Journal of the Senate

State of Indiana

121st General Assembly — Second Regular Session

Twenty-Fourth Meeting Day — Thursday Afternoon — February 27, 2020

The Senate convened at 1:49 p.m., with the President of the Senate, Suzanne Crouch, in the Chair.

Prayer was offered by Pastor Brock Graham, Harvest Indy South.

The Pledge of Allegiance to the Flag was led by Senator Rodric D. Bray.

The Chair ordered the roll of the Senate to be called. Those present were:

Alting	Koch
Bassler	Kruse
Becker	Lanane
Bohacek	Leising
Boots	Melton
Bray	Merritt
Breaux	Messmer
Brown, L.	Mishler
Buchanan	Mrvan
Buck	Niemeyer
Busch	Niezgodski
Charbonneau	Perfect
Crane	Raatz
Crider	Randolph, Lonnie M. ▶
Donato	Rogers
Doriot	Ruckelshaus
Ford, J.D.	Sandlin
Ford, Jon ▶	Spartz
Freeman	Stoops
Garten	Tallian
Gaskill	Taylor, G.
Glick	Tomes
Grooms	Walker
Holdman	M. Young
Houchin	Zay

Roll Call 250: present 48; excused 2. [*Note: A ▶ indicates those who were excused.*] The Chair announced a quorum present. Pursuant to Senate Rule 5(d), no motion having been heard, the Journal of the previous day was considered read.

RESOLUTIONS ON FIRST READING

Senate Resolution 57

Senate Resolution 57, introduced by Senators Buck, Buchanan, Garten, and Niezgodski:

A SENATE RESOLUTION urging the Indiana Department of Transportation to rename the bridge at State Road 28 (Walnut Avenue) in Frankfort the "Staff Sergeant Jamie Jarboe Memorial Bridge".

Whereas, Staff Sergeant Jamie Jarboe died March 21, 2012, at the age of 27, in Topeka, Kansas, from wounds suffered on April 10, 2011, in Kandahar Province, Afghanistan, when enemy forces attacked his unit with small-arms fire;

Whereas, A 2003 graduate of Frankfort High School, Staff Sergeant Jarboe was a member of the 4th Squadron, 4th Cavalry Regiment, 1st Heavy Brigade Combat Team of the 1st Infantry Division from Fort Riley known as the Pale Riders;

Whereas, Staff Sergeant Jarboe joined the Indiana National Guard in 2005 and attended basic and advanced individual training at Fort Sill, Oklahoma;

Whereas, Staff Sergeant Jarboe's military assignments included B Battery, 1st Battalion, 320 Field Artillery at Fort Campbell, Kentucky, and Troop A, 4th Squadron, 4th Cavalry, 1st Heavy Brigade Combat Team;

Whereas, Staff Sergeant Jamie Jarboe was deployed to Afghanistan only months before he was shot in the neck, an injury that left him a quadriplegic, which required him to undergo more than 100 surgeries in the 12 months before he succumbed to his injuries;

Whereas, Staff Sergeant Jarboe's dedication and devotion to service was recognized with the Bronze Star Medal, the Purple Heart, the Army Commendation Medal (three Oak Leaf Clusters), the Army Achievement Medal, the Good Conduct Medal (two Oak Leaf Clusters), the National Defense Service Medal, the Afghanistan Campaign Medal (1CS), the Iraq Campaign Medal (3CS), the Global War on Terrorism Service Medal, the Armed Forces Reserve Medal (M Device), the NCO Professional Development Ribbon, the Army Service Ribbon, the Overseas Service Ribbon, the NATO Medal, the Combat Action Badge, the Air Assault Badge, and the Expert Marksmanship Badge (Rifle);

Whereas, A soldier's soldier, Staff Sergeant Jarboe dedicated his life to his country and his family; and

Whereas, Throughout history, brave individuals like Staff Sergeant Jamie Jarboe have made the ultimate sacrifice in defense of freedom throughout the world, and without individuals like Staff Sergeant Jamie Jarboe, freedom could not survive: Therefore,

Be it resolved by the Senate of the General Assembly of the State of Indiana:

SECTION 1. That the Indiana Senate urges the Indiana Department of Transportation to rename the bridge at State Road 28 (Walnut Avenue) in Frankfort the "Staff Sergeant Jamie Jarboe Memorial Bridge".

SECTION 2. The Secretary of the Senate is hereby directed to transmit copies of this Resolution to the family of Staff Sergeant Jamie Jarboe and the Commissioner of the Indiana Department of Transportation.

The resolution was read in full and referred to the Committee on Rules and Legislative Procedure.

REPORT OF THE SENATE COMMITTEE ON ETHICS

Madam President: Pursuant to Senate Rule 97, the Senate Committee on Ethics met on February 27, 2020, to render an advisory opinion with regard to Senator Houchin's request that the Committee consider whether or not she has a conflict of interest pertaining to HB 1348 which would require her to be excused from voting on this bill at any stage of the legislative process. The members in attendance were: Chairman L. Brown, Senator Charbonneau, Senator Walker, Senator Breaux, and Senator Mrvan.

The Senate Committee on Ethics has considered the facts presented by Senator Houchin and hereby recommends that Senator Houchin be excused from participation in all votes pertaining to House Bill 1348 at any stage in the legislative process because of her potential conflict of interest with regard to the legislation. The vote of the Committee was 5-0.

L. BROWN, Chair

Report adopted.

REPORTS FROM COMMITTEES

COMMITTEE REPORT

Madam President: The Senate Committee on Homeland Security and Transportation, to which was referred Senate Concurrent Resolution 28, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said resolution do pass.
Committee Vote: Yeas 6, Nays 0.

CRIDER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred Engrossed House Bill 1002, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.
Committee Vote: Yeas 8, Nays 0.

RAATZ, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill 1003, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 10-21-2 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 2. Specialized Weapons Training for Employees or Staff Members of a School

Sec. 1. As used in this chapter, "charter school" has the meaning set forth in IC 20-24-1-4.

Sec. 2. As used in this chapter, "nonpublic school" means a school that:

(1) is not:

(A) maintained by a school corporation; or

(B) a charter school; and

(2) employs at least one (1) employee.

The term includes a private school or a parochial school.

Sec. 3. As used in this chapter, "school board" means:

(1) when applicable to a public school of Indiana other than a charter school, the board of school trustees, board of school commissioners, school board of incorporated towns and cities, and township school trustees;

(2) when applicable to a nonpublic school, a person or agency in active charge and management of the school; or

(3) when applicable to a charter school, the body that administers the charter school.

Sec. 4. As used in this chapter, "school corporation" has the meaning set forth in IC 20-18-2-16(a).

Sec. 5. (a) This section applies to a school corporation, charter school, or nonpublic school in which the school board of the school corporation, charter school, or nonpublic school authorizes a person other than a law enforcement officer or school resource officer to carry a firearm in or on school property.

(b) Before an employee or any other staff member, other than a law enforcement officer or school resource officer, of a school corporation, charter school, or nonpublic school may carry a firearm in or on school property as authorized by a school board of the school corporation, charter school, or nonpublic school, the employee or staff member shall do the following:

(1) Successfully complete or have successfully completed:

(A) the specialized weapons training described in section 7 of this chapter; or

(B) other firearm training approved by a school corporation, charter school, or nonpublic school as described in section 10 of this chapter.

(2) Provide proof to the school board that the employee or other staff member has successfully completed the specialized weapons training described in section 7 of

this chapter or other approved firearm training described in section 10 of this chapter.

(3) Complete the Minnesota multiphasic personality inventory 2 (MMPI-II) and provide the results of the inventory to the school board as required under section 6 of this chapter.

(c) An employee or other staff member of a school corporation, charter school, or nonpublic school described in subsection (b) shall successfully complete sixteen (16) hours of weapons training each year that the employee or staff member is authorized and intends to carry a firearm in or on school property.

Sec. 6. Before an employee or other staff member of a school corporation, charter school, or nonpublic school described in section 5(b) of this chapter may carry a firearm in or on school property as authorized by the school board of the school corporation, charter school, or nonpublic school, the employee or other staff member must:

(1) successfully complete the Minnesota multiphasic personality inventory 2 (MMPI-II); and

(2) provide the results from the Minnesota multiphasic personality inventory 2 (MMPI-II) to the school board of the school corporation, charter school, or nonpublic school.

Sec. 7. (a) The specialized weapons training required under section 5(b)(1)(A) of this chapter must consist of at least forty (40) hours of training that includes the following:

(1) Instruction with an attorney licensed to practice law in Indiana concerning the legal responsibilities and liabilities regarding the lawful use of force to protect a person.

(2) Instruction by a mental health professional concerning the following:

(A) Effects on a person of taking another person's life.

(B) Identifying aberrant behavior.

(C) Identifying pre-indicators of violence.

(D) Effects of traumatic events.

(3) Instruction concerning 911 emergency telephone calls.

(4) Training concerning the following:

(A) Firearm auditory identifier and recognition exercises.

(B) Safe handling of weapons.

(C) Proper draw stroke.

(D) Empty hand skill development.

(E) Defending a weapon and retention of a weapon.

(F) Effective striking, disengaging, and staying on your feet.

(G) Fighting in awkward positions.

(H) When a firearm should be drawn or deployed and when a firearm should be not drawn or deployed.

(5) Instruction concerning the following:

(A) Vital area targets for stopping attackers.

(B) Reloading, movement, and communication.

(C) Review of weapons, including:

(i) an explanation regarding types of weapons;

(ii) functional elements of weapons;

(iii) malfunctions that are common in weapons; and

(iv) elimination of panic movement.

(D) Threat discernment.

(6) Instruction by a trauma trained health care provider licensed in Indiana or an active duty, retired, or reserve military medic of the United States armed forces or Indiana National Guard concerning the following:

(A) First aid to stop bleeding.

(B) Applying a tourniquet or use of an improvised tourniquet.

(C) Treating shock.

(D) Quick action field medical care.

(7) Training on the topic of marksmanship.

(8) Not less than twenty (20) hours of scenario based training.

(b) The specialized weapon training described in subsection (a) must be provided by a person or entity approved by the applicable school board under section 8 of this chapter.

Sec. 8. (a) A school board of a school corporation, charter school, or nonpublic school may approve one (1) or more persons or entities to provide specialized weapons training under section 5(b)(1)(A) of this chapter to the employees or other staff members of the school corporation, charter school, or nonpublic school.

(b) To be approved by a school board to provide specialized weapons training under this chapter, the person or entity must meet the following requirements:

(1) The person or entity applies for approval with the school board.

(2) The person or entity provides to the school board a training plan that meets or exceeds the requirements established under section 7(a) of this chapter.

(3) The person or entity has a training team that operates in consultation with the following:

(A) A physician licensed in Indiana.

(B) A law enforcement officer who:

(i) works in Indiana for a law enforcement agency; or

(ii) has retired from a law enforcement agency in Indiana.

(C) A mental health professional.

(D) An attorney licensed in Indiana who is a member of the Indiana bar.

(E) A firearms instructor who has a minimum of five (5) years of documented professional instruction experience.

(F) An educator who teaches at a school in Indiana.

(G) A martial arts instructor who is certified by a national martial arts organization.

Sec. 9. A school board may approve a person or entity to provide specialized weapons training under section 5(b)(1)(A) of this chapter if the person or entity meets the requirements of sections 7 and 8 of this chapter.

Sec. 10. (a) This section applies to a school corporation,

charter school, or nonpublic school that, before July 1, 2020, did the following:

(1) Authorized a person other than a law enforcement officer or school resource officer to carry a firearm in or on school property.

(2) Approved firearm training for an employee or other staff member of the school corporation, charter school, or nonpublic school.

(b) An employee or staff member of a school corporation, charter school, or nonpublic school meets the requirements of section 5(b)(1)(B) of this chapter if the employee or staff member successfully completes or completed firearm training approved by the school corporation, charter school, or nonpublic school as described in subsection (a).

Sec. 11. Nothing in this chapter may be construed to:

(1) require an employee or other staff member of a school corporation, charter school, or nonpublic school to carry a firearm in or on school property; or

(2) authorize a school board or a school corporation, charter school, or nonpublic school to require an employee or other staff member of a school corporation, charter school, or nonpublic school to carry a firearm in or on school property.".

Page 16, delete lines 28 through 42.

Delete page 17.

Page 18, delete lines 1 through 19.

Page 20, between lines 25 and 26, begin a new paragraph and insert:

"SECTION 14. IC 22-11-17-2, AS AMENDED BY P.L.211-2018(ss), SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) Except as provided in subsections (b) and (d) and section 2.5 of this chapter, an owner of a public building shall not permit an exit to be locked or obstructed in any manner that denies the public a continuous and unobstructed means of egress while lawfully occupied by anyone who is not an officer or an employee.

(b) The commission may adopt rules under IC 4-22-2 that:

(1) allow the owner of a public building to equip an exit with a special egress control device;

(2) limit the circumstances under which a special egress control device may be used; and

(3) allow an exit that was in compliance with the rules of the commission when the exit was constructed to be equipped with a special egress control device.

(c) An owner of a public building shall not permit a fire alarm to be disconnected or otherwise rendered inoperative, except in cases of routine maintenance or for repair.

(d) A school that has one (1) or more employees may barricade or block a door **under the following circumstances:**

(1) For a period not to exceed three (3) minutes in the event of an unplanned fire alarm activation in order for a designated school official to investigate the alarm. The school must initiate evacuation and safety procedures after the three (3) minute period expires. However, the period may be extended in the event that an active shooter has been verified to be on the school's property.

(2) During an active shooter drill or during an active shooter emergency in the school building. Any device used to block or barricade a door during an active shooter drill or active shooter emergency must be removed or disengaged immediately after an all clear has been given or if evacuation is necessary. Devices used under this subdivision must remain compliant with all other applicable building and fire safety laws, rules, and regulations.".

Page 20, between lines 41 and 42, begin a new paragraph and insert:

"SECTION 16. IC 35-47-9-1, AS AMENDED BY P.L.107-2019, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. (a) This chapter does not apply to the following:

(1) A:

(A) federal;

(B) state; or

(C) local;

law enforcement officer.

(2) A person who may legally possess a firearm and who, **subject to IC 10-21-2,** has been authorized by:

(A) a school board (as defined by IC 20-26-9-4); or

(B) the body that administers a charter school established under IC 20-24;

to carry a firearm in or on school property.

(3) Except as provided in subsection (b) or (c), a person who:

(A) may legally possess a firearm; and

(B) possesses the firearm in a motor vehicle.

(4) A person who is a school resource officer, as defined in IC 20-26-18.2-1.

(5) Except as provided in subsection (b) or (c), a person who:

(A) may legally possess a firearm; and

(B) possesses only a firearm that is:

(i) locked in the trunk of the person's motor vehicle;

(ii) kept in the glove compartment of the person's locked motor vehicle; or

(iii) stored out of plain sight in the person's locked motor vehicle.

(6) A person who:

(A) may legally possess a firearm; and

(B) possesses a firearm on school property in connection with or while:

(i) attending a worship service or religious ceremony conducted at a house of worship located on the school property; or

(ii) carrying out the person's official duties at a house of worship located on the school property, if the person is employed by or a volunteer at the house of worship.

This subdivision does not affect the right of a property owner to prohibit, in whole or in part, the possession of a firearm on a property where a school or house of worship is located.

(b) For purposes of subsection (a)(3) and (a)(5), a person does not include a person who is:

(1) enrolled as a student in any high school except if the person is a high school student and is a member of a

shooting sports team and the school's principal has approved the person keeping a firearm concealed in the person's motor vehicle on the days the person is competing or practicing as a member of a shooting sports team; or

(2) a former student of the school if the person is no longer enrolled in the school due to a disciplinary action within the previous twenty-four (24) months.

(c) For purposes of subsection (a)(3) and (a)(5), a motor vehicle does not include a motor vehicle owned, leased, or controlled by a school or school district unless the person who possesses the firearm is, **subject to IC 10-21-2,** authorized by the school or school district to possess a firearm.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1003 as printed February 21, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 4.

MISHLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Engrossed House Bill 1004, 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:

Delete everything after the enacting clause and insert the following:

SECTION 1. IC 12-7-2-174.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 174.7. (a) "Service facility location", for purposes of IC 12-15-11, means the address where the services of a provider facility or practitioner were provided.**

(b) The term consists of exact address and place of service codes as required on CMS forms 1500 and 1450, including an office, on-campus location of a hospital, and off-campus location of a hospital.

SECTION 2. IC 12-15-11-5, AS AMENDED BY P.L.195-2018, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. (a) A provider who participates in the Medicaid program must comply with the enrollment requirements that are established under rules adopted under IC 4-22-2 by the secretary.

(b) A provider who participates in the Medicaid program may be required to ~~use the centralized credentials verification organization established in section 9 of this chapter.~~ **include the address of the service facility location in order to obtain Medicaid reimbursement for a claim for health care services from the office or a managed care organization.**

(c) The office or a managed care organization is not required to accept a claim for health care services that does not contain the service facility location.

SECTION 3. IC 12-15-11-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. **(a)** After a provider signs a provider agreement under this chapter, the office may not exclude the provider from participating in the Medicaid program by entering into an exclusive contract with another provider or group of providers, except as provided under section 7 of this chapter.

(b) The office or a managed care organization contracting with the office may not prohibit a provider from participating in a network of another insurer, managed care organization, or health maintenance organization.

SECTION 4. IC 16-18-2-163.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 163.6. (a) "Health care services", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-1.**

(b) "Health care services", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-1.

SECTION 5. IC 16-18-2-167.8 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 167.8. (a) "Health maintenance organization", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-2.**

(b) "Health maintenance organization", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-2.

SECTION 6. IC 16-18-2-188.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 188.4. "Individual provider form", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-3.**

SECTION 7. IC 16-18-2-190.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 190.7. "Institutional provider", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-4.**

SECTION 8. IC 16-18-2-190.8 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 190.8. "Institutional provider form", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-5.**

SECTION 9. IC 16-18-2-190.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 190.9. "Insurer", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-6.**

(b) "Insurer", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-3.

SECTION 10. IC 16-18-2-254.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 254.7. "Office setting", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-7.**

SECTION 11. IC 16-18-2-288, AS AMENDED BY P.L.96-2014, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 288. (a) "Practitioner", for purposes of IC 16-42-19, has the meaning set forth in IC 16-42-19-5.

(b) "Practitioner", for purposes of IC 16-41-14, has the meaning set forth in IC 16-41-14-4.

(c) "Practitioner", for purposes of IC 16-42-21, has the meaning set forth in IC 16-42-21-3.

(d) "Practitioner", for purposes of IC 16-42-22 and IC 16-42-25, has the meaning set forth in IC 16-42-22-4.5.

(e) "Practitioner", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-4.

SECTION 12. IC 16-18-2-295, AS AMENDED BY P.L.161-2014, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 295. (a) "Provider", for purposes of IC 16-21-8, has the meaning set forth in IC 16-21-8-0.2.

(b) "Provider", for purposes of IC 16-38-5, IC 16-39 (except for IC 16-39-7), and IC 16-41-1 through IC 16-41-9, means any of the following:

(1) An individual (other than an individual who is an employee or a contractor of a hospital, a facility, or an agency described in subdivision (2) or (3)) who is licensed, registered, or certified as a health care professional, including the following:

(A) A physician.
(B) A psychotherapist.
(C) A dentist.
(D) A registered nurse.
(E) A licensed practical nurse.
(F) An optometrist.
(G) A podiatrist.
(H) A chiropractor.
(I) A physical therapist.
(J) A psychologist.
(K) An audiologist.
(L) A speech-language pathologist.
(M) A dietitian.
(N) An occupational therapist.
(O) A respiratory therapist.
(P) A pharmacist.
(Q) A sexual assault nurse examiner.

(2) A hospital or facility licensed under IC 16-21-2 or IC 12-25 or described in IC 12-24-1 or IC 12-29.

(3) A health facility licensed under IC 16-28-2.

(4) A home health agency licensed under IC 16-27-1.

(5) An employer of a certified emergency medical technician, a certified advanced emergency medical technician, or a licensed paramedic.

(6) The state department or a local health department or an employee, agent, designee, or contractor of the state department or local health department.

(c) "Provider", for purposes of IC 16-39-7-1, has the meaning set forth in IC 16-39-7-1(a).

(d) "Provider", for purposes of IC 16-48-1, has the meaning set forth in IC 16-48-1-3.

(e) "Provider", for purposes of IC 16-51-1, has the meaning set forth in IC 16-51-1-8.

SECTION 13. IC 16-18-2-295.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 295.3. "Provider facility", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-5.**

SECTION 14. IC 16-18-2-327.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 327.7. "Service facility location", for purposes of IC 16-51-2, has the meaning set forth in IC 16-51-2-6.**

SECTION 15. IC 16-51 IS ADDED TO THE INDIANA CODE AS A **NEW** ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

ARTICLE 51. HEALTH CARE REQUIREMENTS

Chapter 1. Health Care Provider Billing

Sec. 1. (a) As used in this chapter, "health care services" means health care related services or products rendered or sold by a provider within the scope of the provider's license or legal authorization.

(b) The term includes hospital, medical, surgical, dental, vision, and pharmaceutical services or products.

Sec. 2. As used in this chapter, "health maintenance organization" has the meaning set forth in IC 27-13-1-19.

Sec. 3. (a) As used in this chapter, "individual provider form" means a medical claim form, including an electronic version of the form, that:

(1) is accepted by the federal Centers for Medicare and Medicaid Services for use by individual providers or groups of providers; and

(2) includes a claim field for disclosure of the site at which the health care services to which the form relates were provided.

(b) The term includes the following:

(1) The CMS-1500 form.

(2) The HCFA-1500 form.

Sec. 4. As used in this chapter, "institutional provider" means a facility, operated by a hospital licensed under IC 16-21-2, in which both of the following services are provided:

(1) Emergency services.

(2) Inpatient services.

Sec. 5. (a) As used in this chapter, "institutional provider form" means a medical claim form, including an electronic version of the form, that is accepted by the federal Centers for Medicare and Medicaid Services for use by institutional providers.

(b) The term includes the following:

(1) The 837 Institutional form.

(2) The CMS-1450 form.

(3) The UB-04 form.

Sec. 6. As used in this chapter, "insurer" has the meaning set forth in IC 27-8-11-1(e).

Sec. 7. As used in this chapter, "office setting" means a location not physically located within the facility of an institutional provider and where a provider routinely provides health examinations and diagnosis and treatment of illness or injury on an ambulatory basis.

Sec. 8. As used in this chapter, "provider" means an individual or entity duly licensed or legally authorized to provide health care services.

Sec. 9. (a) A bill for health care services provided by a provider in an office setting:

(1) must not be submitted on an institutional provider form; and

(2) must be submitted on an individual provider form.

(b) An insurer, health maintenance organization, employer, or other person responsible for the payment of the cost of health care services provided by a provider in an

office setting is not required to accept a bill for the health care services that is submitted on an institutional provider form.

(c) This section applies only to an institutional provider form or an individual provider form submitted after December 31, 2020.

Sec. 10. Before March 1 of each year an insurer and health maintenance organization shall submit information, specified by the department of insurance, concerning compliance by providers under this chapter.

Sec. 11. The department of insurance shall adopt rules under IC 4-22-2 for the enforcement of this chapter.

Chapter 2. Health Care Service Location Billing

Sec. 1. (a) As used in this chapter, "health care services" means health care related services or products rendered or sold by a provider within the scope of the provider's license or legal authorization.

(b) The term includes hospital, medical, surgical, dental, vision, and pharmaceutical services or products.

Sec. 2. As used in this chapter, "health maintenance organization" has the meaning set forth in IC 27-13-1-19.

Sec. 3. As used in this chapter, "insurer" has the meaning set forth in IC 27-8-11-1(e).

Sec. 4. As used in this chapter, "practitioner" means an individual or entity duly licensed or legally authorized to provide health care services.

Sec. 5. As used in this chapter, "provider facility" means any of the following:

(1) A hospital.

(2) A skilled nursing facility.

(3) An end stage renal disease provider.

(4) A home health agency.

(5) A hospice organization.

(6) An outpatient physical therapy, occupational therapy, or speech pathology service provider.

(7) A comprehensive outpatient rehabilitation facility.

(8) A community mental health center.

(9) A critical access hospital.

(10) A federally qualified health center.

(11) A histocompatibility laboratory.

(12) An Indian health service facility.

(13) An organ procurement organization.

(14) A religious nonmedical health care institution.

(15) A rural health clinic.

Sec. 6. As used in this chapter, "service facility location" means the address where the services of a provider facility or practitioner were provided. The term consists of exact address and place of service codes as required on CMS forms 1500 and 1450, including an office, on-campus location of a hospital, and off-campus location of a hospital.

Sec. 7. (a) A provider facility or practitioner shall include the address of the service facility location in order to obtain reimbursement for a commercial claim for health care services from an insurer, health maintenance organization, employer, or other person responsible for the payment of the cost of health care services.

(b) An insurer, health maintenance organization, employer, or other person responsible for the payment of the cost of health care services is not required to accept a bill for health care services that does not contain the service facility location.

Sec. 8. A patient is not liable for any additional payment that is the result of a practitioner or provider facility filing an incorrect form or not including the correct service facility location as required under this chapter.

SECTION 16. IC 25-1-9-23 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 23. (a) As used in this section, "covered individual" means an individual who is entitled to be provided health care services at a cost established according to a network plan.**

(b) As used in this section, "in network practitioner" means a practitioner who is required under a network plan to provide health care services to covered individuals at not more than a preestablished rate or amount of compensation.

(c) As used in this section, "network plan" means a plan under which facilities and practitioners are required by contract to provide health care services to covered individuals at not more than a preestablished rate or amount of compensation.

(d) As used in this section, "practitioner" means the following:

(1) An individual licensed under IC 25 who provides professional health care services to individuals in a facility.

(2) An organization:

(A) that consists of practitioners described in subdivision (1); and

(B) through which practitioners described in subdivision (1) provide health care services.

(3) An entity that:

(A) is not a facility; and

(B) employs practitioners described in subdivision (1) to provide health care services.

(e) An in network practitioner who provides health care services to a covered individual may not charge more for the health care services than allowed according to the rate or amount of compensation established by the individual's network plan.

