (The introduced version of this bill was prepared by the code revision commission.)

Current Status: 1/24/2023 - Referred to Senate

Recent Status: 1/23/2023 - Senate sponsor: Senator Freeman

1/23/2023 - Third reading passed; Roll Call 14: yeas 98, nays 0

State Bill Page: [HB1013](#)

HB1018 MEDICAID AND MEDICAL EQUIPMENT (OLTHOFF J) Removes medical equipment and supplies from the list of items or services for which the office of the secretary of family and services (office) may seek competitive bids for the Medicaid program. Specifies that the office, managed care organizations, subcontractors, and third party administrators must reimburse: (1) durable medical equipment; (2) complex rehabilitation technology; and (3) supplies; at a rate that is at least 100% of the rate in specified fee schedules. Requires the office to develop and implement a tool to assist in the determination of capped rental payments for certain items. Adds a member to the Medicaid advisory committee.

Current Status: 1/12/2023 - added as coauthor Representative Slager

Recent Status: 1/9/2023 - Referred to House Public Health

1/9/2023 - First Reading

State Bill Page: [HB1018](#)

HB1039 MEDICAL AND ADULT USE CANNABIS (TESHKA J) After marijuana is removed as a federal schedule I controlled substance, permits the use of cannabis by: (1) a person at least 21 years of age; and (2) a person with a serious medical condition as determined by the person's physician. Establishes the adult use cannabis excise tax, and requires a retailer to transfer the tax to the department of state revenue for deposit in the state general fund. Exempts veterans from payment of the sales tax on medical or adult use cannabis. Establishes a cannabis program to permit the cultivation, processing, testing, transportation, and sale of cannabis by holders of a valid permit. Establishes the Indiana cannabis commission (ICC) as a state agency to oversee, implement, and enforce the program, and establishes the ICC advisory committee to review the effectiveness of the program. Requires that permit holders take steps to prevent diversion of cannabis to unauthorized persons. Requires that cannabis and cannabis products be properly labeled, placed in child resistant packaging, and tested by an independent testing laboratory before being made available for purchase. Prohibits packaging cannabis in a manner that is appealing to children. Authorizes research on cannabis in accordance with rules set forth by the ICC. Establishes a procedure for the expungement of a cannabis related conviction if the act constituting the conviction becomes legal.

Makes conforming amendments. **Current Status:** 1/9/2023 - Referred to House Public Health

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Coauthored by Representatives Bartels, Miller D, Moed

State Bill Page: [HB1039](#)

HB1058 REMAINS OF A MISCARRIED FETUS (FRYE R) Provides that a health care facility may transfer the remains of a miscarried fetus to a nonprofit organization that provides funerals, cremations, or burials for a miscarried fetus in certain circumstances.

Current Status: 1/9/2023 - Referred to House Public Health

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Randall Frye

State Bill Page: [HB1058](#)

HB1065 CANNABIS REGULATION (ERRINGTON S) Establishes the cannabis compliance advisory committee to review and evaluate certain rules, laws, and programs. Establishes the cannabis compliance commission to regulate all forms of legal cannabis in Indiana, including hemp and low THC hemp extract.

Current Status: 1/12/2023 - added as coauthor Representative Summers

Recent Status: 1/9/2023 - Referred to House Agriculture and Rural Development

1/9/2023 - First Reading

State Bill Page: [HB1065](#)

HB1071 IMPLICIT BIAS CONTINUING EDUCATION (SHACKLEFORD R) Requires the medical licensing board of Indiana to adopt rules requiring a physician and a physician assistant who apply for a license or renewal to complete continuing education addressing the topic of implicit bias. Requires the Indiana state board of nursing to adopt rules requiring a nurse who applies for a license or renewal to complete continuing education addressing the topic of implicit bias. Establishes certain requirements for an implicit bias continuing education course. Provides that the Indiana professional licensing agency must maintain on the agency's website a schedule of or link to implicit bias continuing education courses that are available.

Current Status: 1/9/2023 - Referred to House Public Health

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Robin Shackelford

State Bill Page: [HB1071](#)

HB1091 CONTINUOUS ELIGIBILITY UNDER MEDICAID AND CHIP (VERMILION A) Changes the requirements for submitting eligibility information for an individual who is: (1) less than 19 years of age; and (2) a recipient of either the Medicaid program or the children's health insurance program (CHIP) (programs). (Current law concerning the submission of eligibility information in the programs applies to individuals less than three years of age.)

Current Status: 1/31/2023 - Senate sponsor: Senator Brown L

Recent Status: 1/31/2023 - Third reading passed; Roll Call 50: yeas 97, nays 0

1/31/2023 - House Bills on Third Reading

State Bill Page: [HB1091](#)

HB1109 COLLABORATIVE CARE DISCLOSURES (ZENT D) Provides that if an advanced practice registered nurse, a certified direct entry midwife, or a physician assistant is under a collaborative agreement with a licensed practitioner or physician, the advanced practice registered nurse, certified direct entry midwife, or physician assistant must display or provide certain information in an office based setting, to the patient, and, if applicable, on a website.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading

1/10/2023 - Authored By Dennis Zent

State Bill Page: [HB1109](#)

HB1118 PROHIBITED SERVICES RELATING TO CARE OF MINORS (SWEET L) Prohibits specified health care professionals from: (1) performing, or causing to be performed, certain medical procedures on a minor; or (2) subjecting a minor to certain activities that purposely attempt to change, reinforce, or affirm a minor's perception of the minor's own sexual attraction or sexual behavior, or attempt to change, reinforce, or affirm a minor's gender identity when the identity is inconsistent with the minor's biological sex.

Current Status: 1/12/2023 - added as coauthor Representative Payne Z

Recent Status: 1/10/2023 - Referred to House Public Health

1/10/2023 - First Reading

State Bill Page: [HB1118](#)

HB1129 HEALTH FACILITY STAFF RATIOS (CASH B) Provides that each health facility and residential care facility shall post on the facility's public website the minimum ratio of direct patient care staff to residents in the facility. Requires that the information must specify the minimum ratio for each employee classification that provides direct patient care. Provides that the website address to access the facility's information must be provided annually and upon admission to the facility to the resident, resident's guardian, and resident's health care representative. Allows the Indiana department of health to receive the information.

