CONFERENCE COMMITTEE REPORT
DIGEST FOR EHB 1210

Citations Affected: IC 11-10-4-6.6; IC 12-21-4.1; IC 21-13; IC 21-44; IC 31-9-2-52; IC 31-32-6-4.

Synopsis: Mental health and health. Conference committee report for EHB 1210. Creates the mental health services development program to provide incentives to attract psychiatrists, psychologists, psychiatric nurses, and public sector psychiatrists to practice in Indiana. Creates the mental health services development programs board (board) to administer the programs. Creates the mental health services loan forgiveness account and the public sector psychiatry development program account within the state general fund to provide funding for the programs. Requires the board to develop a public sector psychiatry residency tracking program. Establishes the mental health corrections quality advisory committee. Creates a multiagency task force on workforce development issues relating to individuals with mental health and addictions issues. Provides for the closing of a juvenile proceeding during the testimony of health care providers and certain other providers. Establishes the primary care physician loan forgiveness program and the primary care physician loan forgiveness fund. Specifies qualifications to receive a student loan forgiveness payment from the fund. **(This conference committee report returns a house provision requiring a unanimous vote of all doctor members on the mental health services development programs board on matters relating to medical education. Adds EHB 1208, which establishes the mental health corrections quality advisory committee. Creates a multiagency task force on workforce development issues relating to individuals with mental health and addictions issues. Provides for the closing of a juvenile proceeding during the testimony of health care providers and certain other providers. Adds ESB 393, which establishes the primary care physician loan forgiveness program and the primary care physician loan forgiveness fund. Specifies qualifications to receive a student loan forgiveness payment from the fund.)**

Effective: July 1, 2009.

CONFERENCE COMMITTEE REPORT

MADAM PRESIDENT:

Your Conference Committee appointed to confer with a like committee from the House upon Engrossed Senate Amendments to Engrossed House Bill No. 1210 respectfully reports that said two committees have conferred and agreed as follows to wit:

that the House recede from its dissent from all Senate amendments and that the House now concur in all Senate amendments to the bill and that the bill be further amended as follows:

Delete the title and insert the following:

A BILL FOR AN ACT to amend the Indiana Code concerning state and local administration.

Delete everything after the enacting clause and insert the following:

SECTION 1. IC 11-10-4-6.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: **Sec. 6.6. (a) As used in this section, "advisory committee" refers to the mental health corrections quality advisory committee established by subsection (b).**

(b) The mental health corrections quality advisory committee is established. The advisory committee consists of the following members:

(1) The commissioner of the department or the commissioner's designee, who shall serve as chairperson of the advisory committee.

(2) The director of the division of mental health and addiction or the director's designee.

(3) A representative of a statewide mental health advocacy organization.

(4) A representative of a statewide mental health provider organization.

(5) A representative from a medical services organization that

participates in the department's medical services program.

(6) A member with expertise in psychiatric research representing a postsecondary educational institution.

(7) A pharmacist licensed under IC 25-26 with expertise in mental health disorders.

The governor shall make the appointments under subdivisions (3) through (7) for a term of four (4) years and fill any vacancy on the advisory committee.

(c) The affirmative votes of a majority of the voting members appointed to the advisory committee are required for the committee to take action on any measure.

(d) The advisory committee shall advise the department and make recommendations concerning the department's formulary for medications for mental health and addictive disorders and consider the following:

(1) Peer reviewed medical literature.

(2) Observational studies.

(3) Health economic studies.

(4) Input from physicians and patients.

(5) Any other information determined by the advisory committee to be appropriate.

(e) The department shall report recommendations made by the advisory committee to the department's medical director.

(f) The department shall report the following information to the Indiana commission on mental health (IC 12-21-6.5-2):

(1) The advisory committee's advice and recommendations made under this section.

(2) The number and types of restrictions implemented by the department and the outcome of each restriction.

(3) The transition of individuals with mental illness into the community and the rate of recidivism.