(f) An out of network practitioner who provides health care services to a covered individual may charge more for the health care services than allowed according to the rate or amount of compensation established by the individual's network plan if all of the following conditions are met:

(1) At least five (5) days before the health care services are scheduled to be provided to the covered individual, the practitioner provides to the covered individual, on a form separate from any other form provided to the covered individual by the practitioner, a statement in conspicuous type at least as large as fourteen (14) point type that meets the following requirements:

(A) Includes a notice reading substantially as follows: "[Name of practitioner] intends to charge you more for [name or description of health care services] than allowed according to the rate or amount of compensation established by the network

plan applying to your coverage. [Name of practitioner] is not entitled to charge this much for [name or description of health care services] unless you give your written consent to the charge.".

(B) Sets forth the practitioner's good faith estimate of the amount that the practitioner intends to charge for the health care services provided to the covered individual.

(C) Includes a notice reading substantially as follows concerning the good faith estimate set forth under clause (B): "The estimate of our intended charge for [name or description of health care services] set forth in this statement is provided in good faith and is our best estimate of the amount we will charge. If our actual charge for [name or description of health care services] exceeds our estimate, we will explain to you why the charge exceeds the estimate.".

(2) The covered individual signs the statement provided under subdivision (1), signifying the covered individual's consent to the charge for the health care services being greater than allowed according to the rate or amount of compensation established by the network plan.

(g) If the charge of a practitioner for health care services provided to a covered individual exceeds the estimate provided to the covered individual under subsection (f)(1)(B), the facility or practitioner shall explain in a writing provided to the covered individual why the charge exceeds the estimate.

SECTION 17. IC 25-1-9.8 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 9.8. Practitioner Good Faith Estimates

Sec. 1. As used in this chapter, "covered individual" means an individual who is entitled to be provided health care services according to a health carrier's network plan.

Sec. 1.5. As used in this chapter, "episode of care" means the medical care ordered to be provided for a specific medical procedure, condition, or illness.

Sec. 2. As used in this chapter, "good faith estimate" means a reasonable estimate of the price a practitioner anticipates charging for an episode of care for nonemergency health care services that:

(1) is made by a practitioner under this chapter upon the request of:

(A) the individual for whom the nonemergency health care service has been ordered; or

(B) the provider facility in which the nonemergency health care service will be provided; and

(2) is not binding upon the practitioner.

Sec. 3. (a) As used in this chapter, "health carrier" means an entity:

(1) that is subject to IC 27 and the administrative rules adopted under IC 27; and

(2) that enters into a contract to:

(A) provide health care services;

(B) deliver health care services;

(C) arrange for health care services; or

(D) pay for or reimburse any of the costs of health care services.

(b) The term also includes the following:

(1) An insurer, as defined in IC 27-1-2-3(x), that issues a policy of accident and sickness insurance, as defined in IC 27-8-5-1(a).

(2) A health maintenance organization, as defined in IC 27-13-1-19.

(3) An administrator (as defined in IC 27-1-25-1(a)) that is licensed under IC 27-1-25.

(4) A state employee health plan offered under IC 5-10-8.

(5) A short term insurance plan (as defined by IC 27-8-5.9-3).

(6) Any other entity that provides a plan of health insurance, health benefits, or health care services.

Sec. 4. As used in this chapter, "in network", when used in reference to a practitioner, means that the health care services provided by the practitioner are subject to a health carrier's network plan.

Sec. 5. (a) As used in this chapter, "network" means a group of provider facilities and practitioners that:

(1) provide health care services to covered individuals; and

(2) have agreed to, or are otherwise subject to, maximum limits on the prices for the health care services to be provided to the covered individuals.

(b) The term includes the following:

(1) A network described in subsection (a) that is established pursuant to a contract between an insurer providing coverage under a group health policy and:

(A) individual provider facilities and practitioners;

(B) a preferred provider organization; or

(C) an entity that employs or represents providers, including:

(i) an independent practice association; and

(ii) a physician-hospital organization.

(2) A health maintenance organization, as defined in IC 27-13-1-19.

Sec. 6. As used in this chapter, "network plan" means a plan of a health carrier that:

(1) requires a covered person to receive; or

(2) creates incentives, including financial incentives, for a covered person to receive;

health care services from one (1) or more providers that are under contract with, managed by, or owned by the health carrier.

Sec. 7. As used in this chapter, "nonemergency health care service" means a discrete service or series of services ordered by a practitioner for an episode of care for the:

(1) diagnosis;

(2) prevention;

(3) treatment;

(4) cure; or

(5) relief;

of a physical, mental, or behavioral health condition, illness, injury, or disease that is not provided on an emergency or urgent care basis.

Sec. 8. As used in this chapter, "practitioner" means an individual or entity duly licensed or legally authorized to provide health care services.

Sec. 8.5. As used in this chapter, "price" means the negotiated rate between the:

(1) provider facility and practitioner; and

(2) covered individual's primary health carrier.

Sec. 9. As used in this chapter, "provider" means:

(1) a provider facility; or

(2) a practitioner.

Sec. 10. As used in this chapter, "provider facility"means any of the following:

(1) A hospital licensed under IC 16-21-2.

(2) An ambulatory outpatient surgery center licensed under IC 16-21-2.

(3) An abortion clinic licensed under IC 16-21-2.

(4) A birthing center licensed under IC 16-21-2.

(5) Except for an urgent care facility (as defined by IC 27-1-46-10.5), a facility that provides diagnostic services to the medical profession or the general public.

(6) A laboratory where clinical pathology tests are carried out on specimens to obtain information about the health of a patient.

(7) A facility where radiologic and electromagnetic images are made to obtain information about the health of a patient.

(8) An infusion center that administers intravenous medications.

Sec. 11. (a) This section does not apply to an individual who is a Medicaid recipient.

(b) An individual for whom a nonemergency health care service has been ordered may request from the practitioner who may provide the nonemergency health care service a good faith estimate of the total price the practitioner will charge for providing the nonemergency health care service.

(c) A practitioner who receives a request from a patient under subsection (b) shall, not more than five (5) business days after receiving all the relevant information from the individual, provide to the individual a good faith estimate of the price that the practitioner will charge for providing the nonemergency health care service.

(d) A practitioner must ensure that a good faith estimate provided to an individual under this section is accompanied by a notice stating that:

(1) an estimate provided under this section is not binding on the practitioner;

(2) the price the practitioner charges the individual may vary from the estimate based on the individual's medical needs; and

(3) the estimate provided under this section is only valid for thirty (30) days.

(e) A practitioner may not charge an individual for information provided under this section.

Sec. 12. (a) If:

(1) the individual who requests a good faith estimate from a practitioner under this chapter is a covered individual with respect to a network plan; and

(2) the practitioner from which the individual requests the good faith estimate is in network with respect to the same network plan;

the good faith estimate that the practitioner provides to the individual under this chapter must be based on the negotiated price to which the practitioner has agreed as an in network provider.

(b) If the individual who requests a good faith estimate from a practitioner under this chapter:

(1) is not a covered individual with respect to any network plan; or

(2) is not a covered individual with respect to a network plan with respect to which the practitioner is in network;

the good faith estimate that the practitioner provides to the individual under this chapter must be based on the price that the practitioner charges for the nonemergency health care service in the absence of any network plan.

Sec. 13. A practitioner may provide a good faith estimate to an individual under this chapter:

(1) in a writing delivered to the individual;

(2) by electronic mail; or

(3) through a mobile application or other Internet web based method, if available;

according to the preference expressed by the individual.

Sec. 14. (a) A good faith estimate provided by a practitioner to an individual under this chapter must meet the following requirements:

(1) Provide a summary of the services and material items that the good faith estimate is based on.

(2) Include:

(A) the price that the provider facility in which the health care service will be performed will charge for:

(i) the use of the provider facility to care for the individual for the nonemergency health care service;

(ii) the services rendered by the staff of the provider facility in connection with the nonemergency health care service; and

(iii) medication, supplies, equipment, and material items to be provided to or used by the individual while the individual is present in the provider facility in connection with the nonemergency health care service;

(B) the price charged for the services of all practitioners, support staff, and other persons who provide professional health services:

(i) who may provide services to or for the individual during the individual's presence in the provider facility for the nonemergency health care service; and

(ii) for whose services the individual will be charged separately from the charge of the provider facility;

for imaging, laboratory services, diagnostic services, therapy, observation services, and other services expected to be provided to the individual for the episode of care.

(3) Include a total figure that is a sum of the estimated

prices referred to in subdivisions (1) and (2).

(b) Subsection (a) does not prohibit a practitioner from providing to an individual a good faith estimate that indicates how much of the total figure stated under subsection (a)(2) will be the individual's out-of-pocket expense after the health carrier's payment of charges.

(c) A health carrier must provide a practitioner with the information needed by the practitioner to comply with the requirements under this chapter not more than two (2) business days after receiving the request.

(d) A practitioner is not subject to the penalties under section 18 of this chapter if:

(1) a health carrier or provider facility fails to provide the practitioner with the information as required under subsection (c);

(2) the practitioner provides the individual with a good faith estimate based on any information that the practitioner has; and

(3) the practitioner provides the individual with an updated good faith estimate after the health carrier or provider facility has provided the information required under subsection (c).

Sec. 15. If:

(1) a practitioner is expected to provide a nonemergency health care service to an individual in a provider facility; and

(2) the provider facility receives a request from an individual for a good faith estimate under IC 27-1-46;

the practitioner, upon request from the provider facility, shall provide to the provider facility a good faith estimate of the practitioner's price for providing the nonemergency health care service to enable the provider facility to comply with IC 27-1-46-11.

Sec. 16. (a) A practitioner that has ordered the individual for a nonemergency health care service shall provide to the individual an electronic or paper copy of a written notice that states the following, or words to the same effect: "A patient may at any time ask a health care provider for an estimate of the price the health care providers and health facility will charge for providing a nonemergency medical service. The law requires that the estimate be provided within 5 business days.".

(b) The state department may adopt rules under IC 4-22-2 to establish requirements for practitioners to provide additional charging information under this section.

Sec. 17. If:

(1) a practitioner receives a request for a good faith estimate under this chapter; and

(2) the patient is eligible for Medicare coverage;

the practitioner shall provide a good faith estimate to the patient within five (5) business days based on available Medicare rates.

Sec. 18. The appropriate board (as defined in IC 25-1-9-1) may take action against a practitioner:

(1) under IC 25-1-9-9(a)(3) or IC 25-1-9-9(a)(4) for an initial violation or isolated violations of this chapter; or

(2) under IC 25-1-9-9(a)(6) for repeated or persistent violations of this chapter;

concerning the providing of a good faith estimate to an individual for whom a nonemergency health care service has been ordered or the providing of notice in the practitioner's office or on the practitioner's Internet web site that a patient may at any time ask for an estimate of the price that the patient will be charged for a medical service.

SECTION 18. IC 25-1-9.9 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 9.9. Practitioner Employment Contracts And Non-Compete Agreements

Sec. 1. This chapter applies to an employment contract entered into, modified, renewed, or extended after June 30, 2020.

Sec. 2. As used in this chapter, "employee" means a practitioner (as defined in IC 25-1-9-2) employed by an employer for wages or salary. The term includes an individual who has received an offer of employment from a prospective employer.

Sec. 3. As used in this chapter, "employer" means an individual, corporation, partnership, limited liability company, or any other legal entity that has at least one (1) employee and is legally doing business in Indiana.

Sec. 4. As used in this chapter, "non-compete agreement" means a contractual provision by which an employer attempts to limit an employee's ability to seek future employment or engage in future business activity after the employment relationship has terminated.

Sec. 5. An employment contract entered into by an employer and employee may not contain a non-compete agreement.

Sec. 6. A non-compete agreement in an employment contract in violation of this chapter is unenforceable and void.

SECTION 19. IC 25-22.5-17 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 17. Physician's Patient Information

Sec. 1. If a physician licensed under this article leaves the employment of an employer, the following apply:

(1) The employer of the physician must provide the physician with a copy of any notice that:

(A) concerns the physician's departure from the employer; and

(B) was sent to any patient seen or treated by the physician during the two (2) year period preceding the termination of the physician's employment or the expiration of the physician's contract. However, the patient names and contact information must be redacted from the copy of the notice provided from the employer of the physician to the physician.

(2) The physician's employer must, in good faith, provide the physician's last known or current contact and location information to a patient who:

(A) requests updated contact and location information for the physician; and

(B) was seen or treated by the physician during the two (2) year period preceding the termination of the

physician's employment or the expiration of the physician's contract.

(3) The physician's employer must provide the physician with:

(A) access to; or

(B) copies of;

any medical record associated with a patient described in subdivision (1) or (2) upon receipt of the patient's consent.

(4) The physician's employer may not provide patient medical records to a requesting physician in a format that materially differs from the format used to create or store the medical record during the routine or ordinary course of business, unless a different format is mutually agreed upon by the parties. Paper or portable document format copies of the medical records satisfy the formatting provisions of this chapter.

Sec. 2. A person or entity required to create, copy, or transfer a patient medical record for a reason specified in this chapter may charge a reasonable fee for the service as permitted under applicable state or federal law.

SECTION 20. IC 27-1-3-7, AS AMENDED BY P.L.278-2013, SECTION 19, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 7. (a) The department may promulgate rules and regulations for any of the following enumerated purposes:

(1) For the conduct of the work of the department.

(2) Prescribing the methods and standards to be used in making the examinations and prescribing the forms of reports of the several insurance companies to which IC 27-1 is applicable.

(3) Defining what is a safe or an unsafe manner and a safe or an unsafe condition for conducting business by any insurance company to which IC 27-1 is applicable.

(4) For the establishment of safe and sound methods for the transaction of business by such insurance companies and for the purpose of safeguarding the interests of policyholders, creditors, and shareholders respecting the withdrawal or payment of funds by any life insurance company in times of emergency. Any rule or regulation promulgated under this subdivision may apply to one (1) or more insurance companies as the department may determine.

(5) For the administration and termination of the affairs of any such insurance company which is in involuntary liquidation or whose business and property have been taken possession of by the department for the purpose of rehabilitation, liquidation, conservation, or dissolution under IC 27-1.

(6) For the regulation of the solicitation or use of proxies, in general and as they concern consents or authorizations, in respect of securities issued by any domestic stock company for the purpose of protecting investors by prescribing the form of proxies, including such consents or authorizations, and by requiring adequate disclosure of information relevant to such proxies, including such consents or authorizations, and relevant to the business to be transacted at any meeting of shareholders with respect to which such proxies, including such consents or authorizations, may be used, which regulations may, in general, conform to those prescribed by the National Association of Insurance Commissioners.

(7) For regulation related to a health benefit exchange established under the federal Patient Protection and Affordable Care Act (P.L. 111-148), as amended by the federal Health Care and Education Reconciliation Act of 2010 (P.L. 111-152), and operating in Indiana.

(b) The department may adopt a rule under IC 4-22-2 to provide reasonable simplification of the terms and coverage of individual and group Medicare supplement accident and sickness insurance policies and individual and group Medicare supplement subscriber contracts in order to facilitate public understanding and comparison and to eliminate provisions contained in those policies or contracts which may be misleading or confusing in connection either with the purchase of those coverages or with the settlement of claims and to provide for full disclosure in the sale of those coverages.

(c) The department shall adopt rules concerning the enforcement of health care billing requirements in IC 16-51-1.

SECTION 21. IC 27-1-45 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 45. Health Facility Compensation

Sec. 1. As used in this chapter, "covered individual" means an individual who is entitled to be provided health care services at a cost established according to a network plan.

Sec. 2. As used in this chapter, "facility" means an institution in which health care services are provided to individuals. The term includes:

(1) hospitals and other licensed ambulatory surgical centers; and

(2) ambulatory outpatient surgical centers.

Sec. 3. As used in this chapter, "in network provider" means a provider that is required under a network plan to provide health care services to covered individuals at not more than a preestablished rate or amount of compensation.

Sec. 4. As used in this chapter, "network plan" means a plan under which providers are required by contract to provide health care services to covered individuals at not more than a preestablished rate or amount of compensation.

Sec. 5. As used in this chapter, "practitioner" means the following:

(1) An individual licensed under IC 25 who provides professional health care services to individuals in a facility.

(2) An organization:

(A) that consists of practitioners described in subdivision (1); and

(B) through which practitioners described in subdivision (1) provide health care services.

(3) An entity that:

(A) is not a facility; and

(B) employs practitioners described in subdivision (1) to provide health care services.

Sec. 6. As used in this chapter, "provider" means:

(1) a facility; or

(2) a practitioner.

Sec. 7. (a) When a covered individual receives health care services in a facility that is an in network provider, neither:

(1) the facility; nor

(2) a practitioner who provides health care services in the facility;

may charge more for the health care services provided to the covered individual than allowed according to the rate or amount of compensation established by the individual's network plan.

(b) A facility that is an out of network provider or a practitioner who provides health care services in the facility may charge more for the health care services provided to the covered individual than allowed according to the rate or amount of compensation established by the individual's network plan if all of the following conditions are met:

(1) At least five (5) days before the health care services are scheduled to be provided to the covered individual, the facility or practitioner provides to the covered individual, on a form separate from any other form provided to the covered individual by the facility or practitioner, a statement in conspicuous type at least as large as fourteen (14) point type that meets the following requirements:

(A) Includes a notice reading substantially as follows: "[Name of facility or practitioner] intends to charge you more for [name or description of health care services] than allowed according to the rate or amount of compensation established by the network plan applying to your coverage. [Name of facility or practitioner] is not entitled to charge this much for [name or description of health care services] unless you give your written consent to the charge.".

(B) Sets forth the facility's or practitioner's good faith estimate of the amount that the facility or practitioner intends to charge for the health care services provided to the covered individual.

(C) Includes a notice reading substantially as follows concerning the good faith estimate set forth under clause (B): "The estimate of our intended charge for [name or description of health care services] set forth in this statement is provided in good faith and is our best estimate of the amount we will charge.".

(2) The covered individual signs the statement provided under subdivision (1), signifying the covered individual's consent to the charge for the health care services being greater than allowed according to the rate or amount of compensation established by the network plan.

(c) If the charge of a facility or practitioner for health care services provided to a covered individual exceeds the estimate provided to the covered individual under subsection (b)(1)(B), the facility or practitioner shall explain in a writing provided to the covered individual why the charge exceeds the estimate.

Sec. 8. (a) The insurance commissioner may, after notice and hearing under IC 4-21.5, impose on the provider facility a civil penalty of not more than one thousand dollars ($1,000) for each violation of this chapter.

(b) A civil penalty collected under this section shall be deposited in the department of insurance fund established by IC 27-1-3-28.

SECTION 22. IC 27-1-46 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 46. Provider Facility Good Faith Estimates

Sec. 0.5. Nothing in this chapter prohibits:

(1) a self-funded health benefit plan that complies with the federal Employee Retirement Income Security Act (ERISA) of 1974 (29 U.S.C. 1001 et seq.); or

(2) a self-insurance program established to provide group health coverage as described in IC 5-10-8-7(b), or a contract for health services as described in IC 5-10-8-7(c);

from providing information requested by a practitioner or provider facility under this chapter.

Sec. 1. As used in this chapter, "covered individual" means an individual who is entitled to be provided health care services according to a health carrier's network plan.

Sec. 1.5. As used in this chapter, "episode of care" means the medical care ordered to be provided for a specific medical procedure, condition, or illness.

Sec. 2. As used in this chapter, "good faith estimate" means a reasonable estimate of the price a provider anticipates charging for an episode of care for nonemergency health care services that:

(1) is made by a provider under this chapter upon the request of the individual for whom the nonemergency health care service has been ordered; and

(2) is not binding upon the provider.

Sec. 3. (a) As used in this chapter, "health carrier" means an entity:

(1) that is subject to IC 27 and the administrative rules adopted under IC 27; and

(2) that enters into a contract to:

(A) provide health care services;

(B) deliver health care services;

(C) arrange for health care services; or

(D) pay for or reimburse any of the costs of health care services.

(b) The term also includes the following:

(1) An insurer, as defined in IC 27-1-2-3(x), that issues a policy of accident and sickness insurance, as defined in IC 27-8-5-1(a).

(2) A health maintenance organization, as defined in IC 27-13-1-19.

(3) An administrator (as defined in IC 27-1-25-1(a)) that is licensed under IC 27-1-25.

(4) A state employee health plan offered under IC 5-10-8.

(5) A short term insurance plan (as defined by IC 27-8-5.9-3).

(6) Any other entity that provides a plan of health insurance, health benefits, or health care services.

Sec. 4. As used in this chapter, "in network", when used in reference to a provider, means that the health care services provided by the provider are subject to a health carrier's network plan.

Sec. 5. (a) As used in this chapter, "network" means a group of provider facilities and practitioners that:

(1) provide health care services to covered individuals; and

(2) have agreed to, or are otherwise subject to, maximum limits on the prices for the health care services to be provided to the covered individuals.

(b) The term includes the following:

(1) A network described in subsection (a) that is established pursuant to a contract between an insurer providing coverage under a group health policy and:

(A) individual provider facilities and practitioners;

(B) a preferred provider organization; or

(C) an entity that employs or represents providers, including:

(i) an independent practice association; and

(ii) a physician-hospital organization.

(2) A health maintenance organization, as defined in IC 27-13-1-19.

Sec. 6. As used in this chapter, "network plan" means a plan of a health carrier that:

(1) requires a covered person to receive; or

(2) creates incentives, including financial incentives, for a covered person to receive;

health care services from one (1) or more providers that are under contract with, managed by, or owned by the health carrier.

Sec. 7. As used in this chapter, "nonemergency health care service" means a discrete service or series of services ordered by a practitioner for an episode of care for the purpose of:

(1) diagnosis;

(2) prevention;

(3) treatment;

(4) cure; or

(5) relief;

of a physical, mental, or behavioral health condition, illness, injury, or disease that is not provided on an emergency or urgent care basis.

Sec. 8. As used in this chapter, "practitioner" means an individual or entity duly licensed or legally authorized to provide health care services.

Sec. 8.5. As used in this chapter, "price" means the negotiated rate between the:

(1) provider facility and practitioner; and

(2) covered individual's primary health carrier.

Sec. 9. As used in this chapter, "provider" means:

(1) a provider facility; or

(2) a practitioner.

Sec. 10. As used in this chapter, "provider facility"means any of the following:

(1) A hospital licensed under IC 16-21-2.

(2) An ambulatory outpatient surgery center licensed under IC 16-21-2.

(3) An abortion clinic licensed under IC 16-21-2.

(4) A birthing center licensed under IC 16-21-2.

(5) Except for an urgent care facility, a facility that provides diagnostic services to the medical profession or the general public, including outpatient facilities.

(6) A laboratory where clinical pathology tests are carried out on specimens to obtain information about the health of a patient.

(7) A facility where radiologic and electromagnetic images are made to obtain information about the health of a patient.

(8) An infusion center that administers intravenous medications.

Sec. 10.5. (a) As used in this chapter, "urgent care facility" means a freestanding health care facility that offers episodic, walk-in care for the treatment of acute, but not life threatening, health conditions.

(b) The term does not include an emergency department of a hospital or a nonprofit or government operated health clinic.

Sec. 11. (a) This section does not:

(1) apply to a individual who is a Medicaid recipient; or

(2) limit the authority of a legal representative of the patient.

(b) An individual for whom a nonemergency health care service has been ordered may request from the provider facility in which the health care service will be provided a good faith estimate of the price that will be charged as a result of the nonemergency health care service.

(c) A provider facility that receives a request from an individual under subsection (b) shall, not more than five (5) business days after receiving all the relevant information from the individual, provide to the individual a good faith estimate of:

(1) the price that the provider facility in which the health care service will be performed will charge for:

(A) the use of the provider facility to care for the individual for the nonemergency health care service;

(B) the services rendered by the staff of the provider facility in connection with the nonemergency health care service; and

(C) medication, supplies, equipment, and material items to be provided to or used by the individual while the individual is present in the provider facility in connection with the nonemergency health care service; and

(2) the price charged for the services of all practitioners, support staff, and other persons who provide professional health services:

(A) who may provide services to or for the individual during the individual's presence in the provider facility for the nonemergency health care service; and

(B) for whose services the individual will be charged separately from the charge of the provider facility.

(d) The price that must be included in a good faith estimate under this section includes all services under subsection (c)(1) or (c)(2) for imaging, laboratory services, diagnostic services, therapy, observation services, and other

services expected to be provided to the individual for the episode of care.

(e) A provider facility shall ensure that a good faith estimate states that:

(1) an estimate provided under this section is not binding on the provider facility;

(2) the price the provider facility charges the individual may vary from the estimate based on the individual's medical needs; and

(3) the estimate provided under this section is only valid for thirty (30) days.

(f) A provider facility may not charge a patient for information provided under this section.

Sec. 12. (a) If:

(1) the individual who requests a good faith estimate from a provider facility under this chapter and has been verified as a covered individual with respect to a network plan; and

(2) the provider facility from which the individual requests the good faith estimate is in network with respect to the same network plan;

the good faith estimate that the provider facility provides to the individual under this chapter must be based on the price to which the provider facility and any practitioners referred to in section 11(c)(2) of this chapter have agreed as in network providers.

(b) If the individual who requests a good faith estimate from a provider facility under this chapter:

(1) is not a covered individual with respect to any network plan; or

(2) is not a covered individual with respect to a network plan with respect to which the provider facility is in network;

the good faith estimate that the provider facility provides to the individual under this chapter must be based on the price that the provider facility and any practitioners referred to in section 11(c)(2) of this chapter charge for the nonemergency health care services in the absence of any network plan.

Sec. 13. A provider facility may provide a good faith estimate to an individual under this chapter:

(1) in a writing delivered to the individual;

(2) by electronic mail; or

(3) through a mobile application or other Internet web based method, if available;

according to the preference expressed by the individual.

Sec. 14. (a) A good faith estimate provided by a provider facility to an individual under this chapter must:

(1) provide a summary of the services and material items that the good faith estimate is based on; and

(2) include a total figure that is a sum of the estimated prices referred to in subdivision (1).

(b) Subsection (a) does not prohibit a provider facility from providing to an individual a good faith estimate that indicates how much of the total figure stated under subsection (a)(2) will be the individual's out-of-pocket expense after the health carrier's payment of charges.

(c) A health carrier or practitioner must provide a provider facility with the information needed by the provider facility to comply with the requirements under this chapter not more than two (2) business days after receiving the request.

(d) A provider facility is not subject to the penalties under section 17 of this chapter if:

(1) a health carrier or practitioner fails to provide the provider facility with the information as required under subsection (c);

(2) the provider facility provides the individual with a good faith estimate based on any information that the provider facility has; and

(3) the provider facility provides the individual with an updated good faith estimate after the health carrier or practitioner has provided the information required under subsection (c).