Current Status: 1/24/2023 - added as coauthor Representative Fleming

Recent Status: 1/19/2023 - added as coauthors Representatives Schaibley and Genda M

1/10/2023 - Referred to House Public Health

State Bill Page: [HB1129](#)

HB1139 CONSENT FOR PELVIC, PROSTATE, AND RECTAL EXAMS (JACKSON C) Prohibits health practitioners and other specified individuals from performing pelvic, prostate, or rectal examinations on an anesthetized or unconscious patient except in specified circumstances.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading

1/10/2023 - Coauthored by Representative Shackelford

State Bill Page: [HB1139](#)

HB1158 BREAKTHROUGH THERAPIES (MOED J) Provides that a drug, biological product, or medical device that has been designated as a breakthrough therapy under federal law may be made available to a qualified patient and offered by a physician as a part of the patient's medical treatment. Specifies that a civil or criminal cause of action is not created against a manufacturer or health care provider for any harm to a qualified patient resulting from use of an investigational drug, biological product, or device.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading
1/10/2023 - Authored By Justin Moed

State Bill Page: [HB1158](#)

HB1179 PROFESSIONAL LICENSING (CLERE E) Allows specified professional licensing boards to conduct meetings using electronic communications if the requirements for an electronic public meeting are met. Allows the reinstatement of a professional license that was retired, inactive, or surrendered (inactive) if the applicant meets the requirements for a delinquent or lapsed license. Provides that the reinstatement law applies to all licenses that were inactive for more than three years. Requires, for purposes of the license reinstatement law, that each board make available a list of standards that require a personal appearance before the board. Adds nonhealth professions to the professions that an out-of-state applicant may use to apply for license under the general reciprocity law. Provides that if a board does not act on an application within one year for an applicant who holds a provisional license or provisional certificate under the reciprocity law, the professional licensing agency shall issue the applicant a license or certificate.

Current Status: 2/7/2023 - House Government and Regulatory Reform, (Bill Scheduled for Hearing);

Time & Location: 10:30 AM, Rm. 156-C

Recent Status: 1/31/2023 - House Government and Regulatory Reform, (Bill Scheduled for Hearing); **Time & Location:** 10:30 AM, Rm. 156-C

1/24/2023 - House Government and Regulatory Reform, (Bill Scheduled for Hearing); **Time & Location:** 10:30 AM, Rm. 156-C

State Bill Page: [HB1179](#)

HB1181 MEDICAID MATTERS (CLERE E) Allows a provider that has entered into a contract with a managed care organization, after exhausting any internal procedures of the managed care organization for provider grievances and appeals, to request an administrative appeal within the office of Medicaid policy and planning of the managed care organization's action in denying or reducing reimbursement for claims for covered services provided to an applicant, pending applicant, conditionally eligible individual, or member. Establishes a procedure for an administrative appeal, including a hearing before an administrative law judge that could be followed by agency review and then by judicial review. Prohibits a provision in a contract between a provider and a managed care organization that would negate or restrict the right of a provider to an administrative appeal and provides that such a contract provision is void and unenforceable. Repeals a provision under which Medicaid law is controlling when Medicaid law conflicts with insurance law. Provides that if the office of the secretary of family and social services (office) or a contractor of the office fails to pay or denies a clean claim for any eligible Medicaid service within certain time limits due to the office or contractor incorrectly processing the clean claim because of errors attributable to the internal system of an insurer or managed care organization, the office or contractor may not assert that the provider failed to meet the timely filing requirements for the claim. Adds members to the Medicaid advisory committee (committee). Allows a member of the committee whose position was eliminated to continue to serve until the member's term expires. Establishes co-chairs for the committee. Requires the office to prepare a report that describes every type of report that must be prepared by a Medicaid contractor or managed care entity and submitted to the office or the office of Medicaid policy and planning. Specifies the information that must be contained in the report. Requires the office to submit the report to the committee and the general assembly. Requires the advisory committee to hold public hearings on the report. Makes technical changes.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading
1/10/2023 - Authored By Edward Clere

State Bill Page: [HB1181](#)

HB1182 PHARMACY MATTERS (CLERE E) Removes the authority of the commissioner's designated public health authority to issue a standing order, prescription, or protocol to allow certain health practitioners to administer or dispense an immunization or a pharmacist a smoking cessation product. Requires the state health commissioner to issue a standing order, prescription, or protocol (standing order) that allows a pharmacist to treat or screen, test, administer, or dispense for certain health conditions. Allows a pharmacist to order tests that are waived under the federal Clinical Laboratory Improvement Amendments (CLIA) or established under a standing order. Allows a pharmacy intern or a pharmacy technician to perform a test that is: (1) delegated by a supervising pharmacist; and (2) a waived test under CLIA. Allows a pharmacy technician, who is certified to perform any activity delegated by a supervising pharmacist or pharmacist owner if the activities: (1) do not require the clinical judgment of a pharmacist; (2) are not prohibited by a rule adopted by the Indiana board of pharmacy; or (3) are not an activity required by law to be performed only by a

pharmacist. Provides that a health carrier may not deny reimbursement for services and procedures that are performed by a pharmacist and that are within the scope of the pharmacist's license if the same services and procedures would be covered if performed by a physician, an advanced practice registered nurse, or a physician assistant. Provides civil and criminal immunity for a pharmacist related to filling a prescription for a drug, medicine, or other prescribed substance. Establishes exceptions.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading
1/10/2023 - Authored By Edward Clere

State Bill Page: [HB1182](#)

HB1220 GENDER TRANSITION PROCEDURES FOR MINORS (DAVIS M) Prohibits a physician or other practitioner from knowingly providing gender transition procedures to an individual who is less than 18 years of age (minor) that are intended to alter the gender of the minor or delay puberty. Provides for certain medical exceptions. Establishes civil enforcement actions.

Current Status: 1/10/2023 - Referred to House Public Health

Recent Status: 1/10/2023 - First Reading
1/10/2023 - Coauthored by Representatives DeVon, Teshka, Judy

State Bill Page: [HB1220](#)

HB1224 PHARMACIST CONTRACEPTIVE PRESCRIPTIONS (FLEMING R) Allows pharmacists to prescribe and dispense self administered oral hormonal contraceptives and hormonal contraceptive patches (contraceptives). Establishes requirements for pharmacists who want to prescribe and dispense contraceptives. Requires the Indiana board of pharmacy to adopt rules. Requires health plans to provide coverage for contraceptives and certain services. Establishes an exception for nonprofit religious employers.

