

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 2012 Regular Session of the General Assembly.

## SENATE ENROLLED ACT No. 415

AN ACT to amend the Indiana Code concerning health.

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

SECTION 1. IC 4-12-7-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. (a) The Indiana local health department account is established within the Indiana tobacco master settlement agreement fund for the purpose of ~~making distributions to each county to provide~~ **providing** funding for services provided by local boards of health in ~~that~~ **each** county. The account consists of:

- (1) money required to be distributed to the account under subsection (b);
- (2) additional amounts, if any, that another statute requires to be distributed to the account from the Indiana tobacco master settlement agreement fund;
- (3) appropriations to the account from other sources; and
- (4) grants, gifts, and donations intended for deposit in the account.

(b) Three million dollars (\$3,000,000) of the money received by the state under the master settlement agreement during each calendar year beginning on or after January 1, 2001, shall be distributed to the account from the Indiana tobacco master settlement agreement fund.

(c) The account shall be administered by the state department of health. Money in the account at the end of the state fiscal year does not revert to the state general fund but remains available for expenditure.

SECTION 2. IC 4-12-7-5 IS AMENDED TO READ AS FOLLOWS

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[EFFECTIVE UPON PASSAGE]: Sec. 5. **(a) Except as provided in subsection (e), a local board of health seeking to receive funding from the account established by section 4 of this chapter must file an application with the state department of health before October 1 of each year:**

- (1) specifying the planned use for the funds; and**
- (2) in a manner specified by the state department of health.**

**The state department of health may extend the deadline for filing the application required by this subsection upon a showing of good cause by the local board of health.**

~~(a)~~ **(b) Subject to subsection ~~(b)~~ (d) and subject to review by the budget committee and approval by the budget agency, on July 1 of each year the auditor of state shall distribute money from the account to each county before June 1 of each year the state department of health shall allocate money in the account to each county that has at least one (1) local board of health that has submitted an application that has been approved by the state department of health.**

**(c) The state department of health shall make two (2) distributions of the money allocated for a county described in subsection (b) to the local board of health not later than January 1 and July 1 of the year following the year in which the allocation is made under subsection (b). ~~in~~ Each distribution must be one-half (1/2) of the amount determined under STEP FOUR of the following formula:**

STEP ONE: Determine the amount of money, if any, available for distribution from the account.

STEP TWO: Subtract nine hundred twenty thousand dollars (\$920,000) from the amount determined under STEP ONE.

STEP THREE: Multiply the STEP TWO remainder by a fraction. The numerator of the fraction is the population of the county. The denominator of the fraction is the population of the state.

STEP FOUR: Add ten thousand dollars (\$10,000) to the STEP THREE product.

~~(b)~~ **(d) If less than nine hundred twenty thousand dollars (\$920,000) is available for distribution from the account on July 1 of any year, the amount of ~~the each~~ distribution from the account to each county ~~is~~ must be one-half (1/2) of the amount determined under STEP TWO of the following formula:**

STEP ONE: Determine the amount of money, if any, available for distribution from the account.

STEP TWO: Multiply the STEP ONE amount by a fraction. The numerator of the fraction is the population of the county. The

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denominator of the fraction is the population of the state.

**(e) Notwithstanding subsection (a), the application due in 2013 covers a period of eighteen (18) months starting July 1, 2013, and must be submitted by a local board of health by June 1, 2013, instead of October 1, 2013. The state department of health may extend the deadline described in this subsection upon a showing of good cause by the local board of health. Distribution for applications described in this subsection that are approved by the state department of health shall be made as follows:**

**(1) An amount equal to one-half (1/2) of the amount determined under STEP FOUR of the formula in subsection (c), not later than July 1, 2013.**

**(2) An amount equal to one-half (1/2) of the amount determined under STEP FOUR of the formula in subsection (c), not later than January 1, 2014.**

**(3) An amount equal to one-half (1/2) of the amount determined under STEP FOUR of the formula in subsection (c), not later than July 1, 2014.**

SECTION 3. IC 4-12-7-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 6. **(a) If only one (1) local board of health exists in a county the county fiscal body shall appropriate all has an application approved by the state department of health under this chapter, the state department of health shall make the distributions received by for the county under this chapter to that local board of health.**

**(b) If more than one (1) local board of health exists in a county has an application approved by the state department of health under this chapter, the county fiscal body state department of health shall appropriate all make the distributions received by for the county under this chapter to those local boards of health in amounts determined by the county fiscal body. state department of health based on the population of the county served by the local boards of health.**

SECTION 4. IC 16-19-3-30 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 30. **(a) The state department may establish a nonprofit subsidiary corporation that is exempt from federal income taxation under Section 501(c)(3) of the Internal Revenue Code, to solicit and accept private funding, gifts, donations, bequests, devises, and contributions.**

**(b) A subsidiary corporation established under this section:**

**(1) shall use money received under subsection (a) to carry out in any manner the purposes and programs of the state**

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department, which may include programs intended to reduce infant mortality, increase childhood immunizations, reduce obesity, and reduce smoking rates;

(2) shall report to the budget committee each year concerning:

(A) the use of money received under subsection (a); and

(B) the balances in any accounts or funds established by the subsidiary corporation; and

(3) may deposit money received under subsection (a) in an account or fund that is:

(A) administered by the subsidiary corporation; and

(B) not part of the state treasury.