Sec. 15. (a) As used in this section, "waiting room" means a space in a building used by a provider facility in which people check in or register to:

(1) be seen by practitioners; or

(2) meet with members of the staff of the provider facility.

(b) A provider facility shall ensure that each waiting room of the provider facility includes at least one (1) printed notice that:

(1) is designed, lettered, and positioned within the waiting room so as to be conspicuous to and readable by any individual with normal vision who visits the waiting room; and

(2) states the following, or words to the same effect: "A patient may ask for an estimate of the amount the patient will be charged for a nonemergency medical service provided in this facility. The law requires that an estimate be provided within 5 business days.".

(c) If a provider facility maintains an Internet web site, the provider facility shall ensure that the Internet web site includes at least one (1) printed notice that:

(1) is designed, lettered, and featured on the Internet web site so as to be conspicuous to and readable by any individual with normal vision who visits the Internet web site; and

(2) states the following, or words to the same effect: "A patient may ask for an estimate of the amount the patient will be charged for a nonemergency medical service provided in our facility. The law requires that an estimate be provided within 5 business days.".

Sec. 16. If:

(1) a provider facility receives a request for a good faith estimate under this chapter; and

(2) the patient is eligible for Medicare coverage;

the provider facility shall provide a good faith estimate to the patient within five (5) business days based on available Medicare rates.

Sec. 17. (a) If a provider facility fails or refuses:

(1) to provide a good faith estimate as required by this chapter; or

(2) to provide notice on the provider facility's Internet web site as required under this chapter;

the insurance commissioner may, after notice and hearing

under IC 4-21.5, impose on the provider facility a civil penalty of not more than one thousand dollars ($1,000) for each violation.

(b) A civil penalty collected under this section shall be deposited in the department of insurance fund established by IC 27-1-3-28.

SECTION 23. IC 27-2-25 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 25. Health Carrier Good Faith Estimates

Sec. 1. As used in this chapter, "coverage" means the right of an individual to receive:

(1) health care services; or

(2) payment or reimbursement for health care services;

from a health carrier.

Sec. 2. As used in this chapter, "covered individual" means an individual who is entitled to coverage from a health carrier.

Sec. 2.5. As used in this chapter, "episode of care" means the medical care ordered to be provided for a specific medical procedure, condition, or illness.

Sec. 3. As used in this chapter, "good faith estimate" means a health carrier's reasonable estimate of:

(1) the amount of the cost of a nonemergency health care service that the health carrier will:

(A) pay for; or

(B) reimburse to;

a covered individual; or

(2) the applicable benefit limitations of the nonemergency health care service a covered individual is entitled to receive;

that a health carrier provides upon request to a covered individual for whom a nonemergency health care service has been ordered.

Sec. 4. (a) As used in this chapter, "health carrier" means an entity:

(1) that is subject to this title and the administrative rules adopted under this title; and

(2) that enters into a contract to:

(A) provide health care services;

(B) deliver health care services;

(C) arrange for health care services; or

(D) pay for or reimburse any of the costs of health care services.

(b) The term also includes the following:

(1) An insurer, as defined in IC 27-1-2-3(x), that issues a policy of accident and sickness insurance, as defined in IC 27-8-5-1(a).

(2) A health maintenance organization, as defined in IC 27-13-1-19.

(3) An administrator (as defined in IC 27-1-25-1(a)) that is licensed under IC 27-1-25.

(4) A state employee health plan offered under IC 5-10-8.

(5) A short term insurance plan (as defined by IC 27-8-5.9-3).

(6) Any other entity that provides a plan of health insurance, health benefits, or health care services.

Sec. 5. As used in this chapter, "in network", when used in reference to a practitioner, means that the health care services provided by the practitioner are subject to a health carrier's network plan.

Sec. 6. (a) As used in this chapter, "network" means a group of provider facilities and practitioners that:

(1) provide health care services to covered individuals; and

(2) have agreed to, or are otherwise subject to, maximum limits on the prices for the health care services to be provided to the covered individuals.

(b) The term includes the following:

(1) A network described in subsection (a) that is established pursuant to a contract between an insurer providing coverage under a group health policy and:

(A) individual provider facilities and practitioners;

(B) a preferred provider organization; or

(C) an entity that employs or represents providers, including:

(i) an independent practice association; and

(ii) a physician-hospital organization.

(2) A health maintenance organization, as defined in IC 27-13-1-19.

Sec. 7. As used in this chapter, "network plan" means a plan of a health carrier that:

(1) requires a covered person to receive; or

(2) creates incentives, including financial incentives, for a covered person to receive;

health care services from one (1) or more providers that are under contract with, managed by, or owned by the health carrier.

Sec. 8. As used in this chapter, "nonemergency health care service" means a discrete service or series of services ordered by a practitioner for an episode of care for the:

(1) diagnosis;

(2) prevention;

(3) treatment;

(4) cure; or

(5) relief;

of a physical, mental, or behavioral health condition, illness, injury, or disease that is not provided on an emergency or urgent care basis.

Sec. 9. As used in this chapter, "practitioner" means an individual or entity duly licensed or legally authorized to provide health care services.

Sec. 9.5. As used in this chapter, "price" means the negotiated rate between the:

(1) provider facility and practitioner; and

(2) covered individual's primary health carrier;

minus the amount that the health carrier will pay.

Sec. 10. As used in this chapter, "provider" means:

(1) a provider facility; or

(2) a practitioner.

Sec. 11. As used in this chapter, "provider facility"means any of the following:

(1) A hospital licensed under IC 16-21-2.

(2) An ambulatory outpatient surgery center licensed under IC 16-21-2.

(3) An abortion clinic licensed under IC 16-21-2.

(4) A birthing center licensed under IC 16-21-2.

(5) Except for an urgent care facility (as defined by IC 27-1-46-10.5), a facility that provides diagnostic services to the medical profession or the general public.

(6) A laboratory where clinical pathology tests are carried out on specimens to obtain information about the health of a patient.

(7) A facility where radiologic and electromagnetic images are made to obtain information about the health of a patient.

(8) An infusion center that administers intravenous medications.

Sec. 12. (a) A covered individual for whom a nonemergency health care service has been ordered may request from the health carrier a good faith estimate of:

(1) the amount of the cost of the nonemergency health care service that the health carrier will:

(A) pay for; or

(B) reimburse to;

the covered individual; or

(2) the applicable benefit limitations of the ordered nonemergency health care service a covered individual is entitled to receive from the health carrier.

(b) If:

(1) a health carrier provides coverage to a covered individual through a network plan; and

(2) the health carrier receives a request for a good faith estimate from a covered individual for whom a nonemergency health care service has been ordered;

the health carrier shall inform the covered individual whether the provider facility in which the nonemergency health care service will be provided is in network and whether each scheduled practitioner who may provide the nonemergency health care service is in network.

(c) A health carrier that receives a request from a covered individual patient under subsection (b) shall, not more than five (5) business days after receiving all the relevant information, provide to the individual a good faith estimate as described in section 14 of this chapter.

(d) A health carrier must ensure that a good faith estimate states that the estimate provided under this section is only valid for thirty (30) days and that:

(1) the amount that the health carrier will:

(A) pay; or

(B) reimburse;

for or to the covered individual for the nonemergency health care services the individual receives; and

(2) the applicable benefit limitations of the nonemergency health care services the individual will receive;

may vary from the health carrier's good faith estimate based on the individual's medical needs.

(e) A health carrier may not charge an individual for information provided under this section.

(f) A practitioner and provider facility shall provide a health carrier with the information needed by the health carrier to comply with the requirements under this chapter not more than two (2) business days after receiving the request.

Sec. 13. A health carrier may provide a good faith estimate to an individual under this chapter:

(1) in a writing delivered to the individual;

(2) by electronic mail; or

(3) through a mobile application or other Internet web based method, if available;

according to the preference expressed by the individual.

Sec. 14. (a) A good faith estimate provided by a health carrier to an individual under this chapter must:

(1) in the case of an insurer or another health carrier that pays or reimburses the cost of health care services:

(A) provide a summary of the services and material items that the good faith estimate is based on;

(B) include a total figure that is a sum of the amounts referred to in clause (A); and

(C) state the out-of-pocket costs the covered individual will incur, if any, beyond the amount that the health carrier will pay or reimburse; and

(2) in the case of a health maintenance organization or another health carrier that provides health care services:

(A) provide a summary of the applicable benefit limitations of the health care services to which the covered individual is entitled; and

(B) state the out-of-pocket costs the covered individual will incur, if any, beyond being provided the health care services referred to in clause (A).

(b) A practitioner and provider facility shall provide a health carrier with the information needed by the health carrier to comply with the requirements under this chapter not more than two (2) business days after receiving the request.

(c) A health carrier is not subject to the penalties under section 16 of this chapter if:

(1) a provider facility or practitioner fails to provide the health carrier with the information as required under subsection (b);

(2) the health carrier provides the individual with a good faith estimate based on any information that the health carrier has; and

(3) the health carrier provides the individual with an updated good faith estimate after the provider facility or practitioner has provided the information required under subsection (b).

Sec. 15. A health carrier that provides an Internet web site for the use of its covered individuals shall ensure that the Internet web site includes a printed notice that:

(1) is designed, lettered, and featured on the Internet web site so as to be conspicuous to and readable by any individual with normal vision who visits the Internet web site; and

(2) states the following, or words to the same effect: "A covered individual may at any time ask the health carrier for an estimate of the amount the health carrier will pay for or reimburse to a covered individual for nonemergency health care services that have been

ordered for the covered individual or the applicable benefit limitations of the ordered nonemergency health care services a covered individual is entitled to receive from the health carrier. The law requires that an estimate be provided within 5 business days.".

Sec. 16. (a) If a health carrier fails or refuses:

(1) to provide a good faith estimate as required by this chapter; or

(2) to provide notice on the health carrier's Internet web site as required by section 15 of this chapter;

the insurance commissioner may, after notice and hearing under IC 4-21.5, impose on the health carrier a civil penalty of not more than one thousand dollars ($1,000) for each day of noncompliance.

(b) A civil penalty collected under this section shall be deposited in the department of insurance fund established by IC 27-1-3-28.

SECTION 24. [EFFECTIVE JULY 1, 2020] **(a) As used in this SECTION, "department" refers to the department of insurance.**

(b) The following shall submit, before September 1, 2021, a report described in this SECTION to the department and the general assembly in an electronic format under IC 5-14-6:

(1) An insurer (as defined in IC 27-1-2-3) that issues a policy of accident and sickness insurance (as defined in IC 27-8-5-1).

(2) A health maintenance organization (as defined in IC 27-13-1-19).

(c) The report must include an estimate of the total reduction in reimbursement for health service claims that were appropriately billed as being provided in an office setting under IC 16-51-1-9, as added by this act, instead of being billed as being provided in an institutional setting.

(d) This SECTION expires December 31, 2021.

(Reference is to HB 1004 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 8, Nays 4.

CHARBONNEAU, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Engrossed House Bill 1006, 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 1, delete lines 1 through 14.

Page 2, delete lines 6 through 42.

Page 3, delete lines 1 through 3.

Page 3, line 18, reset in roman "or electronic cigarettes".

Page 3, line 20, reset in roman "or".

Page 3, line 21, reset in roman "electronic cigarettes".

Page 3, line 31, after "preceding" insert "**one (1) year.**".

Page 3, delete line 32.

Page 4, line 3, reset in roman "three (3) years".

Page 4, line 3, delete "one (1) year".

Page 4, delete lines 23 through 28, begin a new line block indented and insert:

"(2) has committed habitual illegal sale of tobacco as established under ~~IC 35-46-1-10.2(h);~~ **IC 35-46-1-10.2(i);** or

(3) has committed habitual illegal entrance by a minor as established under IC 35-46-1-11.7(f).".

Page 4, line 42, delete "three (3) years" and insert "**one (1) year**".

Page 5, line 3, reset in roman "or".

Page 5, line 4, reset in roman "electronic cigarettes".

Page 5, line 5, reset in roman "or electronic cigarettes".

Page 5, line 8, after "products" delete ".".

Page 5, line 8, reset in roman "or electronic".

Page 5, line 9, reset in roman "cigarettes.".

Page 5, delete lines 15 through 24.

Page 5, line 34, after "products" delete ".".

Page 5, line 34, reset in roman "and electronic".

Page 5, reset in roman line 35.

Page 6, line 6, reset in roman "six (6)".

Page 6, line 6, delete "two (2)".

Page 6, line 7, strike "IC 35-46-1-10.2(a)" and insert "**IC 35-46-1-10.2(b)**".

Page 6, line 7, strike "one hundred eighty (180) day" and insert "**one (1) year**".

Page 6, delete lines 11 through 19.

Page 8, line 8, reset in roman "and tobacco accessories".

Page 8, line 14, reset in roman "and".

Page 8, line 15, reset in roman "tobacco accessories".

Page 8, line 39, reset in roman "and tobacco accessories".

Page 9, delete lines 39 through 42.

Page 10, delete lines 1 through 36, begin a new paragraph and insert:

"SECTION 11. IC 7.1-6-2-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. The division of mental health and addiction established under IC 12-21 shall coordinate the conduct of random unannounced inspections at locations where tobacco products, **e-liquids, or electronic cigarettes** are sold or distributed to ensure compliance with this article. Only the commission, an Indiana law enforcement agency, the office of the sheriff of a county, or an organized police department of a municipal corporation may conduct the random unannounced inspections. These entities may use retired or off-duty law enforcement officers to conduct inspections under this section.".

Page 11, line 1, after "product" insert ", **e-liquid,**".

Page 11, line 1, reset in roman "or electronic cigarette".

Page 11, line 12, after "product" insert ", **e-liquid,**".

Page 11, line 12, reset in roman "or electronic cigarette".

Page 11, delete lines 15 through 18, begin a new paragraph and insert:

"SECTION 14. IC 7.1-7-2-6.3, AS ADDED BY P.L.206-2017, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6.3. "Delivery sale" means a sale of ~~e-liquids~~ **an e-liquid** to a purchaser in Indiana in which the purchaser submits the order for the sale:

(1) by telephone;

(2) over the Internet; or

(3) through the mail or another delivery system;

and the ~~e-liquids are~~ **e-liquid is** shipped through a delivery service. "Delivery sale" does not include a sale of ~~e-liquids~~ **an e-liquid** not for personal consumption to a person who is a retailer.

SECTION 15. IC 7.1-7-2-17 IS REPEALED [EFFECTIVE JULY 1, 2020]. ~~Sec. 17. "Minor" means an individual who is less than eighteen (18) years of age.~~

SECTION 16. IC 7.1-7-4-1, AS AMENDED BY P.L.206-2017, SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. (a) A manufacturer of e-liquid may not mix, bottle, package, or sell e-liquid to retailers, consumers, or distributors in Indiana without a permit issued by the commission under this article.

(b) ~~All e-liquids~~ **An e-liquid** manufactured by an e-liquids manufacturer approved by the commission under this article before July 1, 2017, may be distributed and sold for retail until the expiration date of the ~~e-liquids.~~ **e-liquid.**

(c) A manufacturing permit issued by the commission is valid for five (5) years. A manufacturing permit issued by the commission under this article before July 1, 2017, does not expire before July 1, 2020.

(d) An initial application for a manufacturing permit must include the following:

(1) The name, telephone number, and address of the applicant.

(2) The name, telephone number, and address of the manufacturing facility.

(3) The name, telephone number, title, and address of the person responsible for the manufacturing facility.

(4) Verification that the facility will comply with applicable tobacco products good manufacturing practices promulgated under 21 U.S.C. 387f(e) of the federal Food, Drug, and Cosmetic Act.

(5) Verification that the manufacturer will comply with the applicable ingredient listing required by 21 U.S.C. 387d(a)(1) of the federal Food, Drug, and Cosmetic Act.

(6) Written consent allowing the state police department to conduct a state or national criminal history background check on any person listed on the application.

(7) A nonrefundable initial application fee of one thousand dollars ($1,000).

(e) The fees collected under subsection (d)(7) shall be deposited in the enforcement and administration fund established under IC 7.1-4-10.

SECTION 17. IC 7.1-7-5.5-1, AS ADDED BY P.L.206-2017, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. A retailer may not make a delivery sale of e-liquid to ~~a minor~~ **an individual who does not meet the minimum age requirement** as set forth in IC 7.1-7-6-5.

SECTION 18. IC 7.1-7-5.5-2, AS ADDED BY P.L.206-2017, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. A retailer may not ship ~~e-liquids~~ **an e-liquid** without first making a good faith effort to verify the age of the purchaser of the ~~e-liquids~~ **e-liquid** as set forth in IC 7.1-7-6-6.

SECTION 19. IC 7.1-7-5.5-3, AS ADDED BY P.L.206-2017, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) Before ~~e-liquids are~~ **an e-liquid is** shipped in a delivery sale, a retailer must be fully paid for the purchase and shall accept payment from the purchaser:

(1) by a check drawn on an account in the purchaser's name;

(2) by a credit card issued in the purchaser's name; or

(3) by a debit card issued in the purchaser's name.

(b) A retailer may ship ~~e-liquids~~ **an e-liquid** only to a purchaser.".

Page 11, line 21, strike "e-liquids" and insert "**an e-liquid**".

Page 11, deletes line 25 through 42, begin a new paragraph and insert:

"SECTION 22. IC 7.1-7-6-2 IS REPEALED [EFFECTIVE JULY 1, 2020]. ~~Sec. 2. (a) This subsection does not apply to a delivery sale as defined in IC 7.1-7-2-6.3. If a retailer:~~

~~(1) knowingly and intentionally sells e-liquid to a minor; or~~

~~(2) knowingly, intentionally, or negligently fails to verify the age of a person who appears to be less than twenty-seven (27) years of age by checking a government issued identification and sells the person e-liquid;~~

~~the retailer commits a Class C infraction. For a sale to take place under this section, the buyer must pay the retail establishment for the e-liquid.~~

~~(b) Notwithstanding IC 34-28-5-4(c), a civil judgment for an infraction committed under this section must be imposed as follows:~~

~~(1) If the retail establishment at that specific business location has not been issued a citation or summons for a violation of this section in the previous one hundred eighty (180) days, a civil penalty of up to two hundred dollars ($200).~~

~~(2) If the retail establishment at that specific business location has had one (1) citation or summons issued for a violation of this section in the previous one hundred eighty (180) days, a civil penalty of up to four hundred dollars ($400).~~

~~(3) If the retail establishment at that specific business location has had two (2) citations or summonses issued for a violation of this section in the previous one hundred eighty (180) days, a civil penalty of up to seven hundred dollars ($700).~~

~~(4) If the retail establishment at that specific business location has had three (3) or more citations or summonses issued for a violation of this section in the previous one hundred eighty (180) days, a civil penalty of up to one thousand dollars ($1,000).~~

~~A retail establishment may not be issued a citation or summons for a violation of this section more than once every twenty-four (24) hours for each specific business location.~~

~~(c) It is not a defense that the person to whom e-liquid was sold or distributed did not inhale or otherwise consume e-liquid.~~

~~(d) The following defenses are available to a retail establishment accused of selling or distributing e-liquid to a person who is less than eighteen (18) years of age:~~

~~(1) The buyer or recipient produced a driver's license bearing the purchaser's or recipient's photograph showing that the purchaser or recipient was of legal age to make the purchase.~~

~~(2) The buyer or recipient produced a photographic identification card issued under IC 9-24-16-1 or a similar card issued under the laws of another state or the federal government showing that the purchaser or recipient was of legal age to make the purchase.~~

~~(3) The appearance of the purchaser or recipient was such that an ordinary prudent person would believe that the purchaser or recipient was not less than the age that complies with regulations promulgated by the federal Food and Drug Administration.~~

~~(c) It is a defense that the accused retail establishment sold or delivered e-liquid to a person who acted in the ordinary course of employment or a business concerning e-liquid:~~

~~(1) agriculture;~~

~~(2) processing;~~

~~(3) transporting;~~

~~(4) wholesaling; or~~

~~(5) retailing.~~

~~(f) As used in this section, "distribute" means to give e-liquid to another person as a means of promoting, advertising, or marketing e-liquid to the general public.~~

~~(g) Unless a person buys or receives e-liquid under the direction of a law enforcement officer as part of an enforcement action, a retail establishment that sells or distributes e-liquid is not liable for a violation of this section unless the person less than eighteen (18) years of age who bought or received the e-liquid is issued a citation or summons in violation of this article.~~

~~(h) Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund (IC 7.1-6-2-6).~~

~~(i) A person who violates subsection (a) at least six (6) times in any one hundred eighty (180) day period commits habitual illegal sale of e-liquid, a Class B infraction.~~".

Delete page 12.

Page 13, delete lines 1 through 35, begin a new paragraph and insert:

"SECTION 24. IC 7.1-7-6-2.1 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 2.1. A person who sells or distributes an e-liquid to a person under twenty-one (21) years of age may be in violation of IC 35-46-1.**

SECTION 25. IC 7.1-7-6-5, AS ADDED BY P.L.206-2017, SECTION 35, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. A person who knowingly or intentionally makes a delivery sale of ~~e-liquids~~ **an e-liquid** to ~~a minor~~ **an individual who is less than twenty-one (21) years of age** commits a Class C infraction.

SECTION 26. IC 7.1-7-6-6, AS ADDED BY P.L.206-2017, SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. (a) As used in this section, "good faith effort to verify the age of ~~a~~ **the** purchaser of ~~e-liquids~~" **e-liquid"** means:

(1) verifying the age of the purchaser in a commercially available database; or

(2) obtaining a photocopy of a government issued identification;

that indicates the birth date or age of the purchaser.

(b) A person who knowingly or intentionally ships ~~e-liquids~~ **an e-liquid** without first making a good faith effort to verify the age of the purchaser of the ~~e-liquids~~ **e-liquid** commits a Class C infraction.".

Page 14, delete lines 3 through 8.

Page 14, line 23, strike "eighteen (18)" and insert "**twenty-one (21)**".

Page 16, delete lines 15 through 42, begin a new paragraph and insert:

"SECTION 30. IC 35-31.5-2-100, AS AMENDED BY P.L.185-2019, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 100. (a) "Distribute", for purposes of IC 35-45-4-8, has the meaning set forth in IC 35-45-4-8.

(b) "Distribute", for purposes of IC 35-46-1-10, has the meaning set forth in ~~IC 35-46-1-10(c).~~ **IC 35-46-1-10(f).**

(c) "Distribute", for purposes of IC 35-46-1-10.2, has the meaning set forth in ~~IC 35-46-1-10.2(c).~~ **IC 35-46-1-10.2(f).**

(d) "Distribute", for purposes of IC 35-47.5, has the meaning set forth in IC 35-47.5-2-6.

(e) "Distribute", for purposes of IC 35-48, has the meaning set forth in IC 35-48-1-14.

(f) "Distribute", for purposes of IC 35-49, has the meaning set forth in IC 35-49-1-2.

SECTION 31. IC 35-31.5-2-107.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 107.5. "E-liquid," for purposes of IC 35-46-1, has the meaning set forth in IC 35-46-1-1.4.**".

Page 17, delete lines 1 through 24.

Page 18, line 3, delete "a tobacco product (as defined in IC 7.1-6-1-3);" and insert "**a cigarette, e-liquid, or tobacco product (as defined in IC 6-7-2-5);**".

Page 18, delete lines 16 through 42, begin a new paragraph and insert:

"SECTION 33. IC 35-46-1-1.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 1.4. As used in this chapter, "e-liquid" has the meaning set forth in IC 7.1-7-2-10.**

SECTION 34. IC 35-46-1-10, AS AMENDED BY P.L.20-2013, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 10. (a) **A person may not be charged with a violation under this section and a violation under IC 7.1-7-6-5.**

(b) A person who knowingly:

(1) sells or distributes tobacco, **an e-liquid,** or an electronic cigarette to a person less than ~~eighteen (18)~~ **twenty-one (21)** years of age; or

(2) purchases tobacco, **an e-liquid,** or an electronic cigarette for delivery to another person who is less than

~~eighteen (18)~~ **twenty-one (21)** years of age;

commits a Class C infraction. For a sale to take place under this section, the buyer must pay the seller for the tobacco product, **the e-liquid,** or the electronic cigarette.

~~(b)~~ **(c)** It is not a defense that the person to whom the tobacco, **the e-liquid,** or electronic cigarette was sold or distributed did not smoke, chew, inhale, or otherwise consume the tobacco, **e-liquid,** or the electronic cigarette.

~~(c)~~ **(d)** The following defenses are available to a person accused of selling or distributing tobacco, **an e-liquid,** or an electronic cigarette to a person who is less than ~~eighteen (18)~~ **twenty-one (21)** years of age:

(1) The buyer or recipient produced a driver's license bearing the purchaser's or recipient's photograph, showing that the purchaser or recipient was of legal age to make the purchase.

(2) The buyer or recipient produced a photographic identification card issued under IC 9-24-16-1, or a similar card issued under the laws of another state or the federal government, showing that the purchaser or recipient was of legal age to make the purchase.

(3) The appearance of the purchaser or recipient was such that an ordinary prudent person would believe that the purchaser or recipient was not less than ~~the age that complies with regulations~~ **thirty (30) years of age.** ~~promulgated by the federal Food and Drug Administration.~~

~~(d)~~ **(e)** It is a defense that the accused person sold or delivered the tobacco, **e-liquid,** or electronic cigarette to a person who acted in the ordinary course of employment or a business concerning tobacco, **an e-liquid,** or electronic cigarettes **including the following activities:**

(1) agriculture;

(2) processing;

(3) transporting;

(4) wholesaling; or

(5) retailing.

~~(e)~~ **(f)** As used in this section, "distribute" means to give tobacco, **an e-liquid,** or an electronic cigarette to another person as a means of promoting, advertising, or marketing the tobacco, **e-liquid,** or electronic cigarette to the general public.

~~(f)~~ **(g)** Unless the person buys or receives tobacco, **an e-liquid,** or an electronic cigarette under the direction of a law enforcement officer as part of an enforcement action, a person who sells or distributes tobacco, **an e-liquid,** or an electronic cigarette is not liable for a violation of this section unless the person less than ~~eighteen (18)~~ **twenty-one (21)** years of age who bought or received the tobacco, **e-liquid,** or electronic cigarette is issued a citation or summons under section 10.5 of this chapter.

~~(g)~~ **(h)** Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund (IC 7.1-6-2-6).