Current Status: 1/17/2023 - added as coauthor Representative Errington

Recent Status: 1/10/2023 - Referred to House Public Health
1/10/2023 - First Reading

State Bill Page: [HB1224](#)

HB1231 GENDER TRANSITION PROCEDURES FOR MINORS (LAUER R) Prohibits specified health care professionals from providing gender transition procedures to a minor that are intended to alter the gender of the minor or delay puberty. Provides for certain medical exceptions. Prohibits public funds, Medicaid, or a health carrier from providing reimbursement or coverage for gender transition procedures to a minor. Creates a civil cause of action. Makes conforming changes.

Current Status: 1/19/2023 - added as coauthors Representatives Prescott and Abbott D

Recent Status: 1/10/2023 - Referred to House Public Health
1/10/2023 - First Reading

State Bill Page: [HB1231](#)

HB1248 CANNABIS (JOHNSON B) Establishes a procedure for the lawful production and sale of cannabis in Indiana. Makes conforming amendments. Makes an appropriation.

Current Status: 1/11/2023 - Referred to House Courts and Criminal Code

Recent Status: 1/11/2023 - First Reading
1/11/2023 - Authored By Blake Johnson

State Bill Page: [HB1248](#)

HB1263 MEDICAL MARIJUANA (LUCAS J) Permits the use of medical marijuana by persons with serious medical conditions as determined by their physician. Establishes a medical marijuana program to permit the cultivation, processing, testing, transportation, and dispensing of medical marijuana by holders of a valid permit. Requires the Indiana department of health (state department) to implement and enforce the medical marijuana program. Requires that permit holders undertake steps to prevent diversion of medical marijuana to unauthorized persons. Requires that medical marijuana and medical marijuana products be properly labeled, placed in child resistant packaging, and tested by an independent testing laboratory before being made available for purchase. Prohibits packaging medical marijuana in a manner that is appealing to children. Authorizes research on medical marijuana in accordance with rules set forth by the state department. Prohibits discrimination against medical marijuana users. Prohibits harassment of medical marijuana users by law enforcement officers, and prohibits cooperation with federal law enforcement officials seeking to enforce federal laws that criminalize the use of marijuana authorized in Indiana.

Establishes the medical marijuana oversight board to review appeals and grievances concerning the medical marijuana program. Provides a defense to prosecution for a person who operates a vehicle or motorboat with marijuana or its metabolite in the person's blood under certain conditions that involve medical marijuana. Makes conforming amendments.

Current Status: 1/24/2023 - added as coauthor Representative Hall D

Recent Status: 1/12/2023 - added as coauthor Representative Lindauer
1/11/2023 - Referred to House Public Health

State Bill Page: [HB1263](#)

HB1273 PRESCRIPTION DRUG REBATES AND PRICING (SCHAIBLEY D) Provides that, for individual health insurance coverage, the defined cost sharing for a prescription drug be calculated at the point of sale and based on a price that is reduced by an amount equal to at least 85% of all rebates received by the insurer in connection with the dispensing or administration of the prescription drug. Requires that, for group health insurance coverage, an insurer: (1) pass through to a plan sponsor 100% of all rebates received or estimated to be received by the insurer concerning the dispensing or administration of prescription drugs to the covered individuals of the plan sponsor; (2) provide a plan sponsor, at the time of contracting, the option of calculating defined cost sharing for covered individuals of the plan sponsor at the point of sale based on a price that is reduced by some or all of the rebates received or estimated to be received by the insurer concerning the dispensing or administration of the prescription drug; and (3) disclose specified information to the plan sponsor. Allows the department of insurance to enforce the provisions and impose a civil penalty.

Current Status: 1/19/2023 - added as coauthors Representatives Vermilion A and Barrett

Recent Status: 1/11/2023 - Referred to House Insurance
1/11/2023 - First Reading

State Bill Page: [HB1273](#)

HB1285 IMPLICIT BIAS IN MEDICINE (SUMMERS V) Requires the medical education board to establish an education program for first year medical students that addresses implicit bias in the delivery of health care services to different racial and ethnic minority groups in Indiana.

Current Status: 1/11/2023 - Referred to House Public Health

Recent Status: 1/11/2023 - First Reading
1/11/2023 - Authored By Vanessa Summers

State Bill Page: [HB1285](#)

HB1292 PHYSICIAN NONCOMPETE AGREEMENTS (VANNATTER H) Specifies that the reasonable price of a noncompete agreement buyout may not exceed \$75,000 under the following circumstances: (1) the physician's employer is a hospital system located in Allen County; (2) the physician has completed a minimum of eight years of employment with the hospital system; and (3) the physician practices primary care and specializes in family medicine. **Current Status:** 1/17/2023 - Reassigned to Committee on Employment, Labor and Pensions

Recent Status: 1/11/2023 - Referred to House Public Health
1/11/2023 - First Reading

State Bill Page: [HB1292](#)

HB1297 DECRIMINALIZATION OF MARIJUANA (VANNATTER H) Decriminalizes possession of two ounces or less of marijuana.

Current Status: 1/19/2023 - added as coauthor Representative Cash B

Recent Status: 1/11/2023 - Referred to House Courts and Criminal Code
1/11/2023 - First Reading

State Bill Page: [HB1297](#)

HB1301 CIGARETTE TAXES (VERMILION A) Increases the cigarette tax by \$1 to \$1.995 per pack of regular size cigarettes and makes a corresponding increase for larger cigarettes.

Current Status: 1/11/2023 - Referred to House Public Health

Recent Status: 1/11/2023 - First Reading
1/11/2023 - Authored By Ann Vermilion

State Bill Page: [HB1301](#)

HB1352 TELEHEALTH SERVICES (LEDBETTER C) Provides that the office of Medicaid policy and planning may not require: (1) a provider that is licensed, certified, registered, or authorized with the appropriate state agency or board and exclusively offers telehealth services to maintain a physical address or site in Indiana to be eligible for enrollment as a Medicaid provider; or (2) a telehealth provider group with providers that are licensed, certified, registered, or authorized with the appropriate state agency or board to have an in-state service address to be eligible to enroll as a Medicaid vendor or Medicaid provider group.