(4) Any decision by the department to change the mental health care delivery system in which medication is provided to inmates.

SECTION 2. IC 12-21-4.1 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]:

Chapter 4.1. Workforce Development Task Force

Sec. 1. (a) As used in this section, "task force" means the workforce development task force for mental health and addiction.

(b) The workforce development task force for mental health and addiction is established.

(c) The task force consists of the following individuals to be appointed by the governor:

(1) One (1) representative from the division of mental health and addiction (IC 12-21-1-1) who shall serve as chairperson of the task force.

(2) One (1) representative from the state department of health (IC 16-19-3-1).

(3) One (1) representative from the department of education (IC 20-19-3-1).

(4) One (1) representative from the department of correction (IC 11-8-2-1).

(5) One (1) representative from the Indiana professional licensing agency (IC 25-1-5-3).

(6) One (1) representative from the Indiana department of veterans' affairs (IC 10-17-1-2).

(7) One (1) representative from the commission on Hispanic/Latino affairs (IC 4-23-28-2).

(8) Two (2) representatives of different advocacy groups for consumers of mental health services.

(9) One (1) representative from a statewide coalition that represents minority health issues.

(10) One (1) member of the Indiana commission on mental health (IC 12-21-6.5-2).

(11) One (1) representative of community mental health centers.

(12) One (1) representative from a college or university from a program for an undergraduate degree in social work.

(13) One (1) representative from a college or university with a school of nursing.

(14) One (1) psychologist licensed under IC 25-33 and engaged in private practice.

(15) One (1) representative from the Indiana University School of Medicine, department of psychiatry.

(16) One (1) representative from the Indiana University School of Medicine, department of:

(A) pediatrics; or

(B) internal medicine.

(17) One (1) representative from Riley Hospital for Children specializing in:

(A) infant; or

(B) toddler;

mental health.

(18) One (1) representative from Ivy Tech Community College, human service degree program.

(19) Two (2) representatives of consumers.

(d) The division of mental health and addiction shall provide staff for the task force.

(e) The task force shall study the following issues concerning individuals with mental illness:

(1) Increases in wages and other compensation for difficult to recruit mental health and addiction professional classifications.

(2) Loan repayment programs to attract individuals in classifications that provide services in mental health and addiction programs.

(3) Tuition reimbursement, including license and certification fees, for individuals in classifications that provide services in mental health and addiction programs.

(4) Internship opportunities for individuals in classifications that provide services in mental health and addiction

programs.

(5) Mentoring opportunities for individuals in classifications that provide services in mental health and addiction programs.

(6) Revision of curriculum in master's, doctorate, and medical level programs to require courses in mental health and addiction.

(7) Marketing programs offering sign-on bonuses and referral incentives for difficult to recruit mental health and addiction professional classifications.

(8) Medical rate setting, including comparison of the state's rate with similar states.

(f) The task force shall present findings and make recommendations to the Indiana commission on mental health not later than August 2011.

(g) This section expires December 31, 2011.

SECTION 3. IC 21-13-1-5, AS ADDED BY P.L.144-2007, SECTION 19, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 5. "Fund":

(1) for purposes of IC 21-13-2, refers to the minority teacher or special education services scholarship fund established by IC 21-13-2-1;

(2) for purposes of IC 21-13-3, refers to the nursing scholarship fund established by IC 21-13-3-1;

(3) for purposes of IC 21-13-4, refers to the National Guard tuition supplement program fund established by IC 21-13-4-1; ~~and~~

(4) for purposes of IC 21-13-5, refers to the National Guard scholarship extension fund established by IC 21-13-5-1; **and**

(5) for purposes of IC 21-13-6, refers to the primary care physician loan forgiveness fund established by IC 21-13-6-3.

SECTION 4. IC 21-13-6 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]:

Chapter 6. Primary Care Physician Loan Forgiveness Program

Sec. 1. As used in this chapter, "primary care physician" means a physician who practices in any of the following areas:

(1) Family practice.