SECTION 35. IC 35-46-1-10.2, AS AMENDED BY P.L.20-2013, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 10.2. (a) **A person may not be charged with a violation under this section and a violation under IC 7.1-7-6-5.**

(b) A retail establishment that:

(1) sells or distributes tobacco, **an e-liquid,** or an electronic cigarette to a person less than ~~eighteen (18)~~ **twenty-one (21)** years of age; **or**

(2) fails to verify the age of a person who appears to be less than thirty (30) years of age by checking a government issued identification and sells the person tobacco, an e-liquid, or an electronic cigarette;

commits a Class C infraction. For a sale to take place under this section, the buyer must pay the retail establishment for the tobacco product, **an e-liquid,** or electronic cigarette.

(c) Notwithstanding IC 34-28-5-4(c), a civil judgment for an infraction committed under this section must be imposed as follows:

(1) If the retail establishment at that specific business location has not been issued a citation or summons for a violation of this section in the previous one ~~hundred eighty (180) days,~~ **(1) year,** a civil penalty of up to ~~two~~ **four** hundred dollars ~~($200).~~ **($400).**

(2) If the retail establishment at that specific business location has had one (1) citation or summons issued for a violation of this section in the previous one ~~hundred eighty (180) days,~~ **(1) year,** a civil penalty of up to ~~four~~ **eight** hundred dollars ~~($400).~~ **($800).**

(3) If the retail establishment at that specific business location has had two (2) citations or summonses issued for a violation of this section in the previous one ~~hundred eighty (180) days,~~ **(1) year,** a civil penalty of up to ~~seven~~ **one thousand four** hundred dollars ~~($700).~~ **($1,400).**

(4) If the retail establishment at that specific business location has had three (3) or more citations or summonses issued for a violation of this section in the previous one ~~hundred eighty (180) days,~~ **(1) year,** a civil penalty of up to ~~one~~ **two** thousand dollars ~~($1,000).~~ **($2,000).**

A retail establishment may not be issued a citation or summons for a violation of this section more than once every twenty-four (24) hours for each specific business location.

~~(b)~~ **(d)** It is not a defense that the person to whom the tobacco, **an e-liquid,** or electronic cigarette was sold or distributed did not smoke, chew, inhale, or otherwise consume the tobacco, **e-liquid,** or electronic cigarette.

~~(c)~~ **(e)** The following defenses are available to a retail establishment accused of selling or distributing tobacco, **an e-liquid,** or an electronic cigarette to a person who is less than ~~eighteen (18)~~ **twenty-one (21)** years of age:

(1) The buyer or recipient produced a driver's license bearing the purchaser's or recipient's photograph showing that the purchaser or recipient was of legal age to make the purchase.

(2) The buyer or recipient produced a photographic identification card issued under IC 9-24-16-1 or a similar card issued under the laws of another state or the federal government showing that the purchaser or recipient was of legal age to make the purchase.

(3) The appearance of the purchaser or recipient was such that an ordinary prudent person would believe that the

purchaser or recipient was not less than ~~the age that complies with regulations~~ **thirty (30) years of age.** ~~promulgated by the federal Food and Drug Administration.~~

~~(d)~~ **(f)** It is a defense that the accused retail establishment sold or delivered the tobacco, **e-liquid,** or electronic cigarette to a person who acted in the ordinary course of employment or a business concerning tobacco, **an e-liquid,** or electronic cigarettes **for the following activities:**

(1) Agriculture.

(2) Processing.

(3) Transporting.

(4) Wholesaling. ~~or~~

(5) Retailing.

~~(e)~~ **(g)** As used in this section, "distribute" means to give tobacco, **an e-liquid,** or an electronic cigarette to another person as a means of promoting, advertising, or marketing the tobacco, **e-liquid,** or electronic cigarette to the general public.

~~(f)~~ **(h)** Unless a person buys or receives tobacco or an electronic cigarette under the direction of a law enforcement officer as part of an enforcement action, a retail establishment that sells or distributes tobacco, **an e-liquid,** or an electronic cigarette is not liable for a violation of this section unless the person less than ~~eighteen (18)~~ **twenty-one (21)** years of age who bought or received the tobacco, **an e-liquid,** or electronic cigarette is issued a citation or summons under section 10.5 of this chapter.

~~(g)~~ **(i)** Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund (IC 7.1-6-2-6).

~~(h)~~ **(j)** A person who violates subsection ~~(a)~~ **(b)** at least six (6) times in any ~~one hundred eighty (180) day~~ **one (1) year** period commits habitual illegal sale of tobacco, a Class B infraction.

SECTION 36. IC 35-46-1-10.5, AS AMENDED BY P.L.20-2013, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 10.5. (a) A person less than ~~eighteen (18)~~ **twenty-one (21)** years of age who:

(1) purchases tobacco, **an e-liquid,** or an electronic cigarette;

(2) accepts tobacco, **an e-liquid,** or an electronic cigarette for personal use; or

(3) possesses tobacco, **an e-liquid,** or an electronic cigarette on ~~his~~ **the person's** person;

commits a Class C infraction.

(b) It is a defense under subsection (a) that the accused person acted in the ordinary course of employment in a business concerning tobacco, **an e-liquid,** or **an** electronic ~~cigarettes.~~ **cigarette for the following activities:**

(1) Agriculture.

(2) Processing.

(3) Transporting.

(4) Wholesaling. ~~or~~

(5) Retailing.

SECTION 37. IC 35-46-1-11, AS AMENDED BY P.L.20-2013, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 11. (a) A tobacco or electronic cigarette vending machine that is located in a public place must bear the following conspicuous notices:

(1) A notice:

(A) that reads as follows, with the capitalization indicated: "If you are under ~~18~~ **21** years of age, YOU ARE FORBIDDEN by Indiana law to buy tobacco or electronic cigarettes from this machine."; or

(B) that:

(i) conveys a message substantially similar to the message described in clause (A); and

(ii) is formatted with words and in a form authorized under the rules adopted by the alcohol and tobacco commission.

(2) A notice that reads as follows, "Smoking by Pregnant Women May Result in Fetal Injury, Premature Birth, and Low Birth Weight.".

(3) A notice printed in letters and numbers at least one-half (1/2) inch high that displays a toll free phone number for assistance to callers in quitting smoking, as determined by the state department of health.

(b) A person who owns or has control over a tobacco or electronic cigarette vending machine in a public place and who:

(1) fails to post a notice required by subsection (a) on the vending machine; or

(2) fails to replace a notice within one (1) month after it is removed or defaced;

commits a Class C infraction.

(c) An establishment selling tobacco or electronic cigarettes at retail shall post and maintain in a conspicuous place, at the point of sale, the following:

(1) Signs printed in letters at least one-half (1/2) inch high, reading as follows:

(A) "The sale of tobacco or electronic cigarettes to persons under ~~18~~ **21** years of age is forbidden by Indiana law.".

(B) "Smoking by Pregnant Women May Result in Fetal Injury, Premature Birth, and Low Birth Weight.".

(2) A sign printed in letters and numbers at least one-half (1/2) inch high that displays a toll free phone number for assistance to callers in quitting smoking, as determined by the state department of health.

(d) A person who:

(1) owns or has control over an establishment selling tobacco or electronic cigarettes at retail; and

(2) fails to post and maintain the sign required by subsection (c);

commits a Class C infraction.".

Delete pages 19 through 23.

Page 24, delete lines 1 through 16.

Page 24, delete lines 33 through 42, begin a new paragraph and insert:

"SECTION 41. IC 35-46-1-11.5, AS AMENDED BY P.L.20-2013, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 11.5. (a) Except for a coin machine that is placed in or directly adjacent to an entranceway or an exit, or placed in a hallway, a restroom, or another common area that is accessible to persons who are less than ~~eighteen (18)~~ **twenty-one (21)** years of age, this section

does not apply to a coin machine that is located in the following:

(1) That part of a licensed premises (as defined in IC 7.1-1-3-20) where entry is limited to persons who are at least ~~eighteen (18)~~ **twenty-one (21)** years of age.

(2) Private industrial or office locations that are customarily accessible only to persons who are at least ~~eighteen (18)~~ **twenty-one (21)** years of age.

(3) Private clubs if the membership is limited to persons who are at least ~~eighteen (18)~~ **twenty-one (21)** years of age.

(4) Riverboats where entry is limited to persons who are at least twenty-one (21) years of age and on which lawful gambling is authorized.

(b) As used in this section, "coin machine" has the meaning set forth in IC 35-43-5-1.

(c) Except as provided in subsection (a), an owner of a retail establishment may not:

(1) distribute or sell tobacco or electronic cigarettes by use of a coin machine; or

(2) install or maintain a coin machine that is intended to be used for the sale or distribution of tobacco or electronic cigarettes.

(d) An owner of a retail establishment who violates this section commits a Class C infraction. A citation or summons issued under this section must provide notice that the coin machine must be moved within two (2) business days. Notwithstanding IC 34-28-5-4(c), a civil judgment for an infraction committed under this section must be imposed as follows:

(1) If the owner of the retail establishment has not been issued a citation or summons for a violation of this section in the previous ninety (90) days, a civil penalty of fifty dollars ($50).

(2) If the owner of the retail establishment has had one (1) citation or summons issued for a violation of this section in the previous ninety (90) days, a civil penalty of two hundred fifty dollars ($250).

(3) If the owner of the retail establishment has had two (2) citations or summonses issued for a violation of this section in the previous ninety (90) days for the same machine, the coin machine shall be removed or impounded by a law enforcement officer having jurisdiction where the violation occurs.

An owner of a retail establishment may not be issued a citation or summons for a violation of this section more than once every two (2) business days for each business location.

(e) Notwithstanding IC 34-28-5-5(c), civil penalties collected under this section must be deposited in the Richard D. Doyle youth tobacco education and enforcement fund established under IC 7.1-6-2-6.".

Delete page 25.

Page 26, line 4, after "products" insert ", **e-liquids, or electronic cigarettes,**".

Page 26, line 23, strike "one hundred eighty (180) days," and insert "**one (1) year,**".

Page 26, line 24, strike "two" and insert "**four**".

Page 26, line 24, strike "($200)." and insert "**($400).**".

Page 26, line 25, after "previous" strike "one".

Page 26, line 26, strike "hundred eighty (180) days," and insert "**one (1) year,**".

Page 26, line 26, strike "four" and insert "**eight**".

Page 26, line 27, strike "($400)." and insert "**($800).**".

Page 26, line 28, strike "one".

Page 26, line 29, strike "hundred eighty (180) days," and insert "**one (1) year,**".

Page 26, line 29, strike "seven hundred" and insert "**one thousand four hundred**".

Page 26, line 30, strike "($700)." and insert "**($1,400).**".

Page 26, line 32, strike "one hundred eighty (180) days," and insert "**one (1) year,**".

Page 26, line 33, strike "one" and insert "**two**".

Page 26, line 33, strike "($1,000)." and insert "**($2,000).**".

Page 27, line 3, delete "products".

Page 27, line 3, reset in roman "or electronic".

Page 27, line 4, reset in roman "cigarettes".

Page 27, line 6, delete "products".

Page 27, line 6, reset in roman "or electronic cigarettes".

Page 27, line 10, delete "products;".

Page 27, line 10, reset in roman "or electronic".

Page 27, line 11, reset in roman "cigarettes;".

Page 27, line 15, delete "products".

Page 27, line 15, reset in roman "or electronic cigarettes".

Renumber all SECTIONS consecutively.

(Reference is to HB 1006 as reprinted January 17, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 10, Nays 0.

CHARBONNEAU, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Commerce and Technology, to which was referred Engrossed House Bill 1008, 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 1, line 14, after "the" insert "**following entities:**

(1) The Indiana auctioneer commission (IC 25-6.1-2-1).

(2) The board of chiropractic examiners (IC 25-10-1).

(3) The state board of cosmetology and barber examiners (IC 25-8-3-1).

(4) The Indiana state board of health facility administrators (IC 25-19-1).

(5) The committee of hearing aid dealer examiners (IC 25-20-1-1.5).

(6) The home inspectors licensing board (IC 25-20.2-3-1).

(7) The manufactured home installer licensing board (IC 25-23.7).

(8) The medical licensing board of Indiana (IC 25-22.5-2).

(9) The occupational therapy committee (IC 25-23.5).

(10) The Indiana board of pharmacy (IC 25-26).

(11) The physician assistant committee (IC 25-27.5).

(12) The board of podiatric medicine (IC 25-29-2-1).

(13) The state psychology board (IC 25-33).

(14) The state board of massage therapy (IC 25-21.8-2-1).".

Page 1, delete lines 15 through 17.

Page 2, delete lines 1 through 2.

(Reference is to HB 1008 as printed January 27, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 8, Nays 1.

PERFECT, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1015, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.

Committee Vote: Yeas 10, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1043, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill 1045, 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 1, line 4, delete "Honor and Remember Flag" and insert "**Display of Flag**".

Page 2, line 16, after "The" insert "**American flag or the**".

(Reference is to HB 1045 as printed January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 13, Nays 0.

MISHLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1063, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 5-10-9.8-1, AS ADDED BY P.L.40-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. The following definitions apply throughout this chapter:

(1) "Board" refers to the board of trustees of the Indiana public retirement system.

(2) "Employer" means an employer of ~~a state employee (as defined in IC 5-10-11-3).~~ **an employee that may receive a lump sum death benefit under a statute identified in section 2(a) of this chapter.**

(3) "Fund" refers to the special death benefit fund established by section 2 of this chapter.

SECTION 2. IC 5-10-9.8-2, AS ADDED BY P.L.40-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) The special death benefit fund is established for the purpose of paying lump sum death benefits under the following statutes:

(1) IC 5-10-10.

(2) IC 5-10-11.

(3) IC 10-12-6.

(4) IC 36-8-6-20.

(5) IC 36-8-7-26.

(6) IC 36-8-7.5-22.

(7) IC 36-8-8-20.

(b) The fund consists of:

(1) appropriations by the general assembly;

(2) fees remitted to the board under IC 35-33-8-3.2, ~~and~~ IC 5-10-10-4.5, **IC 5-10-10-4.8, and IC 5-10-10-4.9;**

(3) contributions from employers;

(4) gifts; and

(5) interest or other investment income earned on money in the fund.

(c) The fund shall be administered by the board. The expenses of administering the fund shall be paid from money in the fund.

(d) The board shall invest the money in the fund not currently needed to meet the obligations of the fund in the same manner as the board's other funds may be invested. Interest that accrues from these investments shall be deposited in the fund.

(e) Money in the fund at the end of a state fiscal year does not revert to the state general fund.

SECTION 3. IC 5-10-9.8-2.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 2.5. (a) The board shall determine contributions and contribution rates for individual employers or for a group of employers necessary to adequately maintain the fund.**

(b) The board shall deposit any contributions received under this section in the fund.

SECTION 4. IC 5-10-10-4.5, AS AMENDED BY P.L.179-2018, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4.5. (a) As used in this section, "eligible officer" means a police officer or firefighter whose employer purchases coverage under this section.

(b) As used in this section, "employer" means:

(1) with respect to a police officer:

(A) a postsecondary educational institution, other than a state educational institution, that appoints a police officer under IC 21-17-5; or

(B) an operator that employs the police officer under IC 8-22-3-34(b); or

(2) with respect to a firefighter:

(A) a postsecondary educational institution, other than a state educational institution, located in Indiana that:

(i) maintains a fire department;

(ii) employs firefighters for the fire department; and

(iii) is accredited by the North Central Association; or

(B) an operator that enters into an operating agreement under IC 5-23 for the operation of a public use airport that:

(i) maintains a fire department; and

(ii) employs firefighters for the fire department.

(c) If an employer purchases coverage for an eligible officer, the eligible officer is eligible for a special death benefit from the fund in the same manner that any other public safety officer is eligible for a special death benefit from the fund. The cost of the coverage shall be one hundred dollars ($100) for each eligible officer annually. The cost of the coverage shall be paid to the board for deposit in the fund. **The cost of coverage required by this subsection is in addition to the contribution determined by the board under IC 5-10-9.8-2.5.**

(d) If an employer elects to provide coverage under this section, the employer must purchase coverage for all eligible officers of the employer. An employer that elects to purchase coverage under this section must purchase coverage by making annual payments as prescribed by the board.

SECTION 5. IC 5-10-10-4.8, AS AMENDED BY P.L.193-2016, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4.8. (a) As used in this section, "eligible emergency medical services provider" means an emergency medical services provider who is employed by a person that has contracted with a political subdivision to provide emergency medical services for the political subdivision.

(b) As used in this section, "emergency medical services" has the meaning set forth in IC 16-49-1-5.

(c) As used in this section, "emergency medical services provider" has the meaning set forth in IC 16-41-10-1.

(d) As used in this section, "political subdivision" has the meaning set forth in IC 36-1-2-13.

(e) If an employer purchases coverage for an eligible emergency medical services provider, the eligible emergency medical services provider who dies as a direct result of personal injury or illness resulting from the eligible emergency medical services provider's performance of duties under a contract entered into by the emergency medical services provider's employer to provide emergency medical services for a political subdivision is eligible for a special death benefit from the fund in the same manner as any other public safety officer is eligible for a benefit from the fund. The cost of the coverage must be one hundred dollars ($100) annually for each eligible emergency medical services provider paid by the emergency medical services provider's employer. The cost of the coverage shall be paid to the board for deposit into the fund. **The cost of coverage required by this subsection is in addition to the contribution determined by the board under IC 5-10-9.8-2.5.**

(f) If an employer elects to provide coverage under this section, the employer must purchase coverage for all eligible emergency medical services providers of the employer. An employer who elects to purchase coverage under this section must purchase coverage by making annual payments as prescribed by the board.

SECTION 6. IC 5-10-10-4.9, AS AMENDED BY P.L.179-2018, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4.9. (a) As used in this section, "eligible emergency medical services provider" means an emergency medical services provider whose employer purchases coverage under this section.

(b) As used in this section, "emergency medical services provider" has the meaning set forth in IC 16-41-10-1.

(c) As used in this section, "employer" means a health care system affiliated with a state educational institution that:

(1) maintains an air ambulance services provider; and

(2) employs emergency medical services providers for the air ambulance services provider.

(d) If an employer purchases coverage for an eligible emergency medical services provider, the eligible emergency medical services provider is eligible for a special death benefit from the fund in the same manner that any other public safety officer is eligible for a special death benefit from the fund. The cost of the coverage must be one hundred dollars ($100) for each eligible emergency medical services provider annually. The cost of the coverage shall be paid to the board for deposit into the fund. **The cost of coverage required by this subsection is in addition to the contribution determined by the board under IC 5-10-9.8-2.5.**

(e) If an employer elects to provide coverage under this section, the employer must purchase coverage for all eligible emergency medical services providers of the employer. An employer that elects to purchase coverage under this section must purchase coverage by making annual payments as prescribed by the board.".

Page 2, between lines 8 and 9, begin a new paragraph and insert:

"SECTION 7. IC 10-12-6-2, AS AMENDED BY P.L.40-2017, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. A special death benefit of one hundred fifty thousand dollars ($150,000) for a motor carrier inspector or special police employee who dies in the line of duty **before July 1, 2020, and two hundred twenty-five thousand dollars ($225,000) for a motor carrier inspector or special police employee who dies in the line of duty after June 30, 2020,** shall be paid in a lump sum from the special death benefit fund established under IC 5-10-9.8 to the following relative of a motor carrier inspector or special police employee who dies in the line of duty:

(1) The surviving spouse.

(2) If there is no surviving spouse, the surviving children (to be shared equally).

(3) If there is no surviving spouse and there are no surviving children, the parent or parents in equal shares.".

Renumber all SECTIONS consecutively.

(Reference is to HB 1063 as printed January 27, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 10, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill 1066, 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 1, line 5, after "IC 20-29-3-15(b)(20)" delete ",".

Page 1, line 6, delete "IC 20-29-3-15(b)(25), and IC 20-29-3-15(b)(27)".

Page 1, between lines 11 and 12, begin a new line block indented and insert:

"**(3) The total number of teaching candidates who:**

(A) are currently enrolled in a teacher preparation program; or

(B) have recently completed a teacher preparation program.

(4) The increase or decrease in kindergarten through grade 12 student enrollments.

(5) The total number of teachers in Indiana.

(6) The teacher workforce growth.

(7) The administrator workforce growth.

(8) For each school corporation, the number of vacant teaching positions by:

(A) grade;

(B) subject; and

(C) required credential;

with critical shortage areas, as determined by unfilled vacancies, highlighted for each school corporation.

SECTION 2. IC 20-19-3-22 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 22. (a) As used in this section, "eligible school" has the meaning set forth in IC 20-51-1-4.7.**

(b) The department shall prepare a report that includes the following information from the 2019-2020 school year:

(1) The following information for each school corporation, charter school, and eligible school for the fall semester or its equivalent:

(A) The number of students who:

(i) were included in the fall count of ADM for the school corporation, charter school, or eligible school; and

(ii) were not reported through the student testing number application center as having completed a course at the school corporation, charter school, or eligible school in the fall semester.

(B) To the extent possible, the number of students described in clause (A) who completed a course in the fall semester at another school and the other school did not include the student in that other school's fall count of ADM.

(C) To the extent possible, the number of students described in clause (A) who:

(i) are not students described in clause (B); and

(ii) were not reported as completing a course at the school corporation, charter school, or eligible school in the fall semester for known reasons, including moving out of state, withdrawing from school, or removal by a parent under IC 20-33-2-28 to provide instruction equivalent to that given in the public schools.

(2) The following information for each school corporation, charter school, and eligible school for the spring semester or its equivalent:

(A) The number of students who:

(i) were included in the spring count of ADM for the school corporation, charter school, or eligible school; and

(ii) were not reported through the student testing number application center as having completed a course at the school corporation, charter school, or eligible school in the spring semester.

(B) To the extent possible, the number of students described in clause (A) who completed a course in the spring semester at another school and the other school did not include the student in the school's spring count of ADM.

(C) To the extent possible, the number of students described in clause (A) who:

(i) are not students described in clause (B); and

(ii) were not reported as completing a course at the school corporation, charter school, or eligible school in the spring semester for known reasons, including moving out of state, withdrawing from school, or removal by parents under IC 20-33-2-28 to provide instruction equivalent to that given in the public schools.

(c) The department shall, not later than December 1, 2020:

(1) submit the report prepared under subsection (b) to the legislative council in an electronic format under IC 5-14-6;

(2) post the report on the department's Internet web site; and

(3) provide notice of the posting and a link to the report's location on the department's Internet web site to each:

(A) school and the governing body of each school corporation;

(B) charter school, and the organizer and authorizer of the charter school; and

(C) eligible school, and the person or agency in active charge and management of the eligible school.

(d) This section expires July 1, 2021.

SECTION 3. IC 20-24-7-13, AS AMENDED BY P.L.159-2019, SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 13. (a) After June 30, 2019, a virtual charter school may only apply for authorization with any statewide authorizer in accordance with

the authorizer's guidelines. After June 30, 2019, a virtual charter school that has a charter on June 30, 2019, may renew a charter only with a statewide authorizer. An authorizer described in IC 20-24-1-2.5(1) and IC 20-24-1-2.5(3) is not considered a statewide authorizer.

(b) For each state fiscal year, a virtual charter school is entitled to receive funding in a month from the state in an amount equal to:

(1) the quotient of:

(A) the school's basic tuition support determined under IC 20-43-6-3(c); divided by

(B) twelve (12); plus

(2) the total of any:

(A) special education grants under IC 20-43-7;

(B) career and technical education grants under IC 20-43-8; and

(C) honor grants under IC 20-43-10;

to which the virtual charter school is entitled for the month. For each state fiscal year, a virtual charter school's special education grants under IC 20-43-7 shall be calculated in the same manner as special education grants are calculated for other school corporations.

(c) The state board shall adopt rules under IC 4-22-2 to govern the operation of virtual charter schools.

(d) Each authorizer of a virtual charter school shall establish requirements or guidelines for virtual charter schools authorized by the authorizer that include the following:

(1) Minimum requirements for the mandatory annual onboarding process and orientation required under IC 20-24-5-4.5, which shall include a requirement that a virtual charter school must provide to a parent of a student:

(A) the student engagement and attendance requirements or policies of the virtual charter school; and

(B) notice that a person who knowingly or intentionally deprives a dependent of education commits a violation under IC 35-46-1-4.

(2) Requirements relating to tracking and monitoring student participation and attendance.

(3) Ongoing student engagement and counseling policy requirements.

(4) Employee policy requirements, including professional development requirements.

(e) The department, with the approval of the state board, shall before December 1 of each year submit an annual report to the budget committee concerning the program under this section.

(f) Each school year, at least sixty percent (60%) of the students who are enrolled in virtual charter schools under this section for the first time must have been included in the state's fall count of ADM conducted in the previous school year.

(g) Each virtual charter school shall report annually to the department concerning the following, on a schedule determined by the department:

(1) Classroom size.

(2) The ratio of teachers per classroom.

(3) The number of student-teacher meetings conducted in person or by video conference.

(4) Any other information determined by the department.

The department shall provide this information annually to the state board and the legislative council in an electronic format under IC 5-14-6.

(h) A virtual charter school shall adopt a student engagement policy. A student who regularly fails to participate in courses may be withdrawn from enrollment under policies adopted by the virtual charter school. The policies adopted by the virtual charter school must ensure that:

(1) adequate notice of the withdrawal is provided to the parent and the student; and

(2) an opportunity is provided, before the withdrawal of the student by the virtual charter school, for the student or the parent to demonstrate that failure to participate in the course is due to an event that would be considered an excused absence under IC 20-33-2.

(i) A student who is withdrawn from enrollment for failure to participate in courses pursuant to the school's student engagement policy may not reenroll in that same virtual charter school for the school year in which the student is withdrawn.

(j) An authorizer shall review and monitor whether a virtual charter school that is authorized by the authorizer complies with the requirements described in subsections (h) and (i).

(k) This subsection applies to a virtual charter school that:

(1) is initially granted a charter; or

(2) has a charter renewed;

after April 1, 2020. If the department finds data irregularities directly related to a virtual charter school's receipt or use of distributions or other funding provided by the state, the department shall send the virtual charter school or organizer, as appropriate, and the authorizer a summary of the department's findings. The virtual charter school or organizer, and the authorizer, have thirty (30) days to respond to the findings. The department shall consider the response and may issue recommendations to the state board to do one (1) or more of the following:

(1) Require an authorizer to revoke a charter.

(2) Withhold distributions and funding to the virtual charter school or organizer.

(3) Require the virtual charter school, organizer, or authorizer to reimburse the state for any distributions or other funding described in this section, and to take any other actions specified by the department to remedy the issues contained in the department's findings. The reimbursement amount required for an authorizer under this subdivision may not exceed an amount equal to the sum of the administrative fees received by the authorizer under section 4 of this chapter that correspond to each state fiscal year in which the department found data irregularities directly related to a virtual charter school's receipt or use of distributions or other funding.