Current Status: 1/31/2023 - Senate sponsor: Senator Becker

Recent Status: 1/31/2023 - Third reading passed; Roll Call 61: yeas 98, nays 0

State Bill Page: [HB1352](#)

HB1372 CREDENTIALING FOR MEDICAID SERVICES (KING J) Requires the office of Medicaid policy and planning (office) to prescribe a credentialing application form to be used by: (1) a provider who applies for credentialing by a managed care organization or a contractor of the office (contractor); and (2) a managed care organization or contractor that performs credentialing activities. Requires a managed care organization or contractor to notify a provider concerning: (1) any deficiency in the provider's unclean credentialing application; and (2) the status of the provider's clean credentialing application. Provides that if the managed care organization or contractor fails to issue a credentialing determination within 30 days after receiving a provider's completed credentialing application, the managed care organization or contractor shall provisionally credential the provider if the provider meets certain criteria. Provides that if the managed care organization or contractor fully credentials a provider, then reimbursement payments to the provider shall be paid retroactive to the date on which the initial credentialing application was received and the provider shall be reimbursed at the rates determined by the contract between the provider and the managed care organization or contractor.

Current Status: 1/31/2023 - Referred to Senate

Recent Status: 1/30/2023 - Senate sponsor: Senator Brown L

1/30/2023 - Third reading passed; Roll Call 45: yeas 96, nays 0

State Bill Page: [HB1372](#)

HB1458 DOCTOR SCOPE OF TREATMENT AND DO NOT RESUSCITATE (BARRETT B) Provides that a declarant may include a person for whom a proxy has executed an out of hospital do not resuscitate (DNR) declaration if the person: (1) is at least 18 years of age and is certified as a qualified person; (2) is incapacitated or incompetent; and (3) has no representative who is able and available to execute an out of hospital DNR declaration. Defines "incapacitated" as related to an out of hospital DNR declaration. Defines "proxy" as related to an out of hospital DNR declaration and a physician order for scope of treatment (POST). Provides that a person's proxy may execute an out of hospital DNR declaration if certain conditions are met. Creates a declaration and order form to be used by hospitals if the declarant is incapacitated or incompetent. Allows a qualified person's proxy to complete a POST form if the person is incapable of making health care decisions and no representative is able and available to act. Allows a proxy to revoke a POST form or request alternative treatment. Provides that if alternative treatment is requested, the treating medical provider shall review the POST form with the declarant, the declarant's representative, or the proxy who has priority to act for the declarant. Makes conforming changes.

Current Status: 1/31/2023 - Referred to Senate

Recent Status: 1/30/2023 - added as coauthors Representatives Hatfield and Criswell C

1/30/2023 - Senate sponsor: Senator Johnson

State Bill Page: [HB1458](#)

HB1460 PROFESSIONAL AND OCCUPATIONAL LICENSING (BARRETT B) Provides that the state board of nursing (board) may not require an applicant for a nursing license by endorsement to provide a Social Security number if the applicant can prove that the applicant is in the United States lawfully. Allows a board that regulates a health care provider or a regulated professional under IC 25 to use electronic means of communication to conduct meetings if certain requirements are met. Allows the Indiana department of health (state department) to collect certain information from individuals who provide home health services, are a qualified medication aide, or are a certified nurse aide. Allows the emergency medical services commission (EMS commission) to collect certain information from individuals licensed or certified under the emergency services law. Adds the board of physical therapy, EMS commission, and the state department for purposes of workforce renewal information and an annual report. Establishes time periods for the professional licensing agency (PLA) to post meeting agendas and meeting minutes on the applicable board's website. Requires the PLA to post certain information concerning board vacancies and application forms. Requires that new and renewed licenses with the PLA be submitted electronically, unless a paper application is requested. Requires the PLA to post on its website information about the number of licenses issued and wait times for the licenses. Requires the governor to fill a vacancy on certain occupational boards within 90 days. Allows the affected board to make an appointment to the board if the governor does not make the appointment. Makes various changes to the reciprocity law concerning issuing a license for a health care professional. Allows the board to issue a temporary permit for a registered nurse applicant and a licensed practical nurse applicant. Amends the criteria for certain nursing programs to allow the program to increase enrollment. Requires the state board of health facility administrators to amend certain rules concerning an administrator-in-training (AIT), a health facility administrator (HFA), and a residential care administrator (RCA). Makes conforming changes.

Current Status: 1/17/2023 - Referred to House Employment, Labor and Pensions

Recent Status: 1/17/2023 - First Reading

1/17/2023 - Coauthored by Representatives Manning and Fleming

State Bill Page: [HB1460](#)

HB1513 FSSA MATTERS (BARRETT B) Changes the name of the bureau of developmental disabilities services to the bureau of disabilities services. Removes certain members from the 211 advisory committee. Repeals Medicaid copayment provisions that: (1) require the office of the secretary of family and social services (office) to apply a copayment for certain Medicaid services; (2) require a recipient to make a copayment upon the receipt of services and for a provider not to voluntarily waive a copayment; (3) set forth exemptions from copayment requirements; and (4) require the provider to charge the maximum allowable copayment. Allows for an enrollment fee, a premium, or a similar charge to be imposed as a condition of an individual's eligibility for the healthy Indiana plan. Removes a prohibition on the office from: (1) requiring certain providers to submit non-Medicaid revenue information in the provider's annual historical financial report; and (2) only requesting balance sheets from certain providers that apply directly to the provider's facility. Allows the office to implement an end of therapy reclassification methodology in a successor of the RUG-IV, 48-Group model for payment of nursing facility services.

Current Status: 1/31/2023 - Referred to House Ways and Means

Recent Status: 1/31/2023 - Committee Report amend do pass, adopted

1/31/2023 - House Committee recommends passage, as amended Yeas: 13; Nays: 0

State Bill Page: [HB1513](#)

HB1525 PROHIBITED HEALTH CARE FOR MINORS (BORDERS B) Prohibits specified health care professionals from: (1) performing certain medical procedures on a minor; or (2) prescribing, administering, or furnishing certain drugs to a minor; that purposely attempt to change, reinforce, or affirm a minor's perception of the minor's own sexual attraction or sexual behavior, or attempt to change, reinforce, or affirm a minor's gender identity when the identity is inconsistent with the minor's biological sex.

