Reprinted
February 29, 2012

ENGROSSED
SENATE BILL No. 15

DIGEST OF SB 15 (Updated February 28, 2012 6:15 pm - DI 77)

Citations Affected: IC 12-15; noncode.

Synopsis: Brain injury services and case management services. Requires the office of Medicaid policy and planning (OMPP) to apply to amend the state Medicaid plan to include reimbursement under Medicaid for brain injury services and neurobehavioral services provided in Indiana. Requires the state department of health (ISDH) to license facilities that provide brain injury services and neurobehavioral services. Establishes an advisory committee to assist OMPP and ISDH. Requires OMPP to develop a plan for a risk based case management system for the aged, blind, and disabled pilot program. Requires OMPP to present the plan to the health finance commission. (The introduced version of this bill was prepared by the health finance commission.)

Effective: Upon passage; July 1, 2012.

Miller, Becker, Breaux, Buck
(HOUSE SPONSORS — BROWN T, BROWN C, KARICKHOFF)

January 4, 2012, read first time and referred to Committee on Health and Provider Services.
January 12, 2012, amended, reported favorably — Do Pass.
January 17, 2012, read second time, amended, ordered engrossed.
January 18, 2012, engrossed.
January 23, 2012, read third time, passed. Yeas 49, nays 1.

HOUSE ACTION

January 31, 2012, read first time and referred to Committee on Public Health.
February 23, 2012, amended, reported — Do Pass.
February 28, 2012, read second time, amended, ordered engrossed.

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Second Regular Session 117th General Assembly (2012)

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 2011 Regular Session of the General Assembly.

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ENGROSSED
SENATE BILL No. 15

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

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

SECTION 1. IC 12-15-1.3-18 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 18. (a) The office shall do the following:**

(1) Before September 1, 2012, apply to the United States Department of Health and Human Services for an amendment to the state Medicaid plan to include reimbursement under Medicaid for brain injury services and neurobehavioral services provided in Indiana.

(2) Provide the state department of health with information necessary for the state department of health to create a licensure category for neurobehavioral rehabilitation facilities and facilities that provide brain injury services.

(b) The state department of health shall license facilities that provide brain injury services and neurobehavioral services and shall consider the information provided by the office under subsection (a)(2).

(c) The office may not implement the Medicaid plan amendment

under subsection (a) until the office files an affidavit with the governor attesting that the Medicaid plan amendment applied for under subsection (a) is in effect. The office shall file the affidavit under this subsection not later than five (5) days after the office is notified that the Medicaid plan amendment is approved.

(d) If the office receives a plan amendment under this section from the United States Department of Health and Human Services and the governor receives the affidavit filed under subsection (c), the office shall implement the Medicaid plan amendment under subsection (a) not more than sixty (60) days after the governor receives the affidavit.

(e) The office may adopt rules under IC 4-22-2 necessary to implement this section.

(f) The office shall provide the health finance commission (established by IC 2-5-23-3) with an update on the status and implementation of this section during the 2012 and 2013 legislative interims.

(g) The brain injury treatment advisory committee is established for the purpose of assisting the state department of health and the office of the secretary of family and social services with the implementation of this section. The committee consists of the following members:

(1) The commissioner of the state department of health or the commissioner's designee, who is the chairperson of the committee.

(2) The director of the office of Medicaid policy and planning, or the director's designee.

(3) The director of the division of aging, or the director's designee.

(4) The director of the rehabilitation services bureau within the office of the secretary of family and social services, or the director's designee.

(5) The following members appointed by the governor not later than May 1, 2012:

(A) One (1) member representing the Brain Injury Association of Indiana.

(B) Six (6) individuals representing any of the following:

(i) Brain injury service providers.

(ii) Residential care providers.

(iii) Health care providers who have knowledge concerning brain injuries.

(C) One (1) representative of the rate setting contractor

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used by the office of Medicaid policy and planning.

(D) One (1) consumer of brain injury services.

(E) One (1) psychologist licensed under IC 25-33-1 who specializes in the assessment and treatment of individuals with a brain injury.

(F) One (1) individual who is a caregiver of a consumer of brain injury services.

(G) One (1) representative of the Indiana Association of Area Agencies on Aging.

The office shall staff the committee. The committee shall meet at least four (4) times at the call of the chairperson. The members of the committee are not entitled to per diem or reimbursement for expenses incurred in connection with the members' committee duties. The committee is abolished July 1, 2013.

SECTION 2. [EFFECTIVE JULY 1, 2012] **(a) The office of Medicaid policy and planning (IC 12-8-6-1) shall develop a plan for a pilot program to establish a risk based case management system for aged, blind, and disabled Medicaid recipients.**

(b) Before September 29, 2012, the office of Medicaid policy and planning shall submit the plan developed under subsection (a), including any proposed legislative changes needed to implement the plan, to the health finance commission (established by IC 2-5-23-3).