(l) Upon receipt of the department's recommendations under subsection (k), the state board shall hold a public hearing and issue an order with the state board's findings to the virtual charter school or organizer and to the authorizer. The state board shall post a copy of the state board's findings on the state board's Internet web site.".

Page 9, strike lines 1 through 8.

Page 9, delete lines 9 through 15.

Page 12, delete lines 30 through 42, begin a new paragraph and insert:

"SECTION 14. IC 20-43-8-15, AS AMENDED BY P.L.108-2019, SECTION 230, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 15. (a) This subsection applies to the state fiscal year beginning July 1, 2019. A school corporation's career and technical education enrollment grant for a state fiscal year is the sum of the amounts determined under the following STEPS:

STEP ONE: Determine for each career and technical education program provided by the school corporation:

(A) the number of credit hours of the program (one (1) credit, two (2) credits, or three (3) credits); multiplied by

(B) the number of pupils enrolled in the program; multiplied by

(C) the following applicable amount:

(i) Six hundred eighty dollars ($680) for a career and technical education program designated by the department of workforce development as a high value program under section 7.5 of this chapter.

(ii) Four hundred dollars ($400) for a career and technical education program designated by the department of workforce development as a moderate value program under section 7.5 of this chapter.

(iii) Two hundred dollars ($200) for a career and technical education program designated by the department of workforce development as a less than moderate value program under section 7.5 of this chapter.

STEP TWO: Determine the number of pupils enrolled in an apprenticeship program, a cooperative education program, a foundational career and technical education course, or a work based learning course designated under section 7.5 of this chapter multiplied by one hundred fifty dollars ($150).

STEP THREE: Determine the number of pupils enrolled in an introductory program designated under section 7.5 of this chapter multiplied by three hundred dollars ($300).

STEP FOUR: Determine the number of pupils who travel from the school in which they are currently enrolled to another school to participate in a career and technical education program in which pupils from multiple schools are served at a common location multiplied by one hundred fifty dollars ($150).

(b) This subsection applies to state fiscal years beginning after June 30, 2020. A school corporation's career and technical education enrollment grant for a state fiscal year is the sum of the amounts determined under the following STEPS:

STEP ONE: Determine for each career and technical education program provided by the school corporation:

(A) the number of credit hours of the program (one (1) credit, two (2) credits, or three (3) credits); multiplied by

(B) the number of pupils enrolled in the program; multiplied by

(C) the following applicable amount:

(i) Six hundred eighty dollars ($680) for a career and technical education program designated by the department of workforce development as a high value level 1 program under section 7.5 of this chapter.

(ii) One thousand twenty dollars ($1,020) for a career and technical education program designated by the department of workforce development as a high value level 2 program under section 7.5 of this chapter.

(iii) Four hundred dollars ($400) for a career and technical education program designated by the department of workforce development as a moderate value level 1 program under section 7.5 of this chapter.

(iv) Six hundred dollars ($600) for a career and technical education program designated by the department of workforce development as a moderate value level 2 program under section 7.5 of this chapter.

(v) Two hundred dollars ($200) for a career and technical education program designated by the department of workforce development as a less than moderate value level 1 program under section 7.5 of this chapter.

(vi) Three hundred dollars ($300) for a career and technical education program designated by the department of workforce development as a less than moderate value level 2 program under section 7.5 of this chapter.

STEP TWO: Determine the number of pupils enrolled in an apprenticeship program or a work based learning program designated under section 7.5 of this chapter multiplied by five hundred dollars ($500).

STEP THREE: Determine the number of pupils enrolled in an introductory program designated under section 7.5 of this chapter multiplied by three hundred dollars ($300).

STEP FOUR: Determine the number of pupils enrolled in a planning for college and career course under section 7.5 of this chapter at the school corporation that is approved by the department of workforce development multiplied by one hundred fifty dollars ($150).

STEP FIVE: Determine the number of pupils who travel from the school in which they are currently enrolled to another school to participate in a career and technical education program in which pupils from multiple schools are served at a common location multiplied by one hundred fifty dollars ($150).

~~(c) The amount distributed under subsection (b) may not exceed one hundred thirty million dollars ($130,000,000) for a state fiscal year. If the amount determined under subsection (b) will exceed one hundred thirty million dollars ($130,000,000) for a state fiscal year, the amount distributed to each recipient during the remaining months of the state fiscal year shall be proportionately reduced so that the total reductions equal the amount of the excess for the state fiscal year.~~".

Delete pages 13 through 14.

Page 15, delete lines 1 through 3.

Renumber all SECTIONS consecutively.

(Reference is to EHB 1066 as printed February 21, 2020.)
and when so amended that said bill do pass.
Committee Vote: Yeas 11, Nays 0.

MISHLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill 1111, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.
Committee Vote: Yeas 11, Nays 0.

MISHLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Corrections and Criminal Law, to which was referred Engrossed House Bill 1120, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 35-38-2.6-5, AS AMENDED BY P.L.179-2015, SECTION 16, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. **(a)** If a person who is placed under this chapter violates the terms of the placement, the community corrections director may do any of the following:

(1) Change the terms of the placement.

(2) Continue the placement.

(3) Reassign a person assigned to a specific community corrections program to a different community corrections program.

(4) Request that the court revoke the placement and commit the person to the county jail or department of correction for the remainder of the person's sentence.

The community corrections director shall notify the court if the director changes the terms of the placement, continues the placement, or reassigns the person to a different program.

(b) If a person who is placed under this chapter violates the terms of the placement, the prosecuting attorney may request that the court revoke the placement and commit the person to the county jail or department of correction for the remainder of the person's sentence.".

Page 1, line 11, after "program." insert "**The term includes an individualized case management plan.**".

Page 1, line 15, after "means" insert "**educational credit which consists of**".

Page 2, between lines 10 and 11, begin a new paragraph and insert:

"SECTION 3. IC 35-50-6-3.1, AS AMENDED BY P.L.44-2016, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3.1. (a) This section applies to a person who commits an offense after June 30, 2014.

(b) A person assigned to Class A earns one (1) day of good time credit for each day the person is imprisoned for a crime or confined awaiting trial or sentencing.

(c) A person assigned to Class B earns one (1) day of good time credit for every three (3) days the person is imprisoned for a crime or confined awaiting trial or sentencing.

(d) A person assigned to Class C earns one (1) day of good time credit for every six (6) days the person is imprisoned for a crime or confined awaiting trial or sentencing.

(e) A person assigned to Class D earns no good time credit.

(f) A person assigned to Class P earns one (1) day of good time credit for every four (4) days the person serves on pretrial home detention awaiting trial. **A person assigned to Class P does not earn accrued time for time served on pretrial home detention awaiting trial.**".

Page 3, delete lines 11 through 13.

Page 3, line 17, strike "both subsections (a) and (b)" and insert "**this section**".

Page 4, line 9, delete "plan." and insert "**plan, not to exceed the maximum amount described in subsection (j).**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1120 as printed January 17, 2020.)
and when so amended that said bill do pass.
Committee Vote: Yeas 8, Nays 0.

M. YOUNG, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Corrections and Criminal Law, to which was referred Engrossed House Bill 1132, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 31-37-13-5, AS AMENDED BY P.L.168-2014, SECTION 45, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. **(a)** If a finding of delinquency is based on a delinquent act that would be a felony if committed by an adult, the juvenile court shall state in the findings the following:

(1) The specific statute that was violated.

(2) The class or level of the felony had the violation been committed by an adult.

(b) If a finding of delinquency is based on a delinquent act that would be a serious violent felony (as defined in IC 35-47-4-5) if committed by an adult, the juvenile court shall, notwithstanding IC 31-39-1, transmit the finding to the office of judicial administration for transmission to NICS (as defined in IC 35-47-2.5-2.5) in accordance with IC 33-24-6-3.

SECTION 2. IC 31-39-8-3, AS AMENDED BY P.L.86-2017, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) A person may initiate a petition for the expungement of records of a child alleged to be a delinquent child or a child in need of services by filing a verified petition in the juvenile court in the county of the original

action. The petition must set forth the following:

(1) The allegations and date of adjudication, if applicable, of the juvenile delinquency or child in need of services adjudications.

(2) The court in which juvenile delinquency or child in need of services allegations or petitions were filed.

(3) The law enforcement agency that employs the charging officer, if known.

(4) The case number or court cause number.

(5) Date of birth of the petitioner.

(6) Petitioner's Social Security number.

(7) All juvenile delinquency or child in need of services adjudications and criminal convictions occurring after the adjudication of the action sought to be expunged.

(8) All pending actions under IC 31-34 or IC 31-37 or criminal charges.

(b) A petition described in subsection (a) shall be served on:

(1) the prosecuting attorney; or

(2) in the case of a child in need of services case, the department of child services.

(c) The prosecuting attorney or department of child services has thirty (30) days in which to reply or otherwise object to the petition. The court may reduce the time in which a response must be filed for a show of good cause or within its discretion after a hearing is held.

(d) If the prosecuting attorney or department of child services timely files an objection to the petition, the matter shall be set for a hearing. If no objection is filed, the court may set the petition for a hearing or rule on the petition without a hearing.

(e) In considering whether to grant the petition, the juvenile court may review:

(1) the best interests of the child;

(2) the age of the person during the person's contact with the juvenile court or law enforcement agency;

(3) the nature of any allegations;

(4) whether there was an informal adjustment or an adjudication;

(5) the disposition of the case;

(6) the manner in which the person participated in any court ordered or supervised services;

(7) the time during which the person has been without contact with the juvenile court or with any law enforcement agency;

(8) whether the person acquired a criminal record; ~~and~~

(9) the person's current status;

(10) whether the person has been:

(A) charged with; or

(B) convicted of;

murder or another felony offense as an adult;

(11) whether the person was waived to an adult criminal court for a reason described in IC 31-30-3;

(12) whether an adult sentence for the person was not suspended for a reason described in IC 35-50-2-2.1;

(13) whether the person has been adjudicated a delinquent child for committing an act that would be a serious violent felony (as defined in IC 35-47-4-5) if committed by an adult; and

(14) whether:

(A) the person is currently suffering from a mental health issue;

(B) the mental health issue described in clause (A) is chronic or ongoing;

(C) the person has received, or is receiving, treatment for a current or chronic mental health issue; and

(D) the person is compliant with a treatment regimen recommended by a mental health professional, if applicable.

SECTION 3. IC 33-24-6-3, AS AMENDED BY P.L.207-2019, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) The office of judicial administration shall do the following:

(1) Examine the administrative and business methods and systems employed in the offices of the clerks of court and other offices related to and serving the courts and make recommendations for necessary improvement.

(2) Collect and compile statistical data and other information on the judicial work of the courts in Indiana. All justices of the supreme court, judges of the court of appeals, judges of all trial courts, and any city or town courts, whether having general or special jurisdiction, court clerks, court reporters, and other officers and employees of the courts shall, upon notice by the chief administrative officer and in compliance with procedures prescribed by the chief administrative officer, furnish the chief administrative officer the information as is requested concerning the nature and volume of judicial business. The information must include the following:

(A) The volume, condition, and type of business conducted by the courts.

(B) The methods of procedure in the courts.

(C) The work accomplished by the courts.

(D) The receipt and expenditure of public money by and for the operation of the courts.

(E) The methods of disposition or termination of cases.

(3) Prepare and publish reports, not less than one (1) or more than two (2) times per year, on the nature and volume of judicial work performed by the courts as determined by the information required in subdivision (2).

(4) Serve the judicial nominating commission and the judicial qualifications commission in the performance by the commissions of their statutory and constitutional functions.

(5) Administer the civil legal aid fund as required by IC 33-24-12.

(6) Administer the court technology fund established by section 12 of this chapter.

(7) By December 31, 2013, develop and implement a standard protocol for sending and receiving court data:

(A) between the protective order registry, established by IC 5-2-9-5.5, and county court case management systems;

(B) at the option of the county prosecuting attorney, for:

(i) a prosecuting attorney's case management system;

(ii) a county court case management system; and

(iii) a county court case management system

developed and operated by the office of judicial administration;

to interface with the electronic traffic tickets, as defined by IC 9-30-3-2.5; and

(C) between county court case management systems and the case management system developed and operated by the office of judicial administration.

The standard protocol developed and implemented under this subdivision shall permit private sector vendors, including vendors providing service to a local system and vendors accessing the system for information, to send and receive court information on an equitable basis and at an equitable cost.

(8) Establish and administer an electronic system for receiving information that relates to certain individuals who may be prohibited from possessing a firearm ~~and~~ **for the purpose of:**

(A) transmitting this information to the Federal Bureau of Investigation for inclusion in the NICS; **and**

(B) beginning July 1, 2021, compiling and publishing certain statistics related to the confiscation and retention of firearms as described under section 14 of this chapter.

(9) Establish and administer an electronic system for receiving drug related felony conviction information from courts. The office of judicial administration shall notify NPLEx of each drug related felony entered after June 30, 2012, and do the following:

(A) Provide NPLEx with the following information:

(i) The convicted individual's full name.

(ii) The convicted individual's date of birth.

(iii) The convicted individual's driver's license number, state personal identification number, or other unique number, if available.

(iv) The date the individual was convicted of the felony.

Upon receipt of the information from the office of judicial administration, a stop sale alert must be generated through NPLEx for each individual reported under this clause.

(B) Notify NPLEx if the felony of an individual reported under clause (A) has been:

(i) set aside;

(ii) reversed;

(iii) expunged; or

(iv) vacated.

Upon receipt of information under this clause, NPLEx shall remove the stop sale alert issued under clause (A) for the individual.

(10) Staff the judicial technology oversight committee established by IC 33-23-17-2.

(11) After July 1, 2018, establish and administer an electronic system for receiving from courts felony conviction information for each felony described in IC 20-28-5-8(c). The office of judicial administration shall notify the department of education at least one (1) time each week of each felony described in IC 20-28-5-8(c) entered after July 1, 2018, and do the following:

(A) Provide the department of education with the following information:

(i) The convicted individual's full name.

(ii) The convicted individual's date of birth.

(iii) The convicted individual's driver's license number, state personal identification number, or other unique number, if available.

(iv) The date the individual was convicted of the felony.

(B) Notify the department of education if the felony of an individual reported under clause (A) has been:

(i) set aside;

(ii) reversed; or

(iii) vacated.

(12) Perform legal and administrative duties for the justices as determined by the justices.

(13) Provide staff support for the judicial conference of Indiana established in IC 33-38-9.

(14) Work with the United States Department of Veterans Affairs to identify and address the needs of veterans in the court system.

(b) All forms to be used in gathering data must be approved by the supreme court and shall be distributed to all judges and clerks before the start of each period for which reports are required.

(c) The office of judicial administration may adopt rules to implement this section.

SECTION 4. IC 33-24-6-14 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 14. (a) The following definitions apply throughout this section:**

(1) "Dangerous" has the meaning set forth in IC 35-47-14-1.

(2) "Firearm" has the meaning set forth in IC 35-47-1-5.

(3) "Office" means the office of judicial administration created by section 1 of this chapter.

(b) Beginning July 1, 2021, the office shall collect and record the following information:

(1) The law enforcement agency responsible for each confiscation of a firearm under IC 35-47-14-2 and IC 35-47-14-3.

(2) The number of:

(A) warrant based firearm confiscations under IC 35-47-14-2; and

(B) warrantless firearm confiscations under IC 35-47-14-3;

for each county, as applicable, each year.

(3) The total number of:

(A) handguns; and

(B) long guns;

confiscated under IC 35-47-14 for each county, as applicable, each year.

(4) The county in which a court issues an order that finds or does not find an individual to be dangerous under IC 35-47-14-6.

(c) The office shall, beginning July 1, 2021, not later than January 1 of each year, submit a report to the legislative council in an electronic format under IC 5-14-6 that

consolidates and presents the information described in subsection (b).

(d) Notwithstanding subsections (b) and (c) and information provided to a law enforcement agency for the purposes of handgun licenses, the office shall not collect, store, disclose, distribute, transfer, or provide the following information to any person, entity, agency, or department:

(1) The:

(A) name;

(B) date of birth;

(C) Social Security number;

(D) address; or

(E) other unique identifier;

belonging to or associated with an individual alleged to be dangerous by a law enforcement officer or found to be dangerous by a circuit or superior court.

(2) The make, model, or serial number of any handgun, long gun, or firearm seized, confiscated, retained, disposed of, or sold under IC 35-47-14.

(e) Information:

(1) collected by the office; or

(2) used by the office;

to prepare the report described in subsection (c) is confidential and not subject to public inspection or copying under IC 5-14-3-3.

(f) The office shall make the report described in subsection (c) available to the public.

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

SECTION 5. IC 35-31.5-2-294, AS ADDED BY P.L.114-2012, SECTION 67, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 294. "Serious violent felony", for purposes of IC 35-47-4-5 **and IC 35-47-4-9,** has the meaning set forth in ~~IC 35-47-4-5(b).~~ **IC 35-47-4-5.**".

Page 2, between lines 37 and 38, begin a new paragraph and insert:

"SECTION 9. IC 35-44.1-2-3, AS AMENDED BY P.L.107-2016, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) As used in this section, "consumer product" has the meaning set forth in IC 35-45-8-1.

(b) As used in this section, "misconduct" means a violation of a departmental rule or procedure of a law enforcement agency.

(c) A person who reports, by telephone, telegraph, mail, or other written or oral communication, that:

(1) the person or another person has placed or intends to place an explosive, a destructive device, or other destructive substance in a building or transportation facility;

(2) there has been or there will be tampering with a consumer product introduced into commerce; or

(3) there has been or will be placed or introduced a weapon of mass destruction in a building or a place of assembly;

knowing the report to be false, commits false reporting, a Level 6 felony.

(d) A person who:

(1) gives a false report of the commission of a crime or gives false information in the official investigation of the commission of a crime, knowing the report or information to be false;

(2) gives a false alarm of fire to the fire department of a governmental entity, knowing the alarm to be false;

(3) makes a false request for ambulance service to an ambulance service provider, knowing the request to be false;

(4) gives a false report concerning a missing child (as defined in IC 10-13-5-4) or missing endangered adult (as defined in IC 12-7-2-131.3) or gives false information in the official investigation of a missing child or missing endangered adult knowing the report or information to be false;

(5) makes a complaint against a law enforcement officer to the state or municipality (as defined in IC 8-1-13-3(b)) that employs the officer:

(A) alleging the officer engaged in misconduct while performing the officer's duties; and

(B) knowing the complaint to be false;

(6) makes a false report of a missing person, knowing the report or information is false; ~~or~~

(7) gives a false report of actions, behavior, or conditions concerning:

(A) a septic tank soil absorption system under IC 8-1-2-125 or IC 13-26-5-2.5; or

(B) a septic tank soil absorption system or constructed wetland septic system under IC 36-9-23-30.1;

knowing the report or information to be false; **or**

(8) makes a false report that a person is dangerous (as defined in IC 35-47-14-1) knowing the report or information to be false;

commits false informing, a Class B misdemeanor. However, the offense is a Class A misdemeanor if it substantially hinders any law enforcement process or if it results in harm to another person.".

Page 2, delete lines 38 through 42, begin a new paragraph, and insert:

"SECTION 10. IC 35-47-2-18, AS AMENDED BY P.L.158-2013, SECTION 582, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 18. (a) No person shall:

~~(1) change, alter, remove, or obliterate the name of the maker, model, manufacturer's serial number, or other mark of identification on any handgun; or~~

~~(2) possess any handgun on which the name of the maker, model, manufacturer's serial number, or other mark of identification has been changed, altered, removed, or obliterated;~~

~~except as provided by applicable United States statute.~~

(1) remove, obliterate, or alter the importer or manufacturer's serial number on any firearm; or

(2) possess any firearm on which the importer or manufacturer's serial number has been removed, obliterated, or altered.

(b) A person who knowingly or intentionally violates this section commits a Level 5 felony.".

Page 3, delete lines 1 through 7.

Page 3, between lines 7 and 8, begin a new paragraph and

insert:

"SECTION 11. IC 35-47-4-9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 9. (a) As used in this section, "serious violent felony" has the meaning set forth in section 5 of this chapter.**

(b) A person who:

(1) has been adjudicated a delinquent child for committing an act while armed with a firearm that would be a serious violent felony if committed by an adult;

(2) is less than:

(A) twenty-six (26) years of age, if the delinquent act, if committed by an adult, would have been a:

(i) Level 6 felony;

(ii) Level 5 felony;

(iii) Level 4 felony; or

(iv) Level 3 felony; or

(B) twenty-eight (28) years of age, if the delinquent act, if committed by an adult, would have been:

(i) a Level 2 felony;

(ii) a Level 1 felony; or

(iii) murder; and

(3) knowingly or intentionally possesses a firearm;

commits unlawful possession of a firearm by a dangerous person, a Level 6 felony. However, the offense is a Level 5 felony if the person has a prior unrelated conviction under this section.

SECTION 12. IC 35-47-14-2, AS AMENDED BY P.L.289-2019, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) A circuit or superior court may issue a warrant to search for and seize a firearm in the possession of an individual who is dangerous if:

(1) a law enforcement officer provides the court a sworn affidavit that:

(A) states why the law enforcement officer believes that the individual is dangerous and in possession of a firearm; and

(B) describes the law enforcement officer's interactions and conversations with:

(i) the individual who is alleged to be dangerous; or

(ii) another individual, if the law enforcement officer believes that information obtained from this individual is credible and reliable;

that have led the law enforcement officer to believe that the individual is dangerous and in possession of a firearm;

(2) the affidavit specifically describes the location of the firearm; and

(3) the circuit or superior court determines that probable cause exists to believe that the individual is:

(A) dangerous; and

(B) in possession of a firearm.

(b) A law enforcement agency responsible for the seizure of the firearm under this section shall file a search warrant return with the court setting forth the:

(1) quantity; and

(2) type;

of each firearm seized from an individual under this section. **Beginning July 1, 2021, the court shall provide information described under this subsection to the office of judicial administration in a manner required by the office.**".

Page 3, line 26, after "firearm." insert "**Beginning July 1, 2021, the court shall provide information described under this subsection and subsection (b)(1) to the office of judicial administration in a manner required by the office.**".

Page 3, between lines 37 and 38, begin a new paragraph and insert:

"SECTION 17. IC 35-47-14-6, AS AMENDED BY P.L.289-2019, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. (a) The court shall conduct a hearing as required under this chapter.

(b) The state has the burden of proving all material facts by clear and convincing evidence.

(c) If the court determines that the state has proved by clear and convincing evidence that the individual is dangerous, the court shall issue a written order:

(1) finding the individual is dangerous (as defined in section 1 of this chapter);

(2) ordering the law enforcement agency having custody of the seized firearm to retain the firearm;

(3) ordering the individual's license to carry a handgun, if applicable, suspended; and

(4) enjoining the individual from:

(A) renting;

(B) receiving transfer of;

(C) owning; or

(D) possessing;

a firearm; and

determine whether the individual should be referred to further proceedings to consider whether the individual should be involuntarily detained or committed under IC 12-26-6-2(a)(2)(B).

(d) If the court finds that the individual is dangerous under subsection (c), the clerk shall transmit the order of the court to the office of judicial administration:

(1) for transmission to NICS (as defined in IC 35-47-2.5-2.5); **and**

(2) beginning July 1, 2021, for the collection of certain data related to the confiscation and retention of firearms taken from dangerous individuals;

in accordance with IC 33-24-6-3.

(e) If the court orders a law enforcement agency to retain a firearm, the law enforcement agency shall retain the firearm until the court orders the firearm returned or otherwise disposed of.

(f) If the court determines that the state has failed to prove by clear and convincing evidence that the individual is dangerous, the court shall issue a written order that:

(1) the individual is not dangerous (as defined in section 1 of this chapter); and

(2) the law enforcement agency having custody of the firearm shall return the firearm as quickly as practicable, but not later than five (5) days after the date of the order, to the individual from whom it was seized.

SECTION 18. IC 35-47-14-8, AS AMENDED BY P.L.289-2019, SECTION 12, IS AMENDED TO READ AS

FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 8. (a) At least one hundred eighty (180) days after the date on which a court orders a law enforcement agency to retain an individual's firearm under section 6(c) of this chapter, the individual may petition the court for a finding that the individual is no longer dangerous.

(b) Upon receipt of a petition described in subsection (a), the court shall:

(1) enter an order setting a date for a hearing on the petition; and

(2) inform the prosecuting attorney of the date, time, and location of the hearing.

(c) The prosecuting attorney shall represent the state at the hearing on a petition under this section.

(d) In a hearing on a petition under this section, the individual may be represented by an attorney.

(e) In a hearing on a petition under this section filed:

(1) not later than one (1) year after the date of the order issued under section 6(c) of this chapter, the individual must prove by a preponderance of the evidence that the individual is no longer dangerous; and

(2) later than one (1) year after the date of the order issued under section 6(c) of this chapter, the state must prove by clear and convincing evidence that the individual is still dangerous.

(f) If, upon the completion of the hearing and consideration of the record, the court finds that the individual is no longer dangerous, the court shall:

(1) issue a court order that finds that the individual is no longer dangerous;

(2) order the law enforcement agency having custody of any firearm to return the firearm as quickly as practicable, but not later than five (5) days after the date of the order, to the individual;

(3) terminate any injunction issued under section 6 of this chapter; and

(4) terminate the suspension of the individual's license to carry a handgun so that the individual may reapply for a license.

(g) If the court denies an individual's petition under this section, the individual may not file a subsequent petition until at least one hundred eighty (180) days after the date on which the court denied the petition.

(h) If a court issues an order described under subsection (f), the court's order shall be transmitted, as soon as practicable, to the office of judicial administration for transmission to the NICS (as defined in IC 35-47-2.5-2.5) **and, beginning July 1, 2021, for the collection of certain data related to the confiscation and retention of firearms taken from dangerous individuals** in accordance with IC 33-24-6-3.".

Renumber all SECTIONS consecutively.

(Reference is to HB 1132 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 7, Nays 0.

M. YOUNG, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1148, 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 2, line 10, after "completed." insert "**The candidate is responsible for compliance with subsection (e) and subject to action under subsection (f).**".

Page 2, line 12, after "first" insert "**of**".

(Reference is to HB 1148 as printed January 14, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1151, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.