Current Status: 1/19/2023 - Referred to House Public Health

Recent Status: 1/19/2023 - First Reading

1/19/2023 - Authored By Bruce Borders

State Bill Page: [HB1525](#)

HB1568 PRESCRIPTION FOR HORMONAL CONTRACEPTIVES (ROWRAY E) Allows pharmacists who meet certain requirements to prescribe and dispense hormonal contraceptive patches and self-administered oral hormonal contraceptives (contraceptives). Establishes requirements for pharmacists who elect to prescribe and dispense contraceptives. Requires the Indiana board of pharmacy (board) to adopt rules. Provides that a pharmacist is not required to prescribe a contraceptive to a woman if the pharmacist believes the contraceptive is contraindicated or objects on ethical, moral, or religious grounds.

Current Status: 1/19/2023 - Referred to House Public Health

Recent Status: 1/19/2023 - First Reading

1/19/2023 - Coauthored by Representatives Negele, Vermilion, Fleming

State Bill Page: [HB1568](#)

HB1573 REPAYMENT OF MEDICAL SCHOOL LOANS (HARRIS JR. E) Requires the Indiana department of health (department) to establish and administer a medical school loan forgiveness pilot program (program) for the purpose of attracting physicians to practice medicine in Indiana. Establishes the medical school loan forgiveness fund (fund). Sets forth criteria for the program. Requires the department to, not later than November 1, 2024, and each November 1 thereafter, prepare and submit a report to the general assembly regarding the program. Makes an appropriation to the fund.

Current Status: 1/24/2023 - added as coauthor Representative Porter

Recent Status: 1/19/2023 - Referred to House Ways and Means

1/19/2023 - First Reading

State Bill Page: [HB1573](#)

HB1589 MALPRACTICE REGARDING GENDER THERAPEUTICS (MCGUIRE J) Allows a claimant to bring a medical malpractice claim regarding gender transition treatment within 15 years after the individual becomes 21 years of age. **Current Status:** 1/19/2023 - Referred to House Public Health

Recent Status: 1/19/2023 - First Reading

1/19/2023 - Authored By Julie McGuire

State Bill Page: [HB1589](#)

HB1602 MEDICAID REIMBURSEMENT RATES (SLAGER H) Specifies Medicaid reimbursement rates for specified services in the Medicaid risk based managed care program and the Medicaid fee for service program.

Current Status: 1/30/2023 - added as coauthor Representative Clere

Recent Status: 1/19/2023 - Referred to House Ways and Means

State Bill Page: [HB1602](#)

HB1610 EXEMPTION FROM PRIOR AUTHORIZATION REQUIREMENTS (FLEMING R) Amends the law concerning the prior authorization of health care services by a health plan (which includes a policy of accident and sickness insurance, a health maintenance organization contract, and the Medicaid risk based managed care program). Provides that: (1) if a health plan, during a six month evaluation period, approves at least 90% of a health care provider's requests for prior authorization for a particular type of health care service, the health plan may not require the health care provider to obtain prior authorization for that type of health care service for the entire duration of an exemption period of six calendar months immediately following the evaluation period; and (2) at the conclusion of the initial exemption period, the health plan shall continue granting consecutive exemption periods of six months to the health care provider unless the health plan rescinds the exemption. Provides that a health plan may rescind a health care provider's exemption only on the basis of a determination by a physician that, in at least five and not more than 20 cases randomly selected for review, less than 90% of the health care services provided by the health care provider met the health plan's medical necessity criteria. Authorizes a health care provider that is notified of the rescission of its exemption to initiate a review of the rescission by an independent review panel. Requires the independent review panel to determine whether at least 90% of the health care services provided by the health care provider met the health plan's medical necessity criteria. Requires a health plan to restore the health care provider's exemption if the independent review panel's determination is in favor of the health care provider. Requires the insurance commissioner to adopt rules. **Current Status:** 1/19/2023 - Referred to House Insurance

Recent Status: 1/19/2023 - First Reading

1/19/2023 - Coauthored by Representatives Zent, Vermilion, Barrett

State Bill Page: [HB1610](#)

HB1615 LEGALIZATION OF CANNABIS (PAYNE Z) Legalizes the sale and use of cannabis by a person at least 18 years of age. Requires the Indiana department of health to establish a program to issue a medical cannabis identification card to a patient whose physician has recommended cannabis to treat a medical condition. Permits the sale of cannabis to a person less than 18 years of age if the person has been issued a medical cannabis identification card, and exempts purchases by a medical cannabis cardholder from sales tax. Makes conforming amendments.

Current Status: 1/19/2023 - Referred to House Public Health

Recent Status: 1/19/2023 - First Reading

1/19/2023 - Coauthored by Representatives VanNatter, Pierce K, Miller K

State Bill Page: [HB1615](#)

SB4 PUBLIC HEALTH COMMISSION (CHARBONNEAU E) Defines "core public health services" for purposes of public health laws. Adds members to the executive board of the Indiana department of health (state department). Requires the state department to provide district or regional services to local health departments. Allows the state department to issue guidance to local health departments. Requires the state department to make annual local health department reports available to the public. Changes the qualification requirements for a local health officer and requires certain training. Requires the state department to identify state level metrics and county level metrics and requires certain local health departments to report to the state department activities and metrics on the delivery of core public health services. Requires the state department to annually report on the metrics to the budget committee and publish information concerning the metrics on the Internet. Sets political affiliation limitations on local boards of health and adds two members to local boards of health. Requires a multiple county health department to maintain at least one physical office in each represented county. Provides that a new city health department cannot be created after December 31, 2022, but allows current city health departments to continue to operate. Creates the Indiana trauma care commission and sets forth the commission's duties. Specifies that certain vision screenings in schools for students may be performed by an ophthalmologist or an optometrist. Requires vision screening in kindergarten and first grade (current law allows for the screening in either grade). Modifies the list of vision tests that may be used. Requires the school to send to the parent of a student any recommendation for further testing by the vision screener. Allows for standing orders to be used for emergency stock medication in schools. Allows the state health commissioner or designee to issue a statewide standing order, prescription, or protocol for emergency stock medication for schools. Removes the distance requirement for an access practice dentist to provide communication with a dental hygienist.