(2) Pediatrics.

(3) Obstetrics and gynecology.

(4) Internal medicine.

Sec. 2. (a) The primary care physician loan forgiveness program is established.

(b) The commission shall administer the primary care physician loan forgiveness program.

Sec. 3. (a) The primary care physician loan forgiveness fund is established to encourage and promote qualified physicians to pursue a medical career in Indiana.

(b) The fund consists of the following:

(1) Appropriations by the general assembly.

(2) Gifts to the fund.

Sec. 4. (a) The commission shall administer the fund.

(b) The expenses of administering the fund shall be paid from money in the fund.

(c) The treasurer of state shall invest the money in the fund not currently needed to meet the obligations of the fund in the same manner as other public funds. Interest that accrues from those investments shall be deposited in the fund.

(d) Money in the fund at the end of a fiscal year does not revert to the state general fund but remains available to be used to provide money for student loan forgiveness payments under this chapter.

Sec. 5. (a) The money in the fund must be used to provide annual student loan forgiveness payments to qualified primary care physicians who are residents of Indiana and practice medicine in Indiana.

(b) Subject to section 8 of this chapter, a student loan forgiveness payment awarded in a particular year under this section is equal to the lesser of the following amounts:

(1) The balance of the physician's total amount of student loans.

(2) Five thousand dollars ($5,000).

(c) A primary care physician is eligible for a student loan forgiveness payment under this section each year that the individual meets the qualifications under section 6 of this chapter.

Sec. 6. To qualify for a student loan forgiveness payment from the fund, an individual must:

(1) be a resident of Indiana;

(2) be licensed as a physician under IC 25-22.5;

(3) practice as a primary care physician;

(4) conduct the majority of the individual's medical practice in Indiana;

(5) have an outstanding student loan balance at the beginning of the calendar year; and

(6) be approved by the commission.

Sec. 7. The medical education board shall annually make available to the commission the most recent information concerning the number of primary care physicians who are serving as medical residents in Indiana.

Sec. 8. The commission shall annually allocate the available money in the fund to each primary care physician approved under this chapter in proportion to the total number of primary care physicians approved under this chapter.

Sec. 9. Each:

(1) primary care physician who applies under this chapter; and

(2) primary care physician approved under this chapter;

shall provide to the commission any information that the commission determines is necessary to administer this chapter.

SECTION 5. IC 21-44-1-3, AS ADDED BY P.L.2-2007, SECTION 285, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 3. **(a)** "Board", **for purposes of IC 21-44-5,** refers to the

medical education board established by IC 21-44-5-1.

(b) "Board", for purposes of IC 21-44-6, refers to the mental health services development programs board established by IC 21-44-6-1.

SECTION 6. IC 21-44-1-12, AS ADDED BY P.L.2-2007, SECTION 285, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 12. "Intern, residency, and graduate program", for purposes of IC 21-44-5, refers to an intern, residency, and graduate program for which the **medical education** board establishes policies under IC 21-44-5.

SECTION 7. IC 21-44-1-15 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: **Sec. 15. "Public sector psychiatry" refers to the practice of psychiatry in:**

(1) state institutions;

(2) community mental health centers; and

(3) other settings determined by the board to be public sector psychiatry settings.

SECTION 8. IC 21-44-1-16 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: **Sec. 16. "Training track program", for purposes of IC 21-44-6, refers to the program for individuals in the public sector psychiatry development program.**

SECTION 9. IC 21-44-6 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]:

Chapter 6. Mental Health Services Development Programs

Sec. 1. There is established the mental health services development programs board.

Sec. 2. The board consists of the following members:

(1) The dean of the Indiana University School of Medicine or the dean's designee. The dean of the Indiana University School of Medicine or the dean's designee shall serve as the chairperson of the board.

(2) The chairperson of the department of psychiatry of the Indiana University School of Medicine or the chairperson's designee.

