

MINUTES OF THE MEETING OF THE
INDIANA DEPARTMENT OF HEALTH
EXECUTIVE BOARD
January 14, 2026

The in-person and virtual (Microsoft Teams) meeting of the Executive Board of the Indiana Department of Health (IDOH) was called to order at 10:30 am in the Robert O. Yoho Executive Board Room of the IDOH building by Dr. Stephen Tharp, Chairperson. The following Board members were present for all or part of the meeting:

Stephen Tharp, MD (Chair)
Brenda Goff, HFA
Robin Marks, DVM, JD
Stephanie Collins, MBA, MSN, RN, NE-BC
Holly Robinson, MD
Suellen Sorensen, PharmD, BCPS
Armando Soto Rojas, DDS
Joshua Selig, PE
Doug Shuck, MBA, HFA
Matthew Sprunger, MD (virtual)
Troy Weirick, MD (virtual)
Rex McKinney, FACHE
Amelia Clark, DrPH, MA (virtual)
Lindsay Weaver, MD, FACEP (Secretary)

The following staff members were present for all or part of the meeting (in-person or via teams):

Jon Ferguson, Chief Operating Officer
Dr. Guy Crowder, Chief Medical Officer
Eden Bezy, Deputy Health Commissioner for Public Health Practice
Nicole Mize, Chief Strategy Officer
David McCormick, Director, Immunizations
Kelly MacKinnon, JD, Chief Legal Counsel
Erin Elam, Staff Attorney and Ethics Officer

Guests (all virtual):

Rae Pearson
Ella Madeline Braun
Jessica Devine
Amanda Hinton
Trisha Goodwin

Call to Order

Dr. Stephen Tharp, Chair, stated that a quorum was present. He then called the meeting to order at 10:30 am. He asked if Board members had any known conflicts of interest to declare. Hearing none he asked Jon Ferguson to read the Open Door Law statement, then proceeded with the meeting.

Minutes

Dr. Tharp asked for discussion and/or corrections to the minutes of the November 12, 2025, Executive Board meeting. Hearing none, he entertained a motion for approval. On a motion made by Brenda Goff, seconded by Dr. Robin Marks and passed by majority roll call vote of in-person and virtual attendees, the Board approved the minutes as presented.

OFFICIAL BUSINESS OF THE INDIANA DEPARTMENT OF HEALTH

Secretary's Report

Eden Bezy, Deputy Health Commissioner for Public Health Practice, provided an update on the Rural Health Transformation Program – GROW: Cultivating Hoosier Health. This funding will provide support for rural hospitals and communities to improve healthcare access, quality and outcomes through system transformation.

Indiana applied for \$1 billion through a collaborative effort led by the Family and Social Services Administration (FSSA) and the Indiana Department of Health (IDOH). Indiana proposed 12 GROW initiatives (11 statewide and 1 regional level) to improve health in rural areas:

- 1) Growing Care Coordination: Medical Operations Coordination Center (MOCC) and Alternate Payment Model Feasibility Study
- 2) Growing Community Connections through Indiana 211
- 3) Growing Improved Patient Outcomes through Enhanced Interoperability and Technology
- 4) Growing Pediatric & Obstetric Readiness in Rural Emergency Departments
- 5) Growing Cardiometabolic Health Standards of Care in Rural Indiana
- 6) Growing Access to Hospital Post-Discharge Medications
- 7) Growing Specialty through Expanded Teleconsult Capabilities
- 8) Growing Telehealth Access and Infrastructure
- 9) Growing our Rural Health Paraprofessional Workforce
- 10) Growing Clinical Training and Readiness
- 11) Growing our Rural Behavioral Health Workforce
- 12) Make Rural Indiana Healthy Again Regional Grants – these grant applications will be available in early 2026 with funding available on October 1, 2026. There is \$120 million annually (5-year grant program) across eight regional coalitions. All eight regions are expected to receive funding. Counties not deemed rural will not be eligible for direct funding.

Dr. Weaver provided an overview of the agency Strategic Pillars:

People & Culture: Cultivating a person-centered workplace. IDOH empowers, invests in, and prioritizes staff engagement, development, and a values-driven culture.

Customers & Service: Prioritizing internal and external customer experiences through meaningful relationships, stakeholder engagement, and service.