(c) A subsidiary corporation established under this section is governed by a board of directors comprised of members appointed by the governor. Employees of the state department may serve on the board of directors.

(d) Employees of the state department shall provide administrative support for a subsidiary corporation established under this section. Employees of the state department directly involved in the subsidiary corporation established under this section may engage in fundraising activities on behalf of the subsidiary corporation.

(e) The state board of accounts shall annually audit a subsidiary corporation established under this section.

SECTION 5. IC 16-38-5-1, AS AMENDED BY P.L.122-2012, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 1. (a) The state department ~~may develop~~ and shall maintain an immunization data registry to collect, store, analyze, release, and report immunization data.

(b) Data in the immunization data registry may be used only for the following purposes:

(1) To assure that necessary immunizations are provided and overimmunization is avoided.

(2) To assess immunization coverage rates.

(3) To determine areas of underimmunization and other epidemiological research for disease control purposes.

(4) To document that required immunizations have been provided as required for school or child care admission.

(5) To accomplish other public health purposes as determined by the state department.

(c) The state department may adopt rules under IC 4-22-2 concerning who may input and retrieve information from the

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immunization data registry.

SECTION 6. IC 16-38-5-2, AS AMENDED BY P.L.122-2012, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2013]: Sec. 2. (a) **Except as provided in subsection (c)**, a provider, a physician's designee, a pharmacist's designee, or a person approved by the state department may provide immunization data to the immunization data registry in a manner prescribed by the state department and for the purposes allowed under this chapter.

**(b) This subsection takes effect July 1, 2015. Except as provided in subsections (c) and (e), a provider who is licensed under IC 25 and who is authorized within the provider's scope of practice to administer immunizations or the provider's designee shall electronically provide immunization data to the immunization data registry for all immunizations administered to individuals who are less than nineteen (19) years of age:**

- (1) not later than seven (7) business days after providing the immunization;**
- (2) in a manner prescribed by the state department, after reasonable notice; and**
- (3) for the purposes allowed under this chapter.**

~~(b)~~ **(c) An exemption A person is exempt from providing immunization data to the immunization data registry shall be granted if:**

- (1) the patient or ~~(2)~~ the patient's parent or guardian, if the patient is less than eighteen (18) years of age, has completed and filed a written immunization data exemption form with either the person who provides the immunization or the state department; or**
- (2) the patient is a resident of or is receiving services from a facility licensed under IC 16-28.**

**(d) The minimum immunization data that must be provided under subsection (b) is:**

- (1) Patient identification number.**
- (2) Patient first and last name.**
- (3) Patient date of birth.**
- (4) Patient address.**
- (5) Patient race.**
- (6) Patient gender.**
- (7) Vaccine for Children program eligibility, if the patient is eligible for the Vaccine for Children program.**
- (8) Dose at the administration level under the Vaccine for Children program, if the patient is eligible for the Vaccine for Children program.**



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**(9) Vaccination presentation or vaccination code using approved Immunization Information System (IIS) code type.**

**(10) Vaccination date administered.**

**(11) Lot number of the administered vaccine.**

The state department may expand or modify the list of minimum immunization data that must be provided under this section based on Centers for Disease Control Immunization Information System (IIS) minimum field requirements.

**(e) A provider who is unable to electronically provide immunization data to the immunization registry by July 1, 2015, shall submit a detailed plan for compliance with the requirements of subsection (b) to the state department no later than March 31, 2015. The state department will assist the provider so the provider is able to electronically provide immunization data in a reasonable amount of time.**

**(f)** The state department shall create and provide copies of immunization data exemption forms to:

(1) providers who are:

(A) licensed under IC 25; and

(B) authorized within the provider's scope of practice to administer immunizations; and

(2) individuals;

who request the form.

**(g)** The state department shall distribute, upon request, written information to be disseminated to patients that describes the immunization data registry. The written information must include the following:

(1) That, **beginning July 1, 2015**, the provider **may is required to report** immunization data to the immunization data registry.

(2) That the patient or the patient's parent or guardian, if the patient is less than eighteen (18) years of age, has a right to exempt disclosure of immunization data to the registry and may prevent disclosure by signing an immunization data exemption form.

(3) That the patient or the patient's parent or guardian, if the patient is less than eighteen (18) years of age, may have the individual's information removed from the immunization data registry.

(4) Instructions on how to have the information removed.

**SECTION 7. [EFFECTIVE JULY 1, 2013] (a) The health finance commission (IC 2-5-23) shall study the appropriateness of the implementation time line for the required reporting of**

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immunization data as described in IC 16-38-5-2, as amended by this act, considering:

(1) necessary improvements to the immunization registry system for providers who manually enter immunization data into the immunization registry portal, and ways to identify and reduce errors and inaccuracies between the immunization registry system and interfaced electronic medical record systems; and

(2) the progress in improving the interoperability of the immunization registry system and electronic medical record systems.

(b) The commission shall submit a report to the legislative council in a format required under IC 2-5-23-14 that includes the commission's findings and recommendations of topics studied under subsection (a).

(c) This SECTION expires January 1, 2015.

SECTION 8. An emergency is declared for this act.

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President of the Senate

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President Pro Tempore

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Speaker of the House of Representatives

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Governor of the State of Indiana

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