(3) The director of the division of mental health and addiction created by IC 12-21-1-1 or the director's designee.

(4) The commissioner of the state department of health or the commissioner's designee.

(5) The administrator of a graduate program in an institution of higher education in Indiana engaged in training psychologists.

(6) The administrator of a program in an institution of higher education in Indiana engaged in training advanced practice psychiatric nurses.

(7) One (1) psychiatrist who practices psychiatry in Indiana.

The governor shall appoint the members of the board described in subdivisions (5) through (7).

Sec. 3. The board shall meet initially at the call of the governor.

After the initial meeting, the board shall meet at least twice each year at the call of the chairperson.

Sec. 4. (a) Each board member who is not a state employee is not entitled to a salary per diem. The member is, however, entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties as provided in the state policies and procedures established by the Indiana department of administration and approved by the budget agency.

(b) Each member of the board who is a state employee is entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties as provided in the state policies and procedures established by the Indiana department of administration and approved by the budget agency.

(c) Except as provided in subsection (d), the affirmative votes of a majority of the members appointed to the board are required for the board to take action on any measure.

(d) The affirmative votes of a majority of the members appointed to the board, including the unanimous votes of the members under section 2(1), 2(2), and 2(7) of this chapter who are present, are required for the board to take any action concerning the public sector psychiatry development program or the training track program.

Sec. 5. The purpose of the board is to do the following:

(1) To establish and oversee a loan forgiveness program designed to attract:

(A) psychiatrists;

(B) psychologists; and

(C) psychiatric nurses;

to provide services to individuals with mental illness in public psychiatry settings in Indiana by assisting the individuals listed in this section to pay off loans incurred in the training needed to practice psychiatry and psychology and as a psychiatric nurse in Indiana.

(2) To establish and oversee a public sector psychiatry development program to attract and train psychiatrists who will engage in the practice of psychiatry in:

(A) state mental health institutions;

(B) community mental health centers; and

(C) other settings determined by the board to be public sector settings.

(3) To develop and oversee a public sector psychiatry residency training track program through the Indiana University School of Medicine, Department of Psychiatry residency training program. The training track program must provide an opportunity for psychiatry residents to work in public sector psychiatry settings, including:

(A) state psychiatric hospitals;

(B) community mental health centers; and

(C) other settings determined to be public sector settings

by the board.

(4) To develop standards for participation in the training track program that include:

(A) guidelines for the amounts of grants and other assistance a participant receives;

(B) guidelines for the type of training in public sector psychiatry the participant receives;

(C) guidelines for agreements with mental health hospitals, community mental health centers, and other entities participating in the training track program; and

(D) other guidelines and standards necessary for governing the training track program.

Sec. 6. The board shall establish guidelines for the repayment of the loans incurred by a psychiatrist, psychologist, or psychiatric nurse, including the following:

(1) A participant may not receive more than twenty-five thousand dollars ($25,000) in a year.

(2) A participant may not receive grants for more than four (4) years.

(3) A participant must commit to a full year of service in a public psychiatry setting for each year of loan repayment.

(4) A participant must be a practitioner who:

(A) is:

(i) from Indiana; and

(ii) establishing a new practice in Indiana; or

(B) is:

(i) from outside Indiana;

(ii) not currently practicing in Indiana and has not practiced in Indiana for three (3) years before applying for the program; and

(iii) establishing a new practice in Indiana.

Sec. 7. (a) As used in this section, "account" refers to the mental health services loan forgiveness account established in subsection (b).

(b) The mental health services loan forgiveness account within the state general fund is established for the purpose of providing grants for loan repayment under this chapter. The account shall be administered by the board. Money in the account shall be used to fund loan forgiveness grants under this chapter.

(c) The account consists of:

(1) appropriations made by the general assembly;

(2) grants; and

(3) gifts and bequests.

(d) The expenses of administering the account shall be paid from money in the account.

(e) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested. Interest that accrues from these investments shall be deposited in the account.