Committee Vote: Yeas 10, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred Engrossed House Bill 1153, 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 31 and 32, begin a new paragraph and insert:

"SECTION 2. IC 20-30-5-14, AS AMENDED BY P.L.57-2018, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 14. (a) As used in this section, "Indiana career explorer program and standards" refers to the:

(1) Internet based system approved by the department of workforce development; and

(2) standards established by the department of workforce development that are aligned to interdisciplinary employability skills standards prescribed in subsection ~~(c);~~ **(d);**

that provides students with career and college planning resources. **This subsection expires June 30, 2021.**

(b) This subsection applies beginning July 1, 2021. As used in this section, "Indiana career explorer program" refers to software or an Internet based system approved by the department of workforce development under subsection (m) that provides students with career and college planning resources.

~~(b)~~ **(c)** To:

(1) educate students on the importance of their future

career choices;

(2) prepare students for the realities inherent in the work environment; and

(3) instill in students work values that will enable them to succeed in their respective careers;

each school within a school corporation shall include in the school's curriculum for all students in grades 1 through 12 instruction concerning employment matters and work values described in subsection ~~(c).~~ **(d).**

~~(c) Not later than July 1, 2019,~~ **(d)** Each school within a school corporation shall include interdisciplinary employability skills standards established by the department, in conjunction with the department of workforce development, and approved by the state board in the school's curriculum.

~~(d)~~ **(e)** Each school shall:

(1) integrate within the curriculum instruction that is; or

(2) conduct activities or special events periodically that are;

designed to foster overall career awareness and career development as described in subsection ~~(b).~~ **(c).**

~~(e)~~ **(f)** The department shall develop career awareness and career development models as described in subsection ~~(f)~~ **(g)** to assist schools in complying with this section.

~~(f)~~ **(g)** The models described in this subsection must be developed in accordance with the following:

(1) For grades 1 through 5, career awareness models to introduce students to work values and basic employment concepts.

(2) For grades 6 through 8, initial career information models that focus on career choices as they relate to student interest and skills.

(3) For grades 9 through ~~10,~~ **12,** career exploration models that offer students insight into future employment options **and**

~~(4) For grades 11 through 12,~~ career preparation models that provide job or further education counseling, including the following:

(A) Initial job counseling, including the use of job service officers to provide school based assessment, information, and guidance on employment options and the rights of students as employees.

(B) Workplace orientation visits.

(C) On-the-job experience exercises.

~~(g)~~ **(h)** The department, with assistance from the department of labor and the department of workforce development, shall:

(1) develop and make available teacher guides; and

(2) conduct seminars or other teacher education activities;

to assist teachers in providing the instruction described in this section.

~~(h)~~ **(i)** The department shall, with assistance from the department of workforce development, design and implement innovative career preparation demonstration projects for students in at least grade 9.

~~(i) Beginning July 1, 2017, the department, in consultation with the department of workforce development, shall implement a pilot program for instruction in and use of the Indiana career explorer program and standards by all students in grade 8 attending schools in fifteen (15) schools. The department shall select the following to participate in the pilot program:~~

~~(1) Five (5) urban schools.~~

~~(2) Five (5) rural schools.~~

~~(3) Five (5) suburban schools.~~

~~The pilot program expires July 1, 2018, unless the department determines that the pilot program should be continued for an additional year. If the department determines that the pilot program should be extended, the department, in consultation with the department of workforce development, shall increase the number of schools involved in the pilot program by at least fifteen (15) additional schools in the second year of the pilot program, if possible based on the interest from schools. The pilot program expires July 1, 2019.~~

(j) ~~Beginning July 1 in the year in which the pilot program described in subsection (i) expires,~~ Each school in a school corporation and each charter school shall include in the school's curriculum state developed career standards for all students in grade 8 that include instruction in and use of either:

(1) the Indiana career explorer program and standards; or

(2) an alternative Internet based system and standards that provide students with career and college planning resources that have been approved by the state board under subsection ~~(k).~~ **(l).**

This subsection expires June 30, 2021.

(k) Beginning July 1, 2021, each school in a school corporation and each charter school:

(1) shall include in the school's curriculum state developed career standards for all students in grade 8; and

(2) except as required by subdivision (1), may include in the school's curriculum state developed career standards for all students in any grade level;

that include instruction in and use of the Indiana career explorer program.

~~(k)~~ **(l)** A school corporation or charter school may submit a request to the state board to approve an alternative Internet based system and standards that provide students with career and college planning resources. The state board, in consultation with the department and the department of workforce development, may approve an alternative system and standards if the state board determines that the alternative system:

(1) has an aptitude assessment tool;

(2) contains educational course track information;

(3) has a tool for the preparation and development of the graduation plan prescribed in IC 20-30-4, including a parent sign in component;

(4) allows access to education and career demand information using data prepared by the department of workforce development; and

(5) is aligned to interdisciplinary employability skills standards prescribed in subsection ~~(c).~~ **(d).**

This subsection expires June 30, 2021.

(m) Beginning July 1, 2021, the department of workforce development shall implement an Indiana career explorer program that includes software or an Internet based system that does the following:

(1) Provides access to education and career demand information using data prepared by the department of

workforce development.

(2) Provides educational and career assessments or tools that:

(A) must include an aptitude and career assessment;

(B) are aligned to interdisciplinary employability skills standards prescribed in subsection (d); and

(C) may include:

(i) educational course track information; and

(ii) a tool for the preparation and development of the graduation plan prescribed in IC 20-30-4, including a parent sign-in component.

SECTION 3. IC 20-30-5-14.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 14.5. (a) Not later than December 31, 2020, the department of workforce development shall issue a request for proposals in accordance with IC 5-22-9 for the purpose of entering a public-private partnership for the provision of educational and career assessments or tools described in section 14(m)(2) of this chapter.**

(b) The department of workforce development shall complete the request for proposals process and implement the Indiana career explorer program described in section 14(m) of this chapter not later than July 1, 2021.

(c) The department of workforce development may adopt rules under IC 4-22-2 to implement this section and section 14(m) of this chapter.

(d) This section expires July 1, 2022.

SECTION 4. IC 20-31-5-4, AS AMENDED BY P.L.143-2019, SECTION 25, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. (a) A plan must:

(1) state objectives for a three (3) year period; and

(2) be annually reviewed and revised to accomplish the achievement objectives of the school.

(b) A plan must establish objectives for the school to achieve.

(c) A plan must address the learning needs of all students, including programs and services for exceptional learners.

(d) A plan must specify how and to what extent the school expects to make continuous improvement in all areas of the education system where results are measured by setting benchmarks for progress on an individual school basis.

(e) A plan must note specific areas where improvement is needed immediately.

(f) ~~On or before November 1 of the year in which the pilot program described in IC 20-30-5-14(i) expires,~~ Each school in a school corporation and each charter school shall include in the plan a summary of how the school will implement the curriculum described in ~~IC 20-30-5-14(f),~~ **IC 20-30-5-14(g),** including the proposed student activities. A school may subsequently amend the school's plan under this subsection in a manner prescribed by the department. The department shall review the submitted plans under this subsection every two (2) years and may review a plan at random to review the relevancy of the plan to the changing economy. The department shall assist schools in incorporating best practices from around the state.

(g) Each year before November 1, the budget agency shall estimate the costs incurred by each school corporation in the immediately preceding school year to implement the curriculum described in ~~IC 20-30-5-14(f),~~ **IC 20-30-5-14(g),** including the proposed student activities, and submit a report of these costs by school corporation to the general assembly in an electronic format under IC 5-14-6.

SECTION 5. IC 20-32-4-15 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 15. (a) The following definitions apply throughout this section:**

(1) "Utility career cluster" means a list:

(A) compiled for purposes of college and career pathways relating to career and technical education under section 1.5(g) of this chapter; and

(B) setting forth industries or occupational fields that:

(i) are related to the provision of utility services; and

(ii) share similar knowledge and skill training requirements.

(2) "Utility services" includes:

(A) production, transmission, or distribution of electricity;

(B) acquisition, transportation, distribution, or storage of natural gas;

(C) provision of communications service (as defined in IC 8-1-32.5-3);

(D) treatment, storage, or distribution of water; and

(E) collection or treatment of wastewater.

(b) Not later than December 31, 2020:

(1) the state board shall, for purposes of developing sequences of courses leading to student concentrators in industries or occupational fields related to the provision of utility services under section 1.5(g) of this chapter, approve a utility career cluster; and

(2) the governor's workforce cabinet, in consultation with the state board, department, and department of workforce development, shall create one (1) or more course sequences:

(A) each of which is comprised of courses approved by the state board for purposes of college and career pathways relating to career and technical education under section 1.5(g) of this chapter; and

(B) each of which provides students with knowledge and skills necessary for employment in an industry or occupational field in the utility career cluster.

(c) In creating one (1) or more course sequences under subsection (b)(2), the governor's workforce cabinet, in consultation with the state board, department, and department of workforce development, shall:

(1) consider the impact of course sequences on the long term outcomes of students; and

(2) prioritize course sequences that lead to high wage, high demand jobs.

SECTION 6. IC 20-32-4-16 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 16. (a) Section 15(c) of this chapter and this section apply to any:**

(1) career clusters approved or amended, after July 1,

2020, by the state board; or

(2) course sequences leading to student concentrators created or amended, after July 1, 2020, by the governor's workforce cabinet in consultation with the state board, department, and department of workforce development.

(b) The governor's workforce cabinet shall do the following:

(1) Collect data each year regarding approved career clusters and course sequences to inform decision making around approving, creating, and amending current and future career clusters and course sequence requirements.

(2) Prepare and submit, not later than November 1 of each year, a report to the legislative council in an electronic format under IC 5-14-6 regarding the data collected under subdivision (1).

SECTION 7. IC 22-4.1-25-2, AS ADDED BY P.L.57-2018, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) The department shall establish and maintain a work ethic certificate program to:

(1) connect employers to local school corporations and schools to create a collaborative partnership that benefits the community;

(2) provide high school students with an understanding of necessary employability skills for in-demand jobs and allow students an opportunity to demonstrate their understanding of the employability skills while in high school; and

(3) provide employers with potential employees who understand the values and importance of responsibility and perseverance in the workplace.

(b) The department shall develop the program in consultation with employers, community based programs, and postsecondary educational institutions. The department shall develop application guidelines for the program.

(c) A school corporation, school, consortium of school corporations or schools, or a local workforce development board serving schools may apply to participate in the program at a time and in a manner prescribed by the department.

(d) The department shall align the program to interdisciplinary employability skills standards prescribed in ~~IC 20-30-5-14(c).~~ **IC 20-30-5-14(d).**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1153 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

RAATZ, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Corrections and Criminal Law, to which was referred Engrossed House Bill 1157, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 9-21-3-7, AS AMENDED BY P.L.149-2015, SECTION 55, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 7. (a) Whenever traffic is controlled by traffic control signals exhibiting different colored lights or colored lighted arrows successively, one (1) at a time or in combination, only the colors green, red, or yellow may be used, except for special pedestrian signals under IC 9-21-18.

(b) The lights indicate and apply to drivers of vehicles and pedestrians as follows:

(1) Green indication means the following:

(A) Vehicular traffic facing a circular green signal may proceed straight through or turn right or left, unless a sign at the place prohibits either turn.

(B) Vehicular traffic, including vehicles turning right or left, shall yield the right-of-way to other vehicles and to pedestrians lawfully within the intersection or an adjacent sidewalk at the time the signal is exhibited.

(C) Vehicular traffic facing a green arrow signal, shown alone or in combination with another indication, may cautiously enter the intersection only to make the movement indicated by the green arrow or other movement permitted by other indications shown at the same time.

(D) Vehicular traffic shall yield the right-of-way to pedestrians lawfully within an adjacent crosswalk and to other traffic lawfully using the intersection.

(E) Unless otherwise directed by a pedestrian control signal, pedestrians facing a green signal, except when the sole green signal is a turn arrow, may proceed across the roadway within a marked or unmarked crosswalk.

(2) Steady yellow indication means the following:

(A) Vehicular traffic facing a steady circular yellow or yellow arrow signal is warned that the related green movement is being terminated and that a red indication will be exhibited immediately thereafter.

(B) A pedestrian facing a steady circular yellow or yellow arrow signal, unless otherwise directed by a pedestrian control signal, is advised that there is insufficient time to cross the roadway before a red indication is shown, and a pedestrian may not start to cross the roadway at that time.

(3) Steady red indication means the following:

(A) Except as provided in clauses (B) and (D), vehicular traffic facing a steady circular red or red arrow signal shall stop at a clearly marked stop line. However, if there is no clearly marked stop line, vehicular traffic shall stop before entering the crosswalk on the near side of the intersection. If there is no crosswalk, vehicular traffic shall stop before entering the intersection and shall remain standing until an indication to proceed is shown.

(B) Except when a sign is in place prohibiting a turn described in this subdivision, vehicular traffic facing a steady red signal, after coming to a complete stop, may cautiously enter the intersection to do the following:

(i) Make a right turn.

(ii) Make a left turn if turning from the left lane of a one-way street into another one-way street with the flow of traffic.

Vehicular traffic making a turn described in this subdivision shall yield the right-of-way to pedestrians lawfully within an adjacent crosswalk and to other traffic using the intersection.

(C) Unless otherwise directed by a pedestrian control signal pedestrians facing a steady circular red or red arrow signal may not enter the roadway.

(D) This clause does not apply to the operation of an autocycle. If the operator of a motorcycle, motor driven cycle, or bicycle approaches an intersection that is controlled by a traffic control signal, the operator may proceed through the intersection on a steady red signal only if the operator:

(i) comes to a complete stop at the intersection for at least one hundred twenty (120) seconds; and

(ii) exercises due caution as provided by law, otherwise treats the traffic control signal as a stop sign, and determines that it is safe to proceed.

(4) No indication or conflicting indications means the following:

(A) Except as provided in clause (C), vehicular traffic facing an intersection having a signal that displays no indication or conflicting indications, where no other control is present, shall stop before entering the intersection.

(B) After stopping, vehicular traffic may proceed with caution through the intersection and shall yield the right-of-way to traffic within the intersection or approaching so closely as to constitute an immediate hazard.

(C) Vehicular traffic entering an intersection or crosswalk facing a pedestrian hybrid beacon may proceed without stopping if no indication is displayed on the pedestrian hybrid beacon.

(5) This section applies to traffic control signals located at a place other than an intersection. A stop required under this subdivision must be made at the signal, except when the signal is supplemented by a sign or pavement marking indicating where the stop must be made.

(c) A person who violates this section commits a Class C infraction. However, a failure to stop under subsection (b)(3) that results in bodily injury to a person is a Class A infraction.

SECTION 2. IC 9-21-3-8, AS AMENDED BY P.L.43-2011, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 8. (a) This section does not apply at railroad grade crossings.

(b) Whenever an illuminated flashing red or yellow light is used in a traffic signal or with a traffic sign, vehicular traffic shall obey the signal in the following manner:

(1) Flashing red (stop signal) means the following:

(A) When a red lens is illuminated by rapid intermittent flashes, a person who drives a vehicle shall stop at a clearly marked stop line before entering the crosswalk on the near side of the intersection.

(B) If no line exists, the person shall stop at the point nearest the intersecting roadway where the person has a view of approaching traffic on the intersecting roadway before entering the roadway.

(C) The right to proceed is subject to the rules applicable after making a stop at a stop sign.

(2) Except as provided in subdivision (3), flashing yellow (caution signal) means that when a yellow lens is illuminated with rapid intermittent flashes, a person who drives a vehicle may proceed through the intersection or past the signal only with caution.

(3) When a yellow lens with an arrow is illuminated with rapid intermittent flashes, a person who operates a vehicle may turn only after yielding to oncoming traffic.

(c) A person who violates this section commits a Class C infraction. However, a failure to stop under subsection (b)(1) that results in bodily injury to a person is a Class A infraction.

SECTION 3. IC 9-21-3-11, AS AMENDED BY P.L.217-2014, SECTION 45, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 11. A person who violates section ~~7, 8, or~~ 9 of this chapter commits a Class C infraction.

SECTION 4. IC 9-21-8-31 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 31. (a) A person who drives a vehicle shall do the following:

(1) Stop as required under this article at the entrance to a through highway.

(2) Yield the right-of-way to other vehicles that have entered the intersection from the through highway or that are approaching so closely on the through highway as to constitute an immediate hazard.

(b) After yielding as described in subsection (a)(2), the person who drives a vehicle may proceed and persons who drive other vehicles approaching the intersection on the through highway shall yield the right-of-way to the vehicle proceeding into or across the through highway.

(c) A person who violates this section commits a Class C infraction. However, a failure to stop under subsection (a)(1) that results in bodily injury to a person is a Class A infraction.

SECTION 5. IC 9-21-8-32 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 32. **(a)** A person who drives a vehicle shall stop at an intersection where a stop sign is erected at one (1) or more entrances to a through highway that are not a part of the through highway and proceed cautiously, yielding to vehicles that are not required to stop.

(b) A person who violates this section commits a Class C infraction. However, a failure to stop under this section that results in bodily injury to a person is a Class A infraction.

SECTION 6. IC 9-21-8-49, AS AMENDED BY P.L.188-2015, SECTION 76, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 49. Except as provided in sections **31, 32,** 35, 50, 51, 52, 55, 56, and 58 of this chapter, a person who violates this chapter commits a Class C infraction.

SECTION 7. IC 9-30-6-7, AS AMENDED BY P.L.85-2013,

SECTION 93, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 7. (a) If a person refuses to submit to a chemical test, the arresting officer shall inform the person that refusal will result in the suspension of the person's driving privileges, **and that the person will not be eligible for specialized driving privileges for at least one hundred eighty (180) days following the suspension.**

(b) If a person refuses to submit to a chemical test after having been advised that the refusal will result in the suspension of driving privileges or submits to a chemical test that results in prima facie evidence of intoxication, the arresting officer shall do the following:

(1) Obtain the person's driver's license or permit if the person is in possession of the document and issue a receipt valid until the initial hearing of the matter held under IC 35-33-7-1.

(2) Submit a probable cause affidavit to the prosecuting attorney of the county in which the alleged offense occurred.".

Page 1, line 7, strike "section 9(c)" and insert "**section 9(b)**".

Page 1, line 8, delete "section 9(b)" and insert "**section 9(c)**".

Page 1, between lines 10 and 11, begin a new paragraph and insert:

"SECTION 9. IC 9-30-7-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) A law enforcement officer shall offer a portable breath test or chemical test to any person who the officer has reason to believe operated a vehicle that was involved in a fatal accident or an accident involving serious bodily injury. **If the person refuses to submit to the breath test, the officer shall inform the person that refusal will result in the suspension of the person's driving privileges, and that the person will not be eligible for specialized driving privileges for at least one hundred eighty (180) days following the suspension.** If:

(1) the results of a portable breath test indicate the presence of alcohol;

(2) the results of a portable breath test do not indicate the presence of alcohol but the law enforcement officer has probable cause to believe the person is under the influence of a controlled substance or another drug; or

(3) the person refuses to submit to a portable breath test;

the law enforcement officer shall offer a chemical test to the person.

(b) A law enforcement officer may offer a person more than one (1) portable breath test or chemical test under this section. However, all chemical tests must be administered within three (3) hours after the fatal accident or the accident involving serious bodily injury.

(c) It is not necessary for a law enforcement officer to offer a portable breath test or chemical test to an unconscious person.

SECTION 10. IC 9-30-13-0.5, AS AMENDED BY P.L.198-2016, SECTION 604, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 0.5. (a) A court shall forward to the bureau a certified abstract of the record of the conviction of a person in the court for a violation of a law relating to motor vehicles.

(b) If in the opinion of the court a defendant should be deprived of the privilege to operate a motor vehicle upon a public highway, the court may recommend the suspension of the convicted person's driving privileges for a period that does not exceed:

(1) the maximum period of incarceration for the offense of which the person was convicted; **or**

(2) one hundred eighty (180) days, if the person was adjudicated to have committed a Class A or Class B infraction under IC 9-21-8.

(c) The bureau shall comply with the court's recommendation.

(d) At the time of a conviction referred to in subsection (a) or under IC 9-30-5-7, the court may obtain and destroy the defendant's current driver's license.

(e) An abstract required by this section must be in the form prescribed by the bureau and, when certified, shall be accepted by an administrative agency or a court as prima facie evidence of the conviction and all other action stated in the abstract.".

Page 4, line 12, delete "the person installs a certified ignition interlock device; and" and insert "**at least one hundred eighty (180) days have elapsed since the person's license was suspended for refusal to submit to a chemical test offered under IC 9-30-6 or IC 9-30-7; and**".

Page 5, after line 7, begin a new paragraph and insert:

"SECTION 14. IC 34-28-5-1, AS AMENDED BY P.L.198-2016, SECTION 667, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. (a) An action to enforce a statute defining an infraction shall be brought in the name of the state of Indiana by the prosecuting attorney for the judicial circuit in which the infraction allegedly took place. However, if the infraction allegedly took place on a public highway (as defined in IC 9-25-2-4) that runs on and along a common boundary shared by two (2) or more judicial circuits, a prosecuting attorney for any judicial circuit sharing the common boundary may bring the action.

(b) An action to enforce an ordinance shall be brought in the name of the municipal corporation. The municipal corporation need not prove that it or the ordinance is valid unless validity is controverted by affidavit.

(c) Actions under this chapter (or IC 34-4-32 before its repeal):

(1) shall be conducted in accordance with the Indiana Rules of Trial Procedure; and

(2) must be brought within two (2) years after the alleged conduct or violation occurred.

(d) The plaintiff in an action under this chapter must prove the commission of an infraction or ordinance violation by a preponderance of the evidence.

(e) The complaint and summons described in IC 9-30-3-6 may be used for any infraction or ordinance violation.

~~(f) Subsection (g) does not apply to an individual who is alleged to have committed an infraction under any of the following when the individual was less than eighteen (18) years of age at the time of the alleged offense:~~

~~IC 9-19~~

~~IC 9-21~~

~~IC 9-24~~

~~IC 9-25~~

~~IC 9-26~~

~~IC 9-30-5~~

~~IC 9-30-10~~
~~IC 9-30-15.~~

~~(g)~~ **(f)** This subsection does not apply to an offense or violation under IC 9-24-6 (before its repeal) or IC 9-24-6.1 involving the operation of a commercial motor vehicle. The prosecuting attorney or the attorney for a municipal corporation may establish a deferral program for deferring actions brought under this section. Actions may be deferred under this section if:

(1) the defendant in the action agrees to conditions of a deferral program offered by the prosecuting attorney or the attorney for a municipal corporation;

(2) the defendant in the action agrees to pay to the clerk of the court an initial user's fee and monthly user's fee set by the prosecuting attorney or the attorney for the municipal corporation in accordance with IC 33-37-4-2(e);

(3) the terms of the agreement are recorded in an instrument signed by the defendant and the prosecuting attorney or the attorney for the municipal corporation;

(4) the defendant in the action agrees to pay a fee of seventy dollars ($70) to the clerk of court if the action involves a moving traffic offense (as defined in IC 9-13-2-110);

(5) the agreement is filed in the court in which the action is brought; and

(6) if the deferral program is offered by the prosecuting attorney, the prosecuting attorney electronically transmits information required by the prosecuting attorneys council concerning the withheld prosecution to the prosecuting attorneys council, in a manner and format designated by the prosecuting attorneys council.

When a defendant complies with the terms of an agreement filed under this subsection (or IC 34-4-32-1(f) before its repeal), the prosecuting attorney or the attorney for the municipal corporation shall request the court to dismiss the action. Upon receipt of a request to dismiss an action under this subsection, the court shall dismiss the action. An action dismissed under this subsection (or IC 34-4-32-1(f) before its repeal) may not be refiled.

~~(h)~~ **(g)** If a judgment is entered against a defendant in an action to enforce an ordinance, the defendant may perform community restitution or service (as defined in IC 35-31.5-2-50) instead of paying a monetary judgment for the ordinance violation as described in section 4(e) of this chapter if:

(1) the:

(A) defendant; and

(B) attorney for the municipal corporation;

agree to the defendant's performance of community restitution or service instead of the payment of a monetary judgment;

(2) the terms of the agreement described in subdivision (1):

(A) include the amount of the judgment the municipal corporation requests that the defendant pay under section 4(e) of this chapter for the ordinance violation if the defendant fails to perform the community restitution or service provided for in the agreement as approved by the court; and

(B) are recorded in a written instrument signed by the defendant and the attorney for the municipal corporation;

(3) the agreement is filed in the court where the judgment was entered; and

(4) the court approves the agreement.

If a defendant fails to comply with an agreement approved by a court under this subsection, the court shall require the defendant to pay up to the amount of the judgment requested in the action under section 4(e) of this chapter as if the defendant had not entered into an agreement under this subsection.

SECTION 15. IC 34-28-5-4, AS AMENDED BY P.L.146-2016, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. (a) A judgment of up to ten thousand dollars ($10,000) may be entered for a violation constituting a Class A infraction.

(b) A judgment of up to one thousand dollars ($1,000) may be entered for a violation constituting a Class B infraction.

(c) Except as provided in subsection (f), a judgment of up to five hundred dollars ($500) may be entered for a violation constituting a Class C infraction.

(d) A judgment of up to twenty-five dollars ($25) may be entered for a violation constituting a Class D infraction.

(e) Subject to section ~~1(i)~~ **1(g)** of this chapter, a judgment:

(1) up to the amount requested in the complaint; and

(2) not exceeding any limitation under IC 36-1-3-8;

may be entered for an ordinance violation.

(f) Except as provided in subsections (g) and (h), a person who has admitted to a moving violation constituting a Class C infraction, pleaded nolo contendere to a moving violation constituting a Class C infraction, or has been found by a court to have committed a moving violation constituting a Class C infraction may not be required to pay more than the following amounts for the violation:

(1) If, before the appearance date specified in the summons and complaint, the person mails or delivers an admission of the moving violation or a plea of nolo contendere to the moving violation, the person may not be required to pay any amount, except court costs and a judgment that does not exceed thirty-five dollars and fifty cents ($35.50).

(2) If the person admits the moving violation or enters a plea of nolo contendere to the moving violation on the appearance date specified in the summons and complaint, the person may not be required to pay any amount, except court costs and a judgment that does not exceed thirty-five dollars and fifty cents ($35.50).

(3) If the person contests the moving violation in court and is found to have committed the moving violation, the person may not be required to pay any amount, except:

(A) court costs and a judgment that does not exceed thirty-five dollars and fifty cents ($35.50) if, in the five (5) years before the appearance date specified in the summons and complaint, the person was not found by a court in the county to have committed a moving violation;

(B) court costs and a judgment that does not exceed two hundred fifty dollars and fifty cents ($250.50) if, in the five (5) years before the appearance date specified in the summons and complaint, the person was found by a

court in the county to have committed one (1) moving violation; and

(C) court costs and a judgment that does not exceed five hundred dollars ($500) if, in the five (5) years before the appearance date specified in the summons and complaint, the person was found by a court in the county to have committed two (2) or more moving violations.