Quality of our work: Ensuring IDOH's operational standards are informed with accurate data, fostering quality improvement, and maximizing service efficiencies.

Sustaining our Future: Creating efficient systems to solidify sustainable public health excellence through agency-wide resource management and fiscal diversification.

Legislative Update

Jon Ferguson, Chief of Staff, provided a legislative update on behalf of Ethan Wright, new Director for Legislative and External Affairs, replacing Rachel Swartwood. Ethan is at a meeting at the State House. The agency bill, HB 1358, sponsored by Rep. Bradford Barrett, removes various reporting requirements for the IDOH and requires the IDOH to make certain information available on the IDOH website. It changes the statewide standing order for the dispensing of a smoking cessation product to a tobacco, vaping, or nicotine cessation product. It amends the date by which a hospital must submit the hospital's fiscal report and patient information report to the IDOH. It requires the IDOH to maintain a trauma registry and requires certain health care facilities to submit data to the registry. It establishes requirements for the handling and transporting of infectious waste. It set forth factors the IDOH must consider in determining the nature of and civil penalty for a violation of infectious waste requirements.

The bill also expands provisions concerning epinephrine and removes the expiration of provisions concerning lead screening for children. It requires a registered manufacturer, processor, repackager, or wholesale distributor of food, drugs, or cosmetics to comply with federal regulations concerning good manufacturing practices and allows the state health commission to enter and inspect the premises of the manufacturer, processor, repackager, or wholesale distributor. It permits the local health department to conduct inspections of certain manufacturers, processors, repackagers, or wholesale distributors. The bill amends the information a local child fatality review team and the statewide child fatality review committee may review in conducting a child fatality review and allows a suicide and overdose fatality review team and a fetal-infant mortality review team to provide records to the IDOH and requires the IDOH to maintain the confidentiality of these records. It requires a medical school to include nutrition education in the school's curriculum and requires students to complete a rural health rotation. The bill also voids administrative rules concerning infectious waste and state trauma registry.

Office of Legal Affairs

Rule Promulgation Process Refresher

Kelly MacKinnon, JD, Chief Legal Counsel, stated that under Indiana Code the Board approves agency rules. Rules will be on the agenda for discussion, initial thoughts and feedback, then will be back on the agenda for final adoption once the rules have been through the entire promulgation process. All rules are effective for five years, then must come back before the Board to re-adopt them to keep them active for another five years, unless something in the rule needs to be updated.

General Ethics Refresher

Erin Elam, Staff Attorney and Ethics Officer, reported that Board members must complete on-line ethics training every two years. She provided an overview of the gift rule which prohibits any state employee or special state employee from accepting anything of value from those who have a business relationship with the IDOH and who could seek to influence IDOH. A board member cannot participate in any matters relating to the decisions in which they may have a financial interest. Board members should recuse themselves so as not to violate the conflict of interest rule. She suggested the Board members review the ethics rules and training for special state appointees on the Inspector General's website. Erin also reminded Board members to be mindful of information in e-mails as it could be subject to a public records request.

Public Health Practice

Eden Bezy, Deputy Health Commissioner for Public Health Practice, stated that one of her main goals is to coordinate and convene the public facing commissions, i.e. Health & Human Services Commission, the Women, Children & Families Commission, and the Public Health Protection Commission to better align their missions and to avoid duplication of public health services.

Chief Strategy Officer

Nicole Mize, Chief Strategy Officer, introduced herself and stated that in this role she leads long-term planning, driving agency-wide strategic goals, performance management, and data-driven decision-making. She coordinates initiatives across divisions, monitors key metrics via dashboards, and aligns resources with public health priorities to improve agency performance.

Immunization & Local Health Services

David McCormick, Director of Immunization & Local Health Services, stated that Local Health Services, Immunization, Clinical Services and Local Health Resources are now in one Division. The combination of these programs expands access to services for Hoosiers by reducing duplication and ensuring more consistent availability of clinical care, immunizations, and public health programs across regions. Due to time constraints, he was not able to present his power point. It will be sent to the Board members.

Distribution

Dr. Tharp thanked staff for the professional new hire and separation reports and summary of final orders.

Adjournment

Dr. Tharp asked for any other business to come before the Board. Hearing no additional comments from the Board, staff and/or public, he adjourned the meeting at 12:05 pm. The next meeting is scheduled for March 11, 2026, at the IDOH building.