

Adopted Rejected

COMMITTEE REPORT

YES: 10
NO: 0

MR. SPEAKER:

Your Committee on Public Health, to which was referred Senate Bill 88, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill **be amended** as follows:

- 1 Page 1, between the enacting clause and line 1, begin a new
- 2 paragraph and insert:
- 3 "SECTION 1. IC 5-10-8-7.3, AS AMENDED BY P.L.93-2006,
- 4 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
- 5 JULY 1, 2011]: Sec. 7.3. (a) As used in this section, "covered
- 6 individual" means an individual who is:
- 7 (1) covered under a self-insurance program established under
- 8 section 7(b) of this chapter to provide group health coverage; or
- 9 (2) entitled to services under a contract with a prepaid health care
- 10 delivery plan that is entered into or renewed under section 7(c) of
- 11 this chapter.
- 12 (b) As used in this section, "early intervention services" means
- 13 services provided to a first steps child under IC 12-12.7-2 and 20
- 14 U.S.C. 1432(4).
- 15 (c) As used in this section, "first steps child" means an infant or

1 toddler from birth through two (2) years of age who is enrolled in the
2 Indiana first steps program and is a covered individual.

3 (d) As used in this section, "first steps program" refers to the
4 program established under IC 12-12.7-2 and 20 U.S.C. 1431 et seq. to
5 meet the needs of:

- 6 (1) children who are eligible for early intervention services; and
7 (2) their families.

8 The term includes the coordination of all available federal, state, local,
9 and private resources available to provide early intervention services
10 within Indiana.

11 (e) As used in this section, "health benefits plan" means a:

- 12 (1) self-insurance program established under section 7(b) of this
13 chapter to provide group health coverage; or
14 (2) contract with a prepaid health care delivery plan that is
15 entered into or renewed under section 7(c) of this chapter.

16 (f) A health benefits plan that provides coverage for early
17 intervention services shall reimburse the first steps program for
18 payments made by the program for early intervention services that are
19 covered under the health benefits plan. **a monthly fee established by
20 the division of disability and rehabilitative services established by
21 IC 12-9-1-1. The monthly fee shall be provided instead of claims
22 processing of individual claims.**

23 (g) The reimbursement required under subsection (f) may not be
24 applied to any annual or aggregate lifetime limit on the first steps
25 child's coverage under the health benefits plan.

26 ~~(h) The first steps program may pay required deductibles;
27 copayments, or other out-of-pocket expenses for a first steps child
28 directly to a provider. A health benefits plan shall apply any payments
29 made by the first steps program to the health benefits plan's
30 deductibles, copayments, or other out-of-pocket expenses according to
31 the terms and conditions of the health benefits plan.~~

32 **(h) The monthly fee required under subsection (f) may not be
33 reduced or denied as a result of:**

- 34 **(1) a required deductible;**
35 **(2) copayments;**
36 **(3) coinsurance; or**
37 **(4) other out-of-pocket expenses."**

38 Page 6, between lines 18 and 19, begin a new paragraph and insert:

1 "SECTION 6. IC 12-7-2-33.7, AS AMENDED BY P.L.124-2007,
2 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2011]: Sec. 33.7. (a) As used in this chapter, "class I child
4 care home" means a child care home that serves any combination of
5 full-time and part-time children, not to exceed at any one (1) time
6 twelve (12) children plus three (3) children during the school year only
7 who are enrolled in at least ~~grade 1~~ **kindergarten**. Except as provided
8 in IC 12-17.2-5-6.3(b), the addition of three (3) school age children
9 may not occur during a break in the school year that exceeds four (4)
10 weeks.

11 (b) A child:

12 (1) for whom a provider of care in the child care home is a parent,
13 stepparent, guardian, custodian, or other relative and who is at
14 least seven (7) years of age; or

15 (2) who is at least fourteen (14) years of age and does not require
16 child care;

17 shall not be counted in determining whether the child care home is
18 within the limit set forth in subsection (a).".

19 Page 14, between lines 29 and 30, begin a new paragraph and insert:

20 "SECTION 3. IC 12-12.7-2-21 IS ADDED TO THE INDIANA
21 CODE AS A **NEW SECTION** TO READ AS FOLLOWS
22 [EFFECTIVE JULY 1, 2011]: **Sec. 21. (a) If a family is more than**
23 **sixty (60) days delinquent in making the cost participation**
24 **payments under this chapter, the division shall add interest to the**
25 **amount in arrears until the amount is paid in full.**

26 **(b) The division shall, under procedures established by the**
27 **department of state revenue, file an application for the offset of**
28 **state tax refunds due to a parent who:**

29 **(1) is required to pay the cost participation payments under**
30 **this chapter; and**

31 **(2) is more than sixty (60) days delinquent in making the**
32 **payments;**

33 **to the extent necessary to reimburse the division.**

34 **(c) A child may not be denied services under this chapter for**
35 **failure to pay the required cost participation schedule payments,**
36 **unless the family has been in arrears in the payments at least two**
37 **(2) tax years."**

38 Renumber all SECTIONS consecutively.

(Reference is to SB 88 as printed January 28, 2011.)

and when so amended that said bill do pass.

Representative Brown T