In a proceeding under subdivision (3), the court may require the person to submit an affidavit or sworn testimony concerning whether, in the five (5) years before the appearance date specified in the summons and complaint, the person has been found by a court to have committed one (1) or more moving violations.

(g) The amounts described in subsection (f) are in addition to any amount that a person may be required to pay for attending a defensive driving school program.

(h) This subsection applies only to infraction judgments imposed in Marion County for traffic violations after December 31, 2010. Subsection (f) applies to an infraction judgment described in this subsection. However, a court shall impose a judgment of not less than thirty-five dollars ($35) for an infraction judgment that is entered in Marion County. These funds shall be transferred to a dedicated fund in accordance with section 5 of this chapter.

(i) This subsection applies only to infraction judgments imposed in Clark County for toll violations after January 1, 2017. Subsection (f) applies to an infraction judgment described in this subsection. However, a court shall impose a judgment of not less than thirty-five dollars ($35) for an infraction judgment that is entered in Clark County. These funds shall be transferred to a dedicated fund in accordance with section 5(f) of this chapter.

SECTION 16. IC 34-28-5-8, AS AMENDED BY P.L.200-2005, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 8. The violations clerk or deputy violations clerk shall:

(1) accept:

(A) written appearances;

(B) waivers of trial;

(C) admissions of violation;

(D) declarations of nolo contendere for moving traffic violations;

(E) payments of judgments (including costs) in traffic violation cases;

(F) deferral agreements made under ~~section 1(f)~~ **section 1** of this chapter (or IC 34-4-32-1(f) before its repeal) and deferral program fees prescribed under IC 33-37-4-2(e); and

(G) community restitution or service agreements made under section 1(g) of this chapter;

(2) issue receipts and account for any judgments (including costs) collected; and

(3) pay the judgments (including costs) collected to the appropriate unit of government as provided by law.

SECTION 17. IC 34-28-5-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 9. The court shall:

(1) designate the traffic violations within the authority of the violations clerk, but these violations may not include misdemeanors or felonies;

(2) establish schedules, within limits prescribed by law, of the judgments to be imposed for first violations, designating each violation specifically;

(3) order that the schedule of judgments be prominently posted in the place where the fines are paid;

(4) establish a procedure under which any violations clerk or deputy violations clerk shall accept, receipt, and account for all money tendered for designated traffic violations; and

(5) dismiss deferred actions if a dismissal request is made under ~~section 1(f)~~ **section 1** of this chapter (or IC 34-4-32-1(f) before its repeal).

SECTION 18. IC 35-46-9-9, AS ADDED BY P.L.40-2012, SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 9. (a) A law enforcement officer who has probable cause to believe that a person has committed an offense under this chapter shall offer the person the opportunity to submit to a chemical test. **If the person refuses to submit to the breath test, the officer shall inform the person that refusal will result in the suspension of the person's driving privileges, and that the person will not be eligible for specialized driving privileges for at least one hundred eighty (180) days following the suspension.** It is not necessary for the law enforcement officer to offer a chemical test to an unconscious person.

(b) A law enforcement officer may offer a person more than one (1) chemical test under this chapter. However, all tests must be administered within three (3) hours after the officer had probable cause to believe the person violated this chapter.

(c) A person must submit to each chemical test offered by a law enforcement officer to comply with the implied consent provisions of this chapter.

SECTION 19. IC 35-46-9-10, AS ADDED BY P.L.40-2012, SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 10. (a) A law enforcement officer shall offer a portable breath test or chemical test to any person if the officer has reason to believe the person operated a motorboat that was involved in a fatal accident or an accident involving serious bodily injury. **If the person refuses to submit to the breath test, the officer shall inform the person that refusal will result in the suspension of the person's driving privileges, and that the person will not be eligible for specialized driving privileges for at least one hundred eighty (180) days following the suspension.** If:

(1) the results of a portable breath test indicate the presence of alcohol;

(2) the results of a portable breath test do not indicate the presence of alcohol but the law enforcement officer has probable cause to believe the person is under the influence of a controlled substance or another drug; or

(3) the person refuses to submit to a portable breath test;

the law enforcement officer shall offer a chemical test to the person.

(b) A law enforcement officer may offer a person more than one (1) portable breath test or chemical test under this section. However, all chemical tests must be administered within three (3) hours after the fatal accident or the accident involving serious

bodily injury.

(c) It is not necessary for a law enforcement officer to offer a portable breath test or chemical test to an unconscious person.".

Renumber all SECTIONS consecutively.

(Reference is to HB 1157 as printed January 17, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 7, Nays 2.

M. YOUNG, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Engrossed House Bill 1182, 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 4, between lines 4 and 5, begin a new paragraph and insert:

"SECTION 1. IC 16-18-2-163, AS AMENDED BY P.L.2-2019, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 163. (a) **Except as provided in subsection (c),** "health care provider", for purposes of IC 16-21 and IC 16-41, means any of the following:

(1) An individual, a partnership, a corporation, a professional corporation, a facility, or an institution licensed or legally authorized by this state to provide health care or professional services as a licensed physician, a psychiatric hospital, a hospital, a health facility, an emergency ambulance service (IC 16-31-3), a dentist, a registered or licensed practical nurse, a midwife, an optometrist, a pharmacist, a podiatrist, a chiropractor, a physical therapist, a respiratory care practitioner, an occupational therapist, a psychologist, a paramedic, an emergency medical technician, an advanced emergency medical technician, an athletic trainer, or a person who is an officer, employee, or agent of the individual, partnership, corporation, professional corporation, facility, or institution acting in the course and scope of the person's employment.

(2) A college, university, or junior college that provides health care to a student, a faculty member, or an employee, and the governing board or a person who is an officer, employee, or agent of the college, university, or junior college acting in the course and scope of the person's employment.

(3) A blood bank, community mental health center, community intellectual disability center, community health center, or migrant health center.

(4) A home health agency (as defined in IC 16-27-1-2).

(5) A health maintenance organization (as defined in IC 27-13-1-19).

(6) A health care organization whose members, shareholders, or partners are health care providers under subdivision (1).

(7) A corporation, partnership, or professional corporation not otherwise qualified under this subsection that:

(A) provides health care as one (1) of the corporation's, partnership's, or professional corporation's functions;

(B) is organized or registered under state law; and

(C) is determined to be eligible for coverage as a health care provider under IC 34-18 for the corporation's, partnership's, or professional corporation's health care function.

Coverage for a health care provider qualified under this subdivision is limited to the health care provider's health care functions and does not extend to other causes of action.

(b) "Health care provider", for purposes of IC 16-35, has the meaning set forth in subsection (a). However, for purposes of IC 16-35, the term also includes a health facility (as defined in section 167 of this chapter).

(c) "Health care provider", for purposes of IC 16-32-5, IC 16-36-5, ~~and~~ IC 16-36-6, **and IC 16-41-10** means an individual licensed or authorized by this state to provide health care or professional services as:

(1) a licensed physician;

(2) a registered nurse;

(3) a licensed practical nurse;

(4) an advanced practice registered nurse;

(5) a certified nurse midwife;

(6) a paramedic;

(7) an emergency medical technician;

(8) an advanced emergency medical technician;

(9) an emergency medical responder, as defined by section 109.8 of this chapter;

(10) a licensed dentist;

(11) a home health aide, as defined by section 174 of this chapter; or

(12) a licensed physician assistant.

The term includes an individual who is an employee or agent of a health care provider acting in the course and scope of the individual's employment.

(d) "Health care provider", for purposes of section 1.5 of this chapter and IC 16-40-4, means any of the following:

(1) An individual, a partnership, a corporation, a professional corporation, a facility, or an institution licensed or authorized by the state to provide health care or professional services as a licensed physician, a psychiatric hospital, a hospital, a health facility, an emergency ambulance service (IC 16-31-3), an ambulatory outpatient surgical center, a dentist, an optometrist, a pharmacist, a podiatrist, a chiropractor, a psychologist, or a person who is an officer, employee, or agent of the individual, partnership, corporation, professional corporation, facility, or institution acting in the course and scope of the person's employment.

(2) A blood bank, laboratory, community mental health center, community intellectual disability center, community health center, or migrant health center.

(3) A home health agency (as defined in IC 16-27-1-2).

(4) A health maintenance organization (as defined in IC 27-13-1-19).

(5) A health care organization whose members, shareholders, or partners are health care providers under subdivision (1).

(6) A corporation, partnership, or professional corporation not otherwise specified in this subsection that:

(A) provides health care as one (1) of the corporation's, partnership's, or professional corporation's functions;

(B) is organized or registered under state law; and

(C) is determined to be eligible for coverage as a health care provider under IC 34-18 for the corporation's, partnership's, or professional corporation's health care function.

(7) A person that is designated to maintain the records of a person described in subdivisions (1) through (6).

(e) "Health care provider", for purposes of IC 16-45-4, has the meaning set forth in 47 CFR 54.601(a).".

Page 8, line 11, strike "subsection (d)," and insert "**subsection (e),**".

Page 8, line 25, delete "blood borne" and insert "**bloodborne**".

Page 9, strike lines 14 through 21.

Page 15, between lines 2 and 3, begin a new paragraph and insert:

"SECTION 25. IC 16-41-7.5-6, AS AMENDED BY P.L.198-2017, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. A qualified entity that operates a program under this chapter must do the following:

(1) Annually register the program in a manner prescribed by the state department with the:

(A) state department; and

(B) local health department in the county or municipality where services will be provided by the qualified entity if the qualified entity is not the local health department.

(2) Have one (1) of the following licensed in Indiana provide oversight to the qualified entity's programs:

(A) A physician.

(B) A registered nurse.

(C) A physician assistant.

(3) Store and dispose of all syringes and needles collected in a safe and legal manner.

(4) Provide education and training on drug overdose response and treatment, including the administration of an overdose intervention drug.

(5) Provide drug addiction treatment information and referrals to drug treatment programs, including programs in the local area and programs that offer medication assisted treatment that includes a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.

(6) Provide syringe and needle distribution and collection without collecting or recording personally identifiable information.

(7) Operate in a manner consistent with public health and safety.

(8) Ensure the program is medically appropriate and part of a comprehensive public health response.

(9) Keep sufficient quantities of an overdose intervention drug (as defined in IC 16-18-2-263.9) in stock and to administer in accordance with IC 16-42-27.

(10) Provide testing for communicable diseases, and if an individual tests positive for a communicable disease, provide health care services or a referral to a health care provider for the services.

(11) Establish a referral process for program participants in need of:

(A) information or education concerning communicable diseases; or

(B) health care.

SECTION 26. IC 16-41-7.5-12, AS ADDED BY P.L.208-2015, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 12. **(a)** Before November 1 of each year, the state department shall submit a report concerning syringe exchange programs operated under this chapter to the governor and to the general assembly in an electronic format under IC 5-14-6.

(b) Before November 1, 2020, as part of the report to the general assembly required under subsection (a), the state department shall ensure the report includes the following additional information concerning the program:

(1) The number of programs operating in Indiana.

(2) The data, compiled for each program, reported to the state department under section 10 of this chapter.

(3) Any other information the state department deems relevant to the general assembly in assessing the effectiveness of having a program in the state.

SECTION 27. IC 16-41-7.5-14, AS AMENDED BY P.L.198-2017, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 14. This chapter expires July 1, ~~2021.~~ **2022.**".

Page 30, between lines 10 and 11, begin a new line block indented and insert:

"**(3) A health care provider who is exposed to blood and body fluids while providing medical care to a patient.**".

Page 30, line 11, after "provider" insert ", **a health care provider,**".

Page 30, line 16, after "provider" insert ", **a health care provider,**".

Page 30, line 19, after "provider" insert ", **health care provider,**".

Page 30, line 20, after "provider's" insert ", **health care provider's,**".

Page 30, line 22, after "provider" insert ", **health care provider,**".

Page 30, line 25, after "provider" insert ", **health care provider,**".

Page 30, line 34, after "provider's" insert ", **health care provider's,**".

Page 30, line 41, after "provider" insert ", **a health care provider,**".

Page 31, line 5, after "provider" insert ", **health care provider,**".

Page 31, line 10, after "provider" insert ", **health care provider,**".

Page 31, line 14, after "provider" insert ", **health care provider,**".

Page 31, line 15, after "provider's" insert ", **health care provider's,**".

Page 31, line 20, after "provider" insert ", **health care provider,**".

Page 31, line 29, after "provider" insert ", **health care provider,**".

Page 31, line 30, after "provider's" insert ", **health care provider's,**".

Page 31, line 35, after "provider" insert ", **health care provider,**".

Page 31, between lines 37 and 38, begin a new paragraph and insert:

"SECTION 41. IC 16-41-10-2.6, AS AMENDED BY THE TECHNICAL CORRECTIONS BILL OF THE 2020 GENERAL ASSEMBLY, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2.6. (a) This section applies to:

(1) an emergency medical services provider; ~~and~~

(2) a law enforcement officer; **and**

(3) a health care provider;

who ~~has~~ **have** been exposed to blood or body fluids as described in section 2(a) of this chapter.

(b) A person to whom this ~~chapter~~ **section** applies may submit an emergency application for a blood or body fluid specimen to a circuit or superior court having jurisdiction to issue a warrant.

(c) An emergency application for a blood or body fluid specimen must be verified and include the following information:

(1) The name and employing agency of the person exposed to the blood or body fluids.

(2) The name of the patient to whose blood or body fluids the person has been exposed.

(3) A concise description of the circumstances under which the exposure occurred.

(4) A concise explanation of why immediate testing is necessary.

(5) Any other information required by the court.

(d) If it appears from the emergency application for a blood or body fluid specimen that:

(1) the person exposed to the blood or body fluid is a person to whom this section applies; and

(2) immediate testing is necessary;

the court shall approve the emergency application for a blood or body fluid specimen ex parte, without notice or a hearing, and issue an emergency order requiring the patient to whose blood or body fluid the emergency medical services provider, **health care provider,** or law enforcement officer has been exposed to provide a blood or body fluid specimen for testing.".

Page 31, line 42, after "provider" insert ", **health care provider,**".

Page 32, line 12, after "provider" insert ", **health care provider,**".

Page 32, line 14, after "provider's" insert "**or health care provider's,**".

Page 32, line 17, after "provider" insert ", **health care provider,**".

Page 32, line 18, after "provider's" insert ", **health care provider's,**".

Page 32, line 23, after "provider" insert ", **health care provider,**".

Page 32, line 27, after "provider" insert "**or health care provider**".

Page 32, line 30, after "employer" insert "**or health care provider's employer**".

Page 32, line 34, after "provider" insert ", **health care provider,**".

Page 33, line 15, after "provider" insert ", **health care provider,**".

Page 33, line 19, after "provider" insert ", **health care provider,**".

Page 33, line 22, after "provider" insert ", **health care provider,**".

Page 33, line 25, after "provider" insert ", **health care provider,**".

Page 35, line 10, delete "IC 16-51" and insert "IC 16-49.5".

Page 35, line 13, delete "51." and insert "**49.5.**".

Page 35, between lines 17 and 18, begin a new paragraph and insert:

"**Sec. 2. As used in this chapter, "SOFR" means suicide and overdose fatality review.**".

Page 35, line 18, delete "2." and insert "**3.**".

Page 35, line 21, delete "IC 16-51-2-1." and insert "**IC 16-49.5-2-1.**".

Page 35, delete lines 22 through 23.

Page 49, line 20, delete "IC 16-51-2," and insert "**IC 16-49.5-2,**".

Page 50, line 1, delete "IC 16-51-2-8" and insert "**IC 16-49.5-2-8**".

Page 50, line 4, delete "IC 16-51-2-11" and insert "**IC 16-49.5-2-11**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1182 as reprinted January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 11, Nays 0.

CHARBONNEAU, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Insurance and Financial Institutions, to which was referred Engrossed House Bill 1207, 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:

Replace the effective date in SECTION 9 with "[EFFECTIVE UPON PASSAGE]".

Page 2, between lines 25 and 26, begin a new paragraph and insert:

"SECTION 2. IC 5-10-8-23 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 23. (a) As used in this section, "covered individual" means an individual who is entitled to coverage under a state employee health plan.**

(b) As used in this section, "state employee health plan" means the following:

(1) A self-insurance program established under section 7(b) of this chapter.

(2) A contract for prepaid health services under section 7(c) of this chapter.

(c) A state employee health plan shall implement a procedure to allow a covered individual to submit a claim to offset the covered individual's deductible for the cost of a purchase by the covered individual of a prescription drug that:

(1) is covered under the state employee health plan; and

(2) was purchased by the covered individual without submitting at the point of purchase the claim through the state employee health plan.

(d) If a covered individual submits a claim to the state employee health plan in accordance with the procedure established under subsection (c), the state employee health plan shall verify the purchase described under subsection (c) and count the cost of the purchased covered prescription drug against the covered individual's deductible.".

Page 6, line 10, delete "electronically." and insert "**electronically, including but not limited to failure to possess the requisite technology.**".

Page 7, delete lines 1 through 2.

Page 8, between lines 32 and 33, begin a new paragraph and insert:

"SECTION 13. IC 25-26-13-31, AS AMENDED BY P.L.247-2019, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 31. (a) A pharmacist may do the following:

(1) Obtain and maintain patient drug histories and other pharmacy records that are related to drug or device therapies.

(2) Perform drug evaluation, drug utilization review, and drug regimen review.

(3) Participate in the selection, storage, and distribution of drugs, dietary supplements, and devices. However, drug selection must comply with IC 16-42-19 and IC 16-42-22.

(4) Participate in drug or drug related research.

(5) Prescribe any of the following devices or supplies approved by the federal Food and Drug Administration:

(A) Inhalation spacer.

(B) Nebulizer.

(C) Supplies for medical devices, including but not limited to, continuous positive airway pressure (CPAP) machine supplies and insulin pump supplies.

(D) Normal saline and sterile water for irrigation for wound care **or for injection with a prescription drug or device.**

(E) Diabetes blood sugar testing supplies.

(F) Pen needles.

(G) Syringes for medication use.

However, the pharmacist must provide the patient with a written advance beneficiary notice that is signed by the patient and that states that the patient may not be eligible for reimbursement for the device or supply. The pharmacy must keep a copy of the patient's advance beneficiary notice on file for seven (7) years.

(b) A pharmacist who participates in an activity allowed under subsection (a) is required to follow the standards for the competent practice of pharmacy adopted by the board.

(c) A pharmacist may issue a prescription for purposes of subsection (a)(5).".

Page 9, line 4, delete ":".

Page 9, line 5, delete "(1)".

Page 9, run in lines 4 through 5.

Page 9, line 7, delete "; and" and insert "**.**".

Page 9, delete lines 8 through 10.

Page 9, delete lines 11 through 21, begin a new paragraph and insert:

"**(d) The board must approve all programs that provide training to pharmacy technicians to administer influenza immunizations as permitted by this section.**".

Page 9, between lines 28 and 29, begin a new paragraph and insert:

"SECTION 17. IC 27-2-9.1 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2021]:

Chapter 9.1. Prescription Drug Purchases

Sec. 1. As used in this chapter, "covered individual" means an individual who is entitled to coverage under a health plan.

Sec. 2. As used in this chapter, "health plan" means a plan that is compliant with the PPACA and offered by an insurer to provide, deliver, arrange for, pay for, or reimburse the cost of health care items or services. The term includes the following:

(1) A policy of accident and sickness insurance (as defined in IC 27-8-5-1).

(2) An individual contract (as defined by IC 27-13-1-21) and a group contract (as defined by IC 27-13-1-16).

Sec. 3. As used in this chapter, "insurer" means an entity licensed in Indiana to issue a health plan.

Sec. 4. As used in this chapter, "PPACA" refers to the federal Patient Protection and Affordable Care Act (P.L. 111-148), as amended thereafter, including by the federal Health Care and Education Reconciliation Act of 2010 (P.L. 111-152).

Sec. 5. (a) A health plan shall implement a procedure to allow a covered individual to submit a claim to offset the covered individual's deductible for the cost of a purchase by the covered individual of a prescription drug that:

(1) is covered under the covered individual's health plan; and

(2) was purchased by the covered individual without submitting at the point of purchase the claim through the health plan.

(b) If a covered individual submits a claim to the health plan in accordance with the procedure established under subsection (a), the health plan shall verify the purchase described under subsection (a) and count the cost of the purchased covered prescription drug against the covered individual's deductible.

SECTION 18. IC 27-2-9.5 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 9.5. Formulary Modifications for Prescription

Drugs

Sec. 1. For purposes of this chapter, "covered individual" means an individual who is entitled to coverage under a health plan.

Sec. 2. For purposes of this chapter, "formulary modification" includes the following with respect to a prescription drug:

(1) The exclusion of coverage for a drug.

(2) Changing:

(A) a copayment amount;

(B) a coinsurance rate;

(C) drug cost sharing minimum or maximum amounts;

(D) a deductible; or

(E) a maximum out-of-pocket amount in a manner as to raise the covered individual's out-of-pocket costs for a drug.

(3) The movement of a drug to a more restrictive coverage category or tier.

(4) The discontinuation of coverage of a drug before the date on which a covered individual is no longer entitled to coverage.

(5) The removal of a drug from a formulary, unless any of the following occur:

(A) The federal Food and Drug Administration has issued a statement calling into question the clinical safety of the drug.

(B) The manufacturer of the drug has notified the federal Food and Drug Administration of a manufacturing discontinuance or potential discontinuance of the drug as required by 21 U.S.C. 356c.

(6) A limitation or reduction in the coverage of a drug in any other way, including subjecting it to a new prior authorization or step therapy requirement.

Sec. 3. For purposes of this chapter, "health plan" includes the following:

(1) A policy of accident and sickness insurance (as defined in IC 27-8-5-1).

(2) An individual contract (as defined in IC 27-13-1-21) and a group contract (as defined in IC 27-13-1-16).

Sec. 4. Not later than sixty (60) days prior to the effective date of a formulary modification, a health plan must provide the following to covered individuals affected by the modification:

(1) Notice of the formulary modification.

(2) Information on the process for requesting an exception to the formulary modification (as described in section 5 of this chapter).

(3) A list of alternative covered drugs for the medical condition in question.

Sec. 5. A health plan must provide, on its Internet web site, a clear and accessible process through which a covered individual may request an exception to a formulary modification. A health plan's existing exceptions process may be used to satisfy the requirements of this section.

Sec. 6. A health plan must grant an exception to a formulary modification if any of the following apply:

(1) The alternative covered drugs provided in the list required by section 4(3) of this chapter are contraindicated or will likely cause an adverse reaction or physical or mental harm to the covered individual.

(2) The alternative covered drugs provided in the list required by section 4(3) of this chapter are expected to be ineffective, based on both of the following:

(A) The known clinical characteristics of the covered individual.

(B) The known characteristics of the alternative covered drugs, as found in sound clinical evidence.

(3) The covered individual has previously received the alternative covered drugs provided in the list required by section 4(3) of this chapter, or a drug in the same pharmacologic class or with the same mechanism of action, and the drug was discontinued due to lack of efficacy or effectiveness, diminished effect, or an adverse event.

(4) Based on clinical appropriateness, the alternative covered drugs provided in the list required by section 4(3) of this chapter are not in the best interest of the covered individual because the covered individual's use of the alternative covered drugs is expected to do any of the following:

(A) Cause a significant barrier to the covered individual's adherence to or compliance with the covered individual's plan of care.

(B) Worsen a comorbid condition of the covered individual.

(C) Decrease the covered individual's ability to achieve or maintain reasonable functional ability in performing daily activities.

Sec. 7. (a) A health plan must make a determination regarding a covered individual's request for an exception to a formulary modification not later than:

(1) for an urgent care situation, one (1) business day after receiving the request; or

(2) for a nonurgent care situation, three (3) business days after receiving the request.

(b) If a health plan does not issue a determination within the time required by subsection (a), a covered individual's request for an exception to a formulary modification is considered to have been granted.

(c) If a health plan denies a covered individual's request for an exception to a formulary modification, the health plan must provide the covered individual and the covered individual's prescribing provider with notice of the denial, including a detailed, written explanation of the reason for the denial and the clinical rationale that supports the denial.

(d) Except when a drug has been removed from a formulary because of concerns about safety, if a drug has been removed from a formulary and a request for an exception to the formulary modification was submitted by or on behalf of a covered individual prior to the effective date of the change, a health plan must continue to provide coverage for that drug until the health plan renders a decision on the covered individual's request for an exception to the formulary modification.

Sec. 8. When an exception to a formulary modification is granted, a health plan:

(1) may not issue a formulary modification for coverage of the drug; and

(2) must authorize coverage of the drug;

for the remainder of the covered individual's policy year.

Sec. 9. (a) Nothing in this chapter prevents a covered individual's:

(1) prescribing provider from prescribing a drug that the prescribing provider considers to be medically necessary for the covered individual; or

(2) pharmacist from substituting:

(A) a generic drug under IC 16-42-22; or

(B) a biosimilar biological product under IC 16-42-25.

(b) Nothing in this chapter prevents a health plan from doing any of the following:

(1) Adding a drug to the health plan's formulary.

(2) Removing a drug from the health plan's formulary if the drug's manufacturer has removed the drug from sale in the United States.".

Page 11, after line 16, begin a new paragraph and insert:

"SECTION 22. [EFFECTIVE JULY 1, 2020] **(a) IC 5-10-8-23, as added by this act, applies to a state employee health plan that is established, entered into, amended, or renewed after June 30, 2020.**

(b) IC 27-2-9.1 and IC 27-2-9.5, as added by this act, apply to a health plan that is issued, entered into, delivered, amended, or renewed after June 30, 2020.

(c) This SECTION expires June 30, 2023.

SECTION 23. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1207 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 5, Nays 1.

BASSLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill 1209, 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 2, line 2, after "must" insert "**at least**".

Page 2, line 2, after "reimbursement" insert "**, subject to applicable deductible and coinsurance,**".

Page 2, line 16, after "reimburse" insert "**, subject to applicable deductible and coinsurance,**".

Page 2, line 18, after "reimburse" insert "**, subject to applicable deductible and coinsurance,**".

Page 2, between lines 24 and 25, begin a new paragraph and insert:

"**(g) This section does not restrict the state employee health plan from providing coverage beyond the requirements in this section.**".

