HOUSE BILL No. 1021

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2-62; IC 16-19-3-5.5; IC 16-41-42.5.

Synopsis: Indiana brain injury study commission. Establishes the Indiana brain injury commission (commission). Requires the commission to submit certain reports to the general assembly. (The introduced version of this bill was prepared by the health finance commission.)

Effective: Upon passage.

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January 5, 2011, read first time and referred to Committee on Public Health.

C o p y

Introduced

First Regular Session 117th General Assembly (2011)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type.~~

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~*this style type*~~ reconciles conflicts between statutes enacted by the 2010 Regular Session of the General Assembly.

C o p y

HOUSE BILL No. 1021

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

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

SECTION 1. IC 16-18-2-62 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 62. (a) "Commission", for purposes of IC 16-19-6, refers to the commission for special institutions.

(b) "Commission", for purposes of IC 16-31, refers to the Indiana emergency medical services commission.

(c) "Commission", for purposes of IC 16-41-42.5, refers to the Indiana brain injury commission.

~~(c)~~ **(d)** "Commission", for purposes of IC 16-46-11.1, has the meaning set forth in IC 16-46-11.1-1.

SECTION 2. IC 16-19-3-5.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 5.5. Before July 1, 2013, the state department shall adopt rules under IC 4-22-2 that establish a licensure category for providers:**

(1) of services for individuals with brain injuries; and

(2) who are not otherwise licensed or certified.

SECTION 3. IC 16-41-42.5 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]:

Chapter 42.5. Indiana Brain Injury Commission

Sec. 1. As used in this chapter, "commission" refers to the Indiana brain injury commission established by section 2 of this chapter.

Sec. 2. (a) The Indiana brain injury commission is established. The commission consists of the following members:

(1) Two (2) members of the house of representatives, who are not affiliated with the same political party, appointed by the speaker of the house of representatives in consultation with the minority leader. The speaker shall designate one (1) member under this subdivision to be chairperson of the commission in an odd-numbered year.

(2) Two (2) members of the senate, who are not affiliated with the same political party, appointed by the president pro tempore of the senate in consultation with the minority leader. The president pro tempore shall designate one (1) member under this subdivision as the chairperson of the commission in an even-numbered year.

(3) Two (2) individuals who are brain injury survivors, appointed as follows:

(A) One (1) individual appointed by the speaker of the house of representatives.

(B) One (1) individual appointed by the minority leader of the house of representatives.

(4) Two (2) individuals who are caregivers of a family member who has a brain injury, appointed as follows:

(A) One (1) individual appointed by the president pro tempore of the senate.

(B) One (1) individual appointed by the minority leader of the senate.

(5) One (1) individual who:

(A) is employed by the office of the secretary of family and social services; and

(B) has professional knowledge of brain injury services; designated by the secretary of family and social services.

(6) One (1) individual who:

(A) is employed by the state department; and

(B) has professional knowledge of brain injury services; designated by the commissioner of the state department.

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(7) The following individuals appointed by the speaker of the house of representatives in consultation with the minority leader of the house of representatives:

(A) One (1) individual who is a physician licensed under IC 25-22.5 and who specializes in brain injury rehabilitation.

(B) One (1) individual nominated by a veterans' organization.

(C) One (1) individual nominated by the Indiana Home Care Task Force Brain Injury Committee.

(8) The following individuals appointed by the president pro tempore of the senate in consultation with the minority leader of the senate:

(A) One (1) individual who is a provider of brain injury rehabilitative services.

(B) One (1) individual nominated by a mental health organization.

(C) One (1) individual nominated by the Brain Injury Association of Indiana.

(b) The legislative services agency shall staff the commission.

(c) The appointing authority shall make the initial appointment of members not later than two (2) months after the establishment of the commission.

(d) A member of the commission is not entitled to per diem or travel expenses incurred in attending commission meetings.

(e) The appointments made under this section are for the duration of the commission. If a vacancy occurs on the commission, the appointing authority who appointed the former member whose position has become vacant shall appoint an individual to fill the vacancy.

Sec. 3. The commission shall study and report to the general assembly on the following:

(1) The prevalence and scope of brain injuries in Indiana.

(2) The existing and needed infrastructure in Indiana for treating brain injuries.

(3) The need in Indiana for acute, postacute, and life span services for brain injuries, including the following:

(A) Medical.

(B) Rehabilitative.

(C) Home and community based care.

(D) Housing.

(E) Transportation.

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(F) Psychosocial.
(G) Psychiatric.
(H) Financial.
(I) Quality of life needs.
(J) Training.
(K) Therapy.

(4) Access to services through a Medicaid waiver, including access to equipment and supplies.

(5) The need for brain injury educational training for health care professionals and the public, including education concerning prevention and awareness.

(6) Employment and occupational issues for individuals with brain injuries.

(7) Public and private expenditures in all settings associated with the treatment of individuals with brain issues.

(8) Projected costs if Indiana expands publicly funded brain injury services and potential public and private money sources.

(9) The impact of brain injuries on Indiana's economy.

(10) Federal programs that may affect the availability and financing of brain injury services in Indiana.

Sec. 4. The commission may meet throughout the year and shall meet at least quarterly and as often as the chairperson considers necessary.

Sec. 5. The affirmative votes of a majority of the members appointed to the commission are necessary for the commission to take action on any measure, including final reports.

Sec. 6. (a) The commission shall prepare the following reports and submit the reports in an electronic format under IC 5-14-6 to the general assembly:

(1) A preliminary report not later than December 1, 2011.

(2) A final report not later than December 1, 2012.

(b) The commission shall:

(1) provide a copy of the reports described in subsection (a) to the governor and legislative council; and

(2) make the report available to the public.

Sec. 7. This chapter expires December 31, 2012.

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

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