Current Status: 2/2/2023 - added as coauthors Senators Garten, Glick, Breaux

Recent Status: 2/2/2023 - added as coauthor Senator Walker K

2/2/2023 - removed as coauthor Senator Bohacek

State Bill Page: [SB4](#)

SB6 HEALTH CARE BILLING FORMS (CHARBONNEAU E) Provides that a bill for health care services provided by a provider in an office setting must be submitted on an individual provider form. Prohibits an insurer, health maintenance organization, employer, or other person responsible for the payment of the cost of health care services from accepting a bill that is submitted on an institutional provider form. Requires the Indiana department of health to adopt rules for the enforcement of these provisions.

Current Status: 1/9/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Ed Charbonneau

State Bill Page: [SB6](#)

SB7 PHYSICIAN NONCOMPETE AGREEMENTS AND REFERRALS (BUSCH J) Provides that beginning July 1, 2023, a physician and an employer may not enter into a noncompete agreement. Prohibits a physician from referring a patient to an entity if the physician: (1) has a financial relationship with the entity; or (2) has an immediate family member who has a financial relationship with the entity; in the same manner as prohibited in the Medicare program. **Current Status:** 2/2/2023 - added as coauthor Senator Randolph

Recent Status: 2/2/2023 - Senate Bills on Second Reading

1/31/2023 - Senate Bills on Second Reading

State Bill Page: [SB7](#)

SB47 VACCINATION STATUS INFORMATION (DONATO S) Requires the Indiana department of health (state department) to release to certain individuals, upon request, a scannable bar code, QR code, or similar code (code) linked to a document that contains the individual's information from the immunization data registry. Requires the state department to provide the code to the individual not later than 14 days from a request by the individual. **Current Status:** 1/26/2023 - added as coauthors Senators Leising and Breaux

Recent Status: 1/18/2023 - Senate Health & Provider Services, (Bill Scheduled for Hearing); **Time**

& Location: 9:00 AM, Rm. 431

1/9/2023 - Referred to Committee on Health and Provider Services

State Bill Page: [SB47](#)

SB49 CERTIFIED REGISTERED NURSE ANESTHETISTS (CHARBONNEAU E) Removes the requirement that a certified registered nurse anesthetist (CRNA) must be in the immediate presence of a physician to administer anesthesia. Allows a CRNA to administer anesthesia under the direction of a podiatrist or dentist. (Under current law, a CRNA may administer anesthesia under the direction of and in the immediate presence of a physician.)

Current Status: 1/9/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Ed Charbonneau

State Bill Page: [SB49](#)

SB70 MARIJUANA (BOHACEK M) Decriminalizes possession of one ounce or less of marijuana. **Current**

Status: 1/17/2023 - added as coauthor Senator Ford J.D

Recent Status: 1/9/2023 - Referred to Senate Corrections and Criminal Law

1/9/2023 - First Reading

State Bill Page: [SB70](#)

SB82 INTOXICATION AND MARIJUANA (BOHACEK M) Establishes a defense to operating a vehicle or motorboat with a controlled substance in the person's blood if: (1) the controlled substance is marijuana or a metabolite of marijuana; and (2) the person was not intoxicated.

Current Status: 1/9/2023 - Referred to Senate Corrections and Criminal Law

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Mike Bohacek

State Bill Page: [SB82](#)

SB86 TOBACCO PRODUCTS TAX (BOHACEK M) Provides that a tax is imposed on the distribution of cigars at a rate of 24% of the wholesale price of a cigar for cigars having a wholesale price not exceeding \$3. Provides that a tax is imposed on the distribution of cigars at a rate of \$0.72 per cigar for cigars having a wholesale price exceeding \$3 per cigar. **Current Status:** 1/9/2023 - Referred to Senate Tax and Fiscal Policy

Recent Status: 1/9/2023 - First Reading

1/9/2023 - Authored By Mike Bohacek

State Bill Page: [SB86](#)

SB87 EXEMPTION FROM PRIOR AUTHORIZATION (BOHACEK M) Provides that the Medicaid program and children's health insurance program may not require prior authorization for a medication that is approved by the federal Food and Drug Administration (FDA) for the mitigation of opioid withdrawal or approved by the FDA for the treatment of opioid use disorder.

Current Status: 1/9/2023 - Referred to Committee on Health and Provider Services
Recent Status: 1/9/2023 - First Reading
1/9/2023 - Authored By Mike Bohacek
State Bill Page: [SB87](#)

SB140 COVID-19 IMMUNIZATIONS FOR MINORS (TOMES J) Prohibits a city, town, county, or state agency from requiring an individual who is less than 18 years of age to receive an immunization for COVID-19. Removes an expired cross reference.

Current Status: 1/9/2023 - Referred to Committee on Health and Provider Services
Recent Status: 1/9/2023 - First Reading
1/9/2023 - Authored By James Tomes
State Bill Page: [SB140](#)

SB152 MEDICAID REIMBURSEMENT FOR CLINICAL PHARMACIST (CHARBONNEAU E) Requires the office of the secretary of family and social services to reimburse a federally qualified health center for clinical pharmacist services. **Current Status:** 1/9/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/9/2023 - First Reading
1/9/2023 - Authored By Ed Charbonneau
State Bill Page: [SB152](#)

SB153 PHARMACIST CONTRACEPTIVE PRESCRIPTIONS (CHARBONNEAU E) Allows pharmacists who meet certain requirements to prescribe and dispense hormonal contraceptive patches and self-administered oral hormonal contraceptives (contraceptives). Establishes requirements for pharmacists who prescribe and dispense contraceptives. Requires the Indiana board of pharmacy (board) to adopt rules. Requires health plans to provide coverage for contraceptives and certain services. Establishes an exception for nonprofit religious employers. Requires the board to issue an annual report to the legislative council.

Current Status: 1/9/2023 - Referred to Committee on Health and Provider Services
Recent Status: 1/9/2023 - First Reading
1/9/2023 - Authored By Ed Charbonneau
State Bill Page: [SB153](#)

SB190 PHYSICIAN ASSISTANTS (CHARBONNEAU E) Amends current requirements for a collaborative agreement between a physician and a physician assistant with the following: (1) the collaborative agreement must include limitations; (2) the collaborative agreement must set forth the method of collaboration between the physician and physician assistant; and (3) the collaborative agreement must be signed, updated annually, and made available to the medical licensing board of Indiana upon request. Amends the definition of "prescriber" for purposes of electronically transmitted prescriptions for controlled substances, overdose intervention drugs, and telehealth services and prescriptions. Provides that a written collaborative agreement between a physician assistant, who is employed by a certain health care facility or center, and a particular collaborating physician is not required. Requires a physician assistant employed by a certain health care facility or center to enter into a practice agreement with the health care facility or center that employs the physician assistant. Eliminates: (1) a prohibition against a physician collaborating with more than four physician assistants at the same time; (2) a requirement that a physician submit a collaborative agreement to the medical licensing board; and (3) a requirement that a collaborating physician and physician assistant submit a list of locations the physician and physician assistant will practice to the medical licensing board.