(c) The health finance commission shall study whether:

(1) the plan developed under subsection (a) should be implemented; and

(2) legislation should be prepared concerning the plan developed under this SECTION.

(d) This SECTION expires December 31, 2012.

SECTION 3. **An emergency is declared for this act.**

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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 15, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 3, between lines 2 and 3, begin a new line double block indented and insert:

"**(E) One (1) psychologist licensed under IC 25-33 who works in neuro-rehabilitation.**".

and when so amended that said bill do pass.

(Reference is to SB 15 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 9, Nays 0.

SENATE MOTION

Madam President: I move that Senate Bill 15 be amended to read as follows:

Page 3, between lines 4 and 5, begin a new line double block indented and insert:

"**(F) One (1) individual who is a caregiver of a consumer of brain injury services.**".

(Reference is to SB 15 as printed January 13, 2012.)

MILLER

COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 15, 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:

Delete the title and insert the following:

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

Page 1, line 1, after "1." insert "IC 12-15-1.3-18 IS ADDED TO

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THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS".

Page 1, line 1, delete "PASSAGE]" and insert "PASSAGE]: **Sec. 18.**".

Page 1, line 1, delete "state" and insert "**office shall do the following:**

(1) Before September 1, 2012, apply to the United States Department of Health and Human Services for an amendment to the state Medicaid plan to include reimbursement under Medicaid for brain injury services and neurobehavioral services provided in Indiana.".

Page 1, delete lines 2 through 11.

Page 1, line 12, delete "(1) Development of", begin a new line block indented and insert:

"**(2) Provide the state department of health with information necessary for the state department of health to create**".

Page 1, line 13, delete "the criteria to be included for the" and insert "**facilities that provide brain injury services.**".

Page 1, delete lines 14 through 18, begin a new paragraph and insert:

"**(b) The state department of health shall license facilities that provide brain injury services and neurobehavioral services and shall consider the information provided by the office under subsection (a)(2).**

(c) The office may not implement the Medicaid plan amendment under subsection (a) until the office files an affidavit with the governor attesting that the Medicaid plan amendment applied for under subsection (a) is in effect. The office shall file the affidavit under this subsection not later than five (5) days after the office is notified that the Medicaid plan amendment is approved.

(d) If the office receives a plan amendment under this section from the United States Department of Health and Human Services and the governor receives the affidavit filed under subsection (c), the office shall implement the Medicaid plan amendment under subsection (a) not more than sixty (60) days after the governor receives the affidavit.

(e) The office may adopt rules under IC 4-22-2 necessary to implement this section.

(f) The office shall provide the health finance commission (established by IC 2-5-23-3) with an update on the status and implementation of this section during the 2012 and 2013 legislative interims.".

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Page 2, delete lines 1 through 17.

Page 2, line 18, delete "(d)" and insert "**(g)**".

Page 2, line 18, after "treatment" insert "**advisory**".

Page 2, line 20, delete "study" and insert "**implementation of this section.**".

Page 2, line 21, delete "required under this SECTION.".

Page 3, line 3, delete "IC 25-33 who" and insert "**IC 25-33-1 who specializes in the assessment and treatment of individuals with a brain injury.**".

Page 3, delete line 4.

Page 3, between lines 6 and 7, begin a new line double block indented and insert:

"**(G) One (1) representative of the Indiana Association of Area Agencies on Aging.**".

Page 3, line 7, delete "state department of health" and insert "**office**".

Page 3, line 11, after "duties." insert "**The committee is abolished July 1, 2013.**".

Page 3, delete line 12, begin a new paragraph and insert:

"SECTION 2. [EFFECTIVE JULY 1, 2012] **(a) The office of Medicaid policy and planning (IC 12-8-6-1) shall develop a plan for a pilot program to establish a case management system for aged, blind, and disabled Medicaid recipients.**

(b) Before September 29, 2012, the office of Medicaid policy and planning shall submit the plan developed under subsection (a), including any proposed legislative changes needed to implement the plan, to the health finance commission (established by IC 2-5-23-3).

(c) The health finance commission shall study whether:

(1) the plan developed under subsection (a) should be implemented; and

(2) legislation should be prepared concerning the plan developed under this SECTION.

(d) This SECTION expires December 31, 2012.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 15 as reprinted January 18, 2012.)

BROWN T, Chair

Committee Vote: yeas 10, nays 0.

C o p y

HOUSE MOTION

Mr. Speaker: I move that Engrossed Senate Bill 15 be amended to read as follows:

Page 3, line 17, after "establish a" insert "**risk based**".

(Reference is to ESB 15 as printed February 24, 2012.)

BROWN T

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