(f) Money in the account at the end of a state fiscal year does not revert to the state general fund.

Sec. 8. (a) As used in this section, "account" refers to the public sector psychiatry development program account established in subsection (b).

(b) The public sector psychiatry development program account within the state general fund is established for the purpose of providing funding for the public sector psychiatry development program established under this chapter. The account shall be administered by the board. Money in the account shall be used to fund psychiatric residency positions, including:

(1) educational expenses;

(2) grants and scholarships;

(3) salaries; and

(4) benefits.

(c) The account consists of:

(1) appropriations made by the general assembly;

(2) grants; and

(3) gifts and bequests.

(d) The expenses of administering the account shall be paid from money in the account.

(e) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested. Interest that accrues from these investments shall be deposited in the account.

(f) Money in the account at the end of a state fiscal year does not revert to the state general fund.

SECTION 10. IC 31-9-2-52 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 52. "Health care provider", for purposes of **IC 31-32-6-4,** IC 31-32-11-1, IC 31-33, IC 31-34-7-4, and IC 31-39-8-4, means any of the following:

(1) A licensed physician, intern, or resident.

(2) An osteopath.

(3) A chiropractor.

(4) A dentist.

(5) A podiatrist.

(6) A registered nurse or other licensed nurse.

(7) A mental health professional.

(8) A paramedic or an emergency medical technician.

(9) A social worker, an x-ray technician, or a laboratory technician employed by a hospital.

(10) A pharmacist.

(11) A person working under the direction of any of the practitioners listed in subdivisions (1) through (10).

SECTION 11. IC 31-32-6-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 4. **(a)** Upon motion of the prosecuting attorney, the child, or the child's guardian ad litem, counsel, parent, guardian, or custodian, the court may issue an order closing a proceeding during the testimony of a child witness or child victim if the court finds that:

(1) an allegation or a defense involves matters of a sexual nature; and

(2) closing the proceeding is necessary to protect the welfare of

a child witness or child victim.

(b) Upon motion of the prosecuting attorney, the child, or the child's guardian ad litem, counsel, parent, guardian, or custodian, the court may issue an order closing a proceeding during the testimony of a health care provider if the court finds that:

(1) the testimony involves matters that would be protected under 45 CFR Parts 160 and 164 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)); or

(2) the testimony involves matters that would be a privileged communication between a health care provider and the health care provider's patient.

(c) Upon motion of the prosecuting attorney, the child, or the child's guardian ad litem, counsel, parent, guardian, or custodian, the court may issue an order closing a proceeding during the testimony of:

(1) a:

(A) certified social worker;

(B) certified clinical social worker; or

(C) certified marriage and family therapist;

regarding a client;

(2) a school counselor regarding a student; or

(3) a school psychologist regarding a student.

SECTION 12. [EFFECTIVE JULY 1, 2009] (**a) The definitions under IC 11-10-4-6.6, as added by this act, apply to this SECTION.**

(b) Notwithstanding IC 11-10-4-6.6(b), as added by this act, the initial members appointed by the governor to the advisory committee are appointed for the following terms:

(1) Members appointed under IC 11-10-4-6.6(b)(3) and IC 11-10-4-6.6(b)(4) are appointed for a term of four (4) years.

(2) A member appointed under IC 11-10-4-6.6(b)(5) is appointed for a term of three (3) years.

(3) A member appointed under IC 11-10-4-6.6(b)(6) is appointed for a term of two (2) years.

(4) A member appointed under IC 11-10-4-6.6(b)(7) is appointed for a term of one (1) year.

(c) This SECTION expires December 31, 2013.

(Reference is to EHB 1210 as printed March 27, 2009.)

Conference Committee Report
on
Engrossed House Bill 1210

Signed by:

_____	_____
Representative Brown C Chairperson	Senator Lawson C
_____	_____
Representative Lehe	Senator Errington
House Conferees	**Senate Conferees**