Current Status: 1/10/2023 - Referred to Committee on Health and Provider Services
Recent Status: 1/10/2023 - First Reading
1/10/2023 - Authored By Ed Charbonneau
State Bill Page: [SB190](#)

SB191 ASSOCIATE PHYSICIANS (CHARBONNEAU E) Establishes the licensure of associate physicians and sets forth requirements for licensure. Sets forth collaborative agreement requirements between a physician and an associate physician.

Current Status: 1/10/2023 - Referred to Committee on Health and Provider Services
Recent Status: 1/10/2023 - First Reading
1/10/2023 - Authored By Ed Charbonneau
State Bill Page: [SB191](#)

SB213 ADVANCED PRACTICE REGISTERED NURSES (BREAUX J) Removes the requirements that an advanced practice registered nurse (APRN) have a practice agreement with a collaborating physician. Removes a provision requiring an APRN to operate under a collaborative practice agreement or the privileges granted by a hospital governing board. Repeals law concerning the audit of practice agreements. Allows an APRN with prescriptive authority to prescribe a schedule II controlled substance for weight reduction or to

control obesity. Makes conforming changes. **Current Status:** 2/2/2023 - added as third author Senator Garten

Recent Status: 1/26/2023 - added as second author Senator Breaux
1/26/2023 - added as author Senator Charbonneau

State Bill Page: [SB213](#)

SB237 MEDICAL CANNABIS (TAYLOR G) Establishes a medical marijuana program (program), and permits caregivers and patients who have received a physician recommendation to possess a certain quantity of marijuana for treatment of certain medical conditions. Establishes a regulatory agency to oversee the program, and creates the regulatory agency advisory committee to review the effectiveness of the program and to consider recommendations from the regulatory agency. Authorizes the regulatory agency to grant research licenses to research facilities with a physical presence in Indiana. Repeals the controlled substance excise tax and the marijuana eradication program. Makes conforming amendments.

Current Status: 1/11/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/11/2023 - First Reading
1/11/2023 - Authored By Greg Taylor

State Bill Page: [SB237](#)

SB252 LONG ACTING REVERSIBLE CONTRACEPTIVES (YODER S) Allows a long acting reversible contraceptive that is prescribed to and obtained for a Medicaid recipient to be transferred to another Medicaid recipient if certain requirements are met.

Current Status: 2/2/2023 - added as coauthors Senators Melton, Breaux, Bohacek

Recent Status: 2/2/2023 - added as coauthor Senator Johnson
2/2/2023 - added as coauthor Senator Busch

State Bill Page: [SB252](#)

SB275 PRACTICE OF MEDICINE TERMS (JOHNSON T) Provides, for purposes of the law prohibiting the unlawful practice of medicine or osteopathic medicine, that "the practice of medicine or osteopathic medicine" includes attaching to an individual's name the words allergist, electrophysiologist, geriatrician, immunologist, medical geneticist, neonatologist, pulmonologist, or any similar title or description of services.

Current Status: 2/2/2023 - Committee Report amend do pass, adopted

Recent Status: 2/1/2023 - Senate Committee recommends passage, as amended Yeas: 12; Nays: 0

2/1/2023 - Senate Health & Provider Services, (Bill Scheduled for Hearing); **Time & Location:** 9:00 AM, Rm. 431

State Bill Page: [SB275](#)

SB293 CRAFT HEMP FLOWER DISTRIBUTION AND TAXATION (HOLDMAN T) Imposes an excise tax on the retail sale of craft hemp flower products at a rate of 8%. Defines "craft hemp flower". Requires a retail dealer to obtain a craft hemp flower products retail dealer's certificate from the department of state revenue (in addition to a retail merchant's certificate). Deposits the revenue from the excise tax in the state general fund. Establishes certain regulatory testing and packaging requirements for the distribution and sale of craft hemp flower. Excludes craft hemp flower from the definition of "hemp product". Removes references to smokable hemp. Repeals a law that requires that a hemp bud or a hemp flower be sold only to a processor licensed in Indiana. Provides that a food is not considered adulterated for containing low THC hemp extract or craft hemp flower. Provides that craft hemp flower is not included in the definition of "controlled substance analog", "hashish", "low THC hemp extract", or "marijuana". Prohibits the sale of low THC hemp extract to a person less than 21 years of age, if it contains certain elements. Repeals the definition of "smokable hemp" and criminal penalties concerning smokable hemp. Adds infractions that apply with regard to persons less than 21 years of age involving the sale, distribution, purchase, and possession of craft hemp flower. Makes conforming changes. Makes technical corrections.

Current Status: 1/24/2023 - Senate Tax and Fiscal Policy, (Bill Scheduled for Hearing); **Time & Location:** 9:30 AM, Rm. 431

Recent Status: 1/17/2023 - added as coauthor Senator Pol
1/17/2023 - added as second author Senator Walker K

State Bill Page: [SB293](#)

SB308 CANNABIS LEGALIZATION (WALKER K) Establishes a procedure for the lawful production and sale of cannabis in Indiana. Makes conforming amendments.

Current Status: 1/12/2023 - Referred to Committee on Commerce and Technology

Recent Status: 1/12/2023 - First Reading
1/12/2023 - Authored By Kyle Walker

State Bill Page: [SB308](#)

SB311 ABORTION (YODER S) Reestablishes the licensure of abortion clinics. Changes statutes concerning when an abortion may be performed. Removes the eight week limitation on the use of an abortion inducing drug. Allows, rather than requires, the revocation of a physician's license for the performance of an abortion in violation of the law. **Current Status:** 1/12/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/12/2023 - First Reading
1/12/2023 - Authored By Shelli Yoder

State Bill Page: [SB311](#)

SB336 CANNABIS (NIEZGODSKI D) Establishes a procedure for the lawful production and sale of cannabis in Indiana. Makes conforming amendments. Makes an appropriation.

Current Status: 1/24/2023 - added as second author Senator Ford Jon

Recent Status: 1/19/2023 - Referred to Committee on Commerce and Technology
1/19/2023 - First Reading

State Bill Page: [SB336](#)

SB363 LOAN REPAYMENT FOR HEALTH CARE PROFESSIONALS (YODER S) Amends the requirements a health care professional must meet to be eligible for student loan repayment from the Indiana health care professional recruitment and retention fund. Specifies the total amount that may be awarded to a health care professional. **Current Status:** 1/12/2023 - Referred to Committee on Health and Provider Services

Recent Status: 1/12/2023 - First Reading
1/12/2023 - Authored By Shelli Yoder

State Bill Page: [SB363](#)

SB371 ADVANCED PRACTICE REGISTERED NURSES (FORD J) Amends the hospital governing board requirements for the manner in which a psychiatric mental health advanced practice registered nurse will interact with other practitioners. Requires the Indiana state board of nursing to provide a report to the general assembly concerning psychiatric mental health advanced practice registered nurses who practice without a practice agreement. Makes conforming changes.

Current Status: 2/1/2023 - Senate Health & Provider Services, (Bill Scheduled for Hearing); **Time & Location:** 9:00 AM, Rm. 431

Recent Status: 1/26/2023 - added as second author Senator Deery
1/19/2023 - Referred to Committee on Health and Provider Services

State Bill Page: [SB371](#)

SB377 CANNABIS REGULATION (POL R) Permits the use of cannabis by: (1) a person at least 21 years of age; and (2) a person with a serious medical condition as determined by the person's physician. Establishes the adult use cannabis excise tax, and requires a retailer to transfer the tax to the department of state revenue for deposit in the state general fund. Exempts veterans from payment of the sales tax on medical or adult use cannabis. Establishes a cannabis program to permit the cultivation, processing, testing, transportation, and sale of cannabis by holders of a valid permit. Establishes the Indiana cannabis commission (ICC) as a state agency to oversee, implement, and enforce the program, and establishes the ICC advisory committee to review the effectiveness of the program. Requires that permit holders take steps to prevent diversion of cannabis to unauthorized persons. Requires that cannabis and cannabis products be properly labeled, placed in child resistant packaging, and tested by an independent testing laboratory before being made available for purchase. Prohibits packaging cannabis in a manner that is appealing to children. Authorizes research on cannabis in accordance with rules set forth by the ICC. Establishes a procedure for the expungement of a cannabis related conviction if the act constituting the conviction becomes legal. Makes conforming amendments.

Current Status: 1/19/2023 - Referred to Committee on Commerce and Technology

Recent Status: 1/19/2023 - First Reading
1/19/2023 - Authored By Rodney Pol

State Bill Page: [SB377](#)

SB378 HOSPITAL ASSESSMENT FEE (DORIOT B) Provides that a physician owned hospital that is ineligible to receive Medicaid disproportionate share payments is not considered to be a hospital for purposes of the hospital assessment fee.

Current Status: 1/23/2023 - added as coauthor Senator Zay

Recent Status: 1/19/2023 - added as coauthor Senator Johnson
1/19/2023 - added as third author Senator Buck

State Bill Page: [SB378](#)

SB400 HEALTH CARE MATTERS (BROWN L) Specifies requirements for credentialing a provider for the Medicaid program, an accident and sickness insurance policy, and a health maintenance organization contract. Establishes a provisional credential for Medicaid reimbursement purposes until a decision is made on a provider's credentialing application and allows for retroactive reimbursement. Requires the office of the secretary to reimburse any Medicaid provider that meets specified requirements for the provision of Medicaid rehabilitation option services to an eligible Medicaid recipient. Provides that a hospital's quality assessment and improvement program must include a process for determining and reporting the occurrence of serious reportable events. Provides that the medical staff of a hospital may make recommendations on the appointment or reappointment of an applicant to the governing board for a period not to exceed 36 months. Requires a hospital with an emergency department to have at least one physician on site and on duty who is responsible for the emergency department. Provides an exception from this requirement for a critical access hospital. Provides that a child who is blind is eligible for the Indiana Children's Special Health Care Services. Establishes the public health fund (fund) for the purpose of providing public health grants. Requires the Indiana professional licensing agency to transfer to the fund certain proceeds from collected licensing fees. Requires the legislative services agency to conduct an analysis of licensing fees and provide a report to the budget committee. Requires certain licensing boards to issue an occupational license or government certification to an applicant under certain conditions. Allows the governor to take certain actions concerning occupational licenses during a state of disaster emergency. Removes the dental compliance fee. Allows the commissioner of the department of insurance to issue an order to discontinue a violation of a law (current law specifies orders or rules). Requires a domestic stock insurer to file specified information with the department of insurance. Establishes and amends certain requirements relating to prior authorization. Adds a third party administrator of an employee benefit plan that is subject to the federal Employee Retirement Income Security Act of 1974 to the definition of "health payer" for the purposes of the all payer claims data base. Requires a health plan to post certain information on the health plan's website. Establishes a procedure for an insurer filing a planned premium rate increase for a health insurance policy with the department of insurance. Prohibits an insurer and a health maintenance organization from altering a CPT code for a claim unless the medical record of the claim has been reviewed by an employee who is a licensed physician. Requires an insurer and a health maintenance organization to provide a contracted provider with a current reimbursement rate schedule at specified times. Urges the study by an interim committee of prior authorization exemptions for certain health care providers. Makes an appropriation for donated dental services.

Current Status: 1/26/2023 - added as coauthors Senators Johnson and Rogers

Recent Status: 1/25/2023 - Senate Health & Provider Services, (Bill Scheduled for Hearing); **Time**

& Location: 9:00 AM, Rm. 431

1/19/2023 - added as third author Senator Garten

State Bill Page: [SB400](#)

SB480 GENDER TRANSITION PROCEDURES FOR MINORS (JOHNSON T) Prohibits a physician or other practitioner from knowingly providing gender transition procedures to an individual who is less than 18 years of age (minor) that are intended to alter the gender of the minor or delay puberty. Provides for certain medical exceptions. Establishes civil enforcement actions.

Current Status: 1/30/2023 - added as coauthor Senator Crane

Recent Status: 1/23/2023 - removed as coauthor Senator Ford Jon

1/19/2023 - Referred to Committee on Health and Provider Services

State Bill Page: [SB480](#)