(Reference is to EHB 1209 as printed February 21, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 13, Nays 0.

MISHLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Corrections and Criminal Law, to which was referred Engrossed House Bill 1225, 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:

Delete the title and insert the following:

A BILL FOR AN ACT to amend the Indiana Code concerning public safety and public safety officers.

Page 2, line 7, delete "offense" and insert "**violation**".

Page 2, line 9, delete "injury" and insert "**injury, catastrophic injury,**".

Page 2, line 41, delete "offense" and insert "**violation**".

Page 2, line 42, delete "injury" and insert "**injury, catastrophic injury,**".

Page 3, between lines 26 and 27, begin a new paragraph and insert:

"SECTION 4. IC 35-44.1-3-1, AS AMENDED BY P.L.184-2019, SECTION 12, AND AS AMENDED BY P.L.201-2019, SECTION 3, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. (a) A person who knowingly or intentionally:

(1) forcibly resists, obstructs, or interferes with a law enforcement officer or a person assisting the officer while the officer is lawfully engaged in the execution of the officer's duties;

(2) forcibly resists, obstructs, or interferes with the authorized service or execution of a civil or criminal process or order of a court; or

(3) flees from a law enforcement officer after the officer has, by visible or audible means, including operation of the law enforcement officer's siren or emergency lights, identified himself or herself and ordered the person to stop;

commits resisting law enforcement, a Class A misdemeanor, except as provided in ~~*subsection (b).*~~ *subsection (c)* **or (d).**

(b) A person who, having been denied entry by a law enforcement officer, knowingly or intentionally enters an area that is marked off with barrier tape or other physical barriers, commits interfering with law enforcement, a Class B misdemeanor, except as provided in subsection (c) or ~~*(b).*~~ **(k).**

~~*(b)*~~ *(c)* The offense under subsection (a) *or (b)* is a:

(1) Level 6 felony if:

(A) ~~*the offense is described in subsection (a)(3) and*~~ the person uses a vehicle to commit the offense; or

(B) while committing ~~*any*~~ *the* offense, ~~*described in subsection (a),*~~ the person draws or uses a deadly weapon, inflicts bodily injury on or otherwise causes bodily injury to another person, or operates a vehicle in a manner that creates a substantial risk of bodily injury to another person;

(2) Level 5 felony if, while committing ~~*any*~~ *the* offense,

~~*described in subsection (a),*~~ the person operates a vehicle in a manner that causes serious bodily injury to another person;

(3) Level 3 felony if, while committing ~~*any*~~ *the* offense, ~~*described in subsection (a),*~~ the person operates a vehicle in a manner that causes the death *or catastrophic injury* of another person; and

(4) Level 2 felony if, while committing any offense described in subsection (a), the person operates a vehicle in a manner that causes the death *or catastrophic injury* of a law enforcement officer while the law enforcement officer is engaged in the officer's official duties.

(d) The offense under subsection (a) is a Level 6 felony if, while committing an offense under:

(1) subsection (a)(1) or (a)(2), the person:

(A) creates a substantial risk of bodily injury to the person or another person; and

(B) has two (2) or more prior unrelated convictions under subsection (a); or

(2) subsection (a)(3), the person has two (2) or more prior unrelated convictions under subsection (a).

~~*(c) (d)*~~ **(e)** If a person uses a vehicle to commit a felony offense under subsection ~~*(b)(1)(B), (b)(2), (b)(3), or (b)(4)*~~ *(c)(1)(B), (c)(2), (c)(3), or (c)(4),* as part of the criminal penalty imposed for the offense, the court shall impose a minimum executed sentence of at least:

(1) thirty (30) days, if the person does not have a prior unrelated conviction under this section;

(2) one hundred eighty (180) days, if the person has one (1) prior unrelated conviction under this section; or

(3) one (1) year, if the person has two (2) or more prior unrelated convictions under this section.

~~*(d) (e)*~~ **(f)** Notwithstanding IC 35-50-2-2.2 and IC 35-50-3-1, the mandatory minimum sentence imposed under subsection ~~*(c) (d)*~~ **(e)** may not be suspended.

~~*(e) (f)*~~ **(g)** If a person is convicted of an offense involving the use of a motor vehicle under:

(1) ~~*subsection (b)(1)(A),*~~ *subsection (c)(1)(A)*, if the person exceeded the speed limit by at least twenty (20) miles per hour while committing the offense;

(2) ~~*subsection (b)(2),*~~ *subsection (c)(2);* or

(3) ~~*subsection (b)(3),*~~ *subsection (c)(3);*

the court may notify the bureau of motor vehicles to suspend or revoke the person's driver's license and all certificates of registration and license plates issued or registered in the person's name in accordance with IC 9-30-4-6.1(b)(3) for the period described in IC 9-30-4-6.1(d)(1) or IC 9-30-4-6.1(d)(2). The court shall inform the bureau whether the person has been sentenced to a term of incarceration. At the time of conviction, the court may obtain the person's current driver's license and return the license to the bureau of motor vehicles.

~~*(f) (g)*~~ **(h)** A person may not be charged or convicted of a crime under subsection (a)(3) if the law enforcement officer is a school resource officer acting in the officer's capacity as a school resource officer.

~~*(g)*~~ **(i)** *A person who commits an offense described in subsection* ~~*(b)*~~ **(c)** *commits a separate offense for each person whose bodily injury, serious bodily injury, catastrophic injury, or death is caused by a violation of subsection* ~~*(b).*~~ **(c).**

~~*(h)*~~ **(j)** *A court may order terms of imprisonment imposed on a person convicted of more than one (1) offense described in subsection* ~~*(b)*~~ **(c)** *to run consecutively. Consecutive terms of imprisonment imposed under this subsection are not subject to the sentencing restrictions set forth in IC 35-50-1-2(c) through IC 35-50-1-2(d).*

~~*(h)*~~ **(k)** *As used in this subsection, "family member" means a child, grandchild, parent, grandparent, or spouse of the person. It is a defense to a prosecution under subsection (b) that the person reasonably believed that the person's family member:*

(1) was in the marked off area; and

(2) had suffered bodily injury or was at risk of suffering bodily injury;

if the person is not charged as a defendant in connection with the offense, if applicable, that caused the area to be secured by barrier tape or other physical barriers.".

Renumber all SECTIONS consecutively.

(Reference is to HB 1225 as reprinted January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

M. YOUNG, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1244, 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 1, line 16, delete "those".

Page 1, line 17, delete "hearing." and insert "**hearing if the records are made available to the interested parties at least seven (7) days prior to the hearing through the following:**

(1) The United States mail.

(2) The department's electronic portal.".

(Reference is to HB 1244 as printed January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Homeland Security and Transportation, to which was referred Engrossed House Bill 1246, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 9-13-2-1.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 1.9. "Airbag", for purposes of IC 9-19-10.5, has the meaning set forth in IC 9-19-10.5-0.2.**".

Page 2, between lines 2 and 3, begin a new paragraph and insert:

"SECTION 3. IC 9-13-2-38.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 38.9. "Counterfeit supplemental restraint system component", for purposes of IC 9-19-10.5, has the meaning set forth in IC 9-19-10.5-0.4.**

SECTION 2. IC 9-13-2-39.7, AS AMENDED BY P.L.178-2019, SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 39.7. **(a)** "Credential" means the following:

(1) The following forms of documentation in physical form issued by the bureau under IC 9-24:

(A) A driver's license.

(B) A learner's permit.

(C) An identification card.

(D) A photo exempt identification card.

(2) The following forms of documentation in the form of a mobile credential issued by the bureau under IC 9-24:

(A) Except for a commercial driver's license issued under IC 9-24-6.1, a driver's license.

(B) Except for a commercial learner's permit issued under IC 9-24-6.1, a learner's permit.

(C) An identification card.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 32 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 3. IC 9-13-2-48, AS AMENDED BY P.L.178-2019, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 48. **(a)** "Driver's license" means the following:

(1) Any type of license issued by the state in physical form authorizing an individual to operate the type of vehicle for which the license was issued, in the manner for which the license was issued, on a highway. The term includes any endorsements added to the license under IC 9-24-8.5.

(2) Except for a commercial driver's license issued under IC 9-24-6.1, any type of license issued by the state in the form of a mobile credential authorizing an individual to operate the type of vehicle for which the license was issued, in the manner for which the license was issued, on a highway. The term includes any endorsements added to the license under IC 9-24-8.5.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 33 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).".

Page 2, between lines 7 and 8, begin a new paragraph and insert:

"SECTION 5. IC 9-13-2-74.5, AS AMENDED BY P.L.178-2019, SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 74.5. **(a)** "Identification card" means an identification document issued by a state government either in physical form or in the form of a mobile credential for purposes of identification.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 34 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 5. IC 9-13-2-79.7 IS REPEALED [EFFECTIVE JULY 1, 2020]. ~~Sec. 79.7. "Inflatable restraint system", for purposes of IC 9-19-10.5, has the meaning set forth in IC 9-19-10.5-1.~~".

Page 2, between lines 27 and 28, begin a new paragraph and insert:

"SECTION 7. IC 9-13-2-103.4, AS ADDED BY P.L.178-2019, SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 103.4. **(a)** "Mobile credential" means a digital representation issued by the bureau under IC 9-24-17.5 of the information contained on the following:

(1) A driver's license.

(2) A learner's permit.

(3) An identification card.

The term does not include a commercial driver's license or commercial learner's permit issued under IC 9-24-6.1 or a photo exempt identification card issued under IC 9-24-16.5.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 36 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).".

Page 3, between lines 7 and 8, begin a new paragraph and insert:

"SECTION 9. IC 9-13-2-111.8 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 111.8. "Nonfunctional airbag", for purposes of IC 9-19-10.5, has the meaning set forth in IC 9-19-10.5-0.8.**

SECTION 10. IC 9-13-2-123.5, AS AMENDED BY P.L.178-2019, SECTION 37, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 123.5. **(a)** "Permit" means the following:

(1) A permit issued by the state in physical form authorizing an individual to operate the type of vehicle for which the permit was issued on public streets, roads, or highways with certain restrictions. The term under this subdivision includes the following:

(A) A learner's permit.

(B) A motorcycle permit.

(C) A commercial learner's permit.

(2) A permit issued by the state in the form of a mobile credential authorizing an individual to operate the type of vehicle for which the permit was issued on public streets, roads, or highways with certain restrictions. The term under this subdivision includes a learner's permit and a motorcycle permit. The term under this subdivision does not include a commercial learner's permit.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 37 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 10. IC 9-13-2-175.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 175.5. "Supplemental restraint system", for purposes of IC 9-19-10.5, has the meaning set forth in IC 9-19-10.5-1.**".

Page 3, between lines 11 and 12, begin a new paragraph and insert:

"SECTION 12. IC 9-17-2-4, AS AMENDED BY P.L.27-2018, SECTION 2, IS AMENDED TO READ AS

FOLLOWS [EFFECTIVE JANUARY 1, 2021]: Sec. 4. (a) **Except as provided in subsection (b),** an application for a certificate of title for a vehicle for which a certificate of title has been issued previously must be accompanied by the previously issued certificate of title.

(b) An application for a certificate of title submitted only to remove a satisfied lien is not required to be accompanied by the previously issued certificate of title if the application is accompanied by a written instrument:

(1) on the lienholder's letterhead;

(2) identifying the vehicle identification number; and

(3) stating that the lien has been satisfied.

~~(b)~~ **(c)** An application for a certificate of title for a vehicle for which a certificate of title has not been issued previously must be accompanied by the following:

(1) If the vehicle is in Indiana, a manufacturer's certificate of origin as provided in IC 9-32-5-3.

(2) If the vehicle is brought into Indiana from another state, the following:

(A) A sworn bill of sale or dealer's invoice fully describing the vehicle.

(B) The most recent registration receipt issued for the vehicle.

(C) Any other information that the bureau requires to establish ownership.

~~(c)~~ **(d)** A certificate of title may be possessed either in printed form or electronic form.

SECTION 13. IC 9-17-2-12, AS AMENDED BY P.L.198-2016, SECTION 211, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2021]: Sec. 12. (a) This section does not apply to the following:

(1) A trailer or semitrailer.

(2) A new motor vehicle or recreational vehicle sold by a dealer licensed under IC 9-32.

(3) A vehicle transferred or assigned on a certificate of title issued by the bureau.

(4) A vehicle that is registered under the International Registration Plan.

(5) A vehicle that is titled in the name of a financial institution, lending institution, or insurance company in Canada and imported by a registered importer, if the registered importer provides:

(A) a copy of the registered importer's validation agreement issued by the United States customs and border protection;

(B) a copy of the entry summary issued by the United States customs and border protection (CBP form 7501); and

(C) a vehicle history report issued by an independent provider of vehicle history information that includes the vehicle's title information, odometer readings, and number of owners.

(6) A vehicle that is titled in another state and is in the lawful possession of a financial institution, a lending institution, an insurance company, a vehicle rental company, a vehicle leasing company, or a lessee of a vehicle leasing company if the financial institution, lending institution, insurance company, vehicle rental company, vehicle leasing company, or lessee of a vehicle leasing company:

(A) provides a vehicle history report issued by an independent provider of vehicle history information that includes the vehicle's:

(i) title information;

(ii) odometer readings; and

(iii) number of owners; and

(B) maintains a copy of all documentation required under this subsection for at least ten (10) years.

(7) A vehicle that is purchased in another state and titled in Indiana by a vehicle rental company or a vehicle leasing company if the vehicle rental company or vehicle leasing company:

(A) provides a vehicle history report issued by an independent provider of vehicle history information that includes the vehicle's:

(i) title information;

(ii) odometer readings; and

(iii) number of owners; and

(B) maintains a copy of all documentation required under this subsection for at least ten (10) years.

(b) Subject to subsection (d), an application for a certificate of title for a vehicle may not be accepted by the bureau unless the vehicle has been inspected by one (1) of the following:

(1) An employee of a dealer licensed under IC 9-32.

(2) A military police officer assigned to a military post in Indiana.

(3) A police officer.

(4) A designated employee of the bureau.

(5) An employee of a qualified person operating under a contract with the commission.

(6) An employee of a dealer that is:

(A) licensed as a motor vehicle dealer in a state other than Indiana; and

(B) approved by the bureau.

(c) A person described in subsection (b) inspecting a vehicle shall do the following:

(1) Make a record of inspection upon the application form prepared by the bureau.

(2) Verify the facts set out in the application.

(d) The bureau may accept an inspection performed by a police officer from a jurisdiction outside Indiana if the bureau determines that an inspection performed by an individual described in subsection (b) is unavailable or otherwise insufficient to complete an application for a certificate of title.

(e) A police officer who makes an inspection under this section may charge a fee, subject to the following:

(1) The fee must be established by ordinance adopted by the unit (as defined in IC 36-1-2-23) that employs the police officer.

(2) The fee may not exceed five dollars ($5).

(3) The revenue from the fee shall be deposited in the following manner:

(A) A special vehicle inspection fund if the police officer making the inspection is a member of the county sheriff's department. The fiscal body of the unit must appropriate the money from the inspection fund only for

law enforcement purposes.

(B) A local law enforcement continuing education fund established by IC 5-2-8-2 if the police officer making the inspection is a member of a city or town police department, a town marshal, or a town marshal deputy.

SECTION 14. IC 9-17-5-5, AS AMENDED BY P.L.27-2018, SECTION 13, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. (a) A security agreement covering a security interest in a vehicle that is not inventory held for sale ~~can be~~ **is** perfected ~~only if the bureau indicates the security interest on the certificate of title or duplicate.~~ **when:**

(1) the record of the lien is electronically received by the bureau, if the application for certificate of title is received electronically; or

(2) the application for certificate of title is submitted to the bureau, if the application for certificate of title is submitted in physical form.

Except as otherwise provided in subsection (b) and section 1 of this chapter, IC 26-1-9.1 applies to security interests in vehicles.

(b) The secured party, upon presentation to the bureau of a properly completed application for certificate of title together with the fee prescribed, may have a notation of the lien made on the certificate of title to be issued by the bureau. The bureau shall:

(1) enter the notation and the date of the notation; and

(2) note the lien and date of lien in the bureau's files.".

Page 5, between lines 3 and 4, begin a new paragraph and insert:

"SECTION 13. IC 9-19-10.5-0.2 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 0.2. As used in this chapter, "airbag" means a motor vehicle inflatable occupant restraint system component that is part of a supplemental restraint system.**

SECTION 14. IC 9-19-10.5-0.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 0.4. As used in this chapter, "counterfeit supplemental restraint system component" means:**

(1) a replacement airbag; or

(2) any other replacement supplemental restraint system component;

that displays a mark identical to, or substantially similar to, the genuine mark of a motor vehicle manufacturer or a supplier of parts to the manufacturer of a motor vehicle without authorization from that manufacturer or supplier, respectively.

SECTION 15. IC 9-19-10.5-0.8 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 0.8. As used in this chapter, "nonfunctional airbag" means a replacement airbag that is described by any of the following criteria:**

(1) The airbag was previously deployed or damaged.

(2) The airbag has a fault that is detected by the vehicle's diagnostic system when the installation procedure is completed.

(3) The airbag includes a part or an object, including a supplemental restraint system component, that is installed in a motor vehicle to mislead the owner or operator of the motor vehicle into believing that a functional airbag has been installed.

(4) The airbag is subject to the prohibitions of 49 U.S.C. 30120(j).

SECTION 16. IC 9-19-10.5-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. **(a)** As used in this chapter, ~~"inflatable~~ **"supplemental** restraint system" means ~~an air bag that is activated in a crash.~~ **a passive inflatable motor vehicle occupant crash protection system designed for use in conjunction with a seat belt assembly as defined in 49 CFR 571.209.**

(b) The term includes one (1) or more airbags and all components required to ensure that an airbag works as designed by the vehicle manufacturer including both of the following:

(1) Each airbag operates as necessary in the event of a crash.

(2) Each airbag is designed in accordance with federal motor vehicle safety standards for the specific make, model, and year of the motor vehicle in which it is or will be installed.

SECTION 17. IC 9-19-10.5-2, AS AMENDED BY P.L.217-2014, SECTION 38, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) A person may not knowingly or intentionally **manufacture, import,** install, **reinstall, distribute, sell, or offer for sale a component intended to replace a supplemental restraint system component** in a motor vehicle, ~~as part of the motor vehicle's inflatable restraint system, an object that does not~~ **if any of the following apply to the component:**

(1) The component is a counterfeit supplemental restraint system component.

(2) The component is a nonfunctional airbag.

(3) The component causes a motor vehicle to fail to comply with Federal Motor Vehicle Safety Standard Number 208 (49 CFR 571.208) for the **respective** make, model, and year of the motor vehicle **in question.**

(b) For purposes of this section, an installation or reinstallation is considered to not have occurred until the vehicle is returned to the customer who requested the work be performed or when ownership of the vehicle is intended to be transferred.

~~(b)~~ **(c)** A person who knowingly or intentionally violates this section commits a Class A misdemeanor. However, the offense is a Level 6 felony if a person in a motor vehicle is injured or dies as a result of the violation of subsection (a).

SECTION 18. IC 9-19-10.5-3, AS AMENDED BY P.L.217-2014, SECTION 39, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) A person may not knowingly or intentionally ~~(1)~~ sell, ~~(2)~~ lease, ~~(3)~~ trade, or ~~(4)~~ transfer a motor vehicle **to an Indiana resident** in which is installed, as part of the motor vehicle's ~~inflatable~~ **supplemental** restraint system, ~~an object that does not comply with Federal Motor Vehicle Safety Standard Number 208 (49 CFR 571.208) for the make, model, and year of the motor vehicle to an Indiana resident.~~ **any of the following:**

(1) A counterfeit supplemental restraint system

component.

(2) A nonfunctional airbag.

(3) A component that is not designed in accordance with federal motor vehicle safety standards for the specific make, model, and year of the motor vehicle in which it is installed.

(b) A person who knowingly or intentionally violates this section commits a Level 6 felony.

SECTION 16. IC 9-24-11-4, AS AMENDED BY P.L.178-2019, SECTION 48, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. (a) Except as provided in subsection (d), an individual may not hold or possess more than one (1) credential at a time.

(b) An individual may not hold or possess:

(1) a credential; and

(2) a driver's license or identification card issued by a government authority that issues driver's licenses and identification cards from another state, territory, federal district, commonwealth, or possession of the United States.

(c) An individual shall destroy or surrender to the bureau any and all credentials, driver's licenses, or identification cards that would cause the individual to violate subsection (a) or (b).

(d) An individual may hold both a credential in physical form and in the form of a mobile credential issued under this article at the same time.

(e) An individual who violates this section commits a Class C infraction.

(f) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 48 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 17. IC 9-24-11-5, AS AMENDED BY P.L.178-2019, SECTION 49, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. (a) Except as provided in subsection (d), a learner's permit or driver's license issued under this article must contain the following information:

(1) The full legal name of the permittee or licensee.

(2) The date of birth of the permittee or licensee.

(3) The address of the principal residence of the permittee or licensee.

(4) The hair color and eye color of the permittee or licensee.

(5) The date of issue and expiration date of the permit or license.

(6) The gender of the permittee or licensee.

(7) The unique identifying number of the permit or license.

(8) The weight of the permittee or licensee.

(9) The height of the permittee or licensee.

(10) A reproduction of the signature of the permittee or licensee.

(11) If the permittee or licensee is less than eighteen (18) years of age at the time of issuance, the dates, notated prominently, on which the permittee or licensee will become:

(A) eighteen (18) years of age; and

(B) twenty-one (21) years of age.

(12) If the permittee or licensee is at least eighteen (18) years of age but less than twenty-one (21) years of age at the time of issuance, the date, notated prominently, on which the permittee or licensee will become twenty-one (21) years of age.

(13) Except as provided in subsection (b), a digital photograph of the permittee or licensee.

(b) The bureau may provide for the omission of a photograph or computerized image from any driver's license or learner's permit if there is good cause for the omission. However, a driver's license or learner's permit issued without a digital photograph must include a statement that indicates that the driver's license or learner's permit may not be accepted by a federal agency for federal identification or any other federal purpose.

(c) A driver's license or learner's permit issued to an individual who:

(1) has a valid, unexpired nonimmigrant visa or has nonimmigrant visa status for entry in the United States;

(2) has a pending application for asylum in the United States;

(3) has a pending or approved application for temporary protected status in the United States;

(4) has approved deferred action status; or

(5) has a pending application for adjustment of status to that of an alien lawfully admitted for permanent residence in the United States or conditional permanent residence status in the United States;

must be clearly identified as a temporary driver's license or learner's permit. A temporary driver's license or learner's permit issued under this subsection may not be renewed without the presentation of valid documentary evidence proving that the licensee's or permittee's temporary status has been extended.

(d) For purposes of subsection (a), an individual certified as a program participant in the address confidentiality program under IC 5-26.5 is not required to provide the address of the individual's principal residence, but may provide an address designated by the office of the attorney general under IC 5-26.5 as the address of the individual's principal residence.

(e) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 49 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 18. IC 9-24-11-5.5, AS AMENDED BY P.L.178-2019, SECTION 50, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5.5. (a) If an individual has:

(1) indicated on the application for a driver's license or learner's permit that the individual is a veteran and wishes to have an indication of the individual's veteran status appear on the driver's license or learner's permit; and

(2) provided proof at the time of application of the individual's veteran status;

an indication of the individual's veteran status shall be shown on the driver's license or learner's permit.

(b) If an individual has:

(1) indicated on the individual's application for a driver's license or learner's permit that the applicant:

(A) is a surviving spouse of a veteran; and

(B) wishes to have an indication of the applicant's status as a surviving spouse of a veteran appear on the driver's license or learner's permit; and

(2) provided the documentation necessary to verify that the applicant was married, at the time of the decedent's death, to a veteran;

an indication of the individual's status as a surviving spouse of a veteran shall be shown on the driver's license or learner's permit.

(c) If an individual submits information concerning the individual's medical condition in conjunction with the individual's application for a driver's license or learner's permit, the bureau shall place an identifying symbol in a prominent location on a driver's license or learner's permit to indicate that the individual has a medical condition of note. The bureau shall include information on the individual's driver's license or learner's permit that briefly describes the individual's medical condition. The information must be notated in a manner that alerts an individual reading the driver's license or learner's permit to the existence of the medical condition. The individual submitting the information concerning the medical condition is responsible for its accuracy.

(d) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 50 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 19. IC 9-24-11-8, AS AMENDED BY P.L.178-2019, SECTION 51, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 8. (a) Except as provided in subsections (b) and (c), an individual who violates this chapter commits a Class C infraction.

(b) An individual who:

(1) has been issued a permit or driver's license on which there is a notated restriction as provided under section 7 of this chapter; and

(2) operates a motor vehicle in violation of the restriction;

commits a Class C infraction.

(c) An individual who causes serious bodily injury to or the death of another individual when operating a motor vehicle after knowingly or intentionally failing to take prescribed medication, the taking of which was a condition of the issuance of the restricted driver's license under section 7 of this chapter, commits a Class A misdemeanor. However, the offense is a Level 6 felony if, within the five (5) years preceding the commission of the offense, the individual had a prior unrelated conviction under this subsection.

(d) An individual who violates subsection (c) commits a separate offense for each individual whose serious bodily injury or death is caused by the violation of subsection (c).

(e) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 51 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 20. IC 9-24-13-3, AS AMENDED BY P.L.178-2019, SECTION 53, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) An individual holding a permit or driver's license issued under this article must have the permit or driver's license in the individual's immediate possession when driving or operating a motor vehicle. The individual shall display the driver's license or permit upon demand of a court or a police officer authorized by law to enforce motor vehicle rules.

(b) If the permit or driver's license is a mobile credential viewed on a telecommunications device, a court or a police officer authorized by law to enforce motor vehicle rules may not, without the consent of the person:

(1) confiscate a telecommunications device for the purpose of determining compliance with this section;

(2) confiscate a telecommunications device and retain it as evidence pending trial for a violation of this section; or

(3) extract or otherwise download information from a telecommunications device for a violation of this section unless:

(A) the court or police officer has probable cause to believe the telecommunications device has been used in the commission of a crime;

(B) the information is extracted or otherwise downloaded under a valid search warrant; or

(C) otherwise authorized by law.

(c) The display of a mobile credential shall not serve as consent or authorization for the court, a police officer, or any other person to search, view, or access any data or application on the telecommunications device other than the mobile credential. If a person presents the person's telecommunications device to the court, a police officer, or any other person for the purposes of displaying the person's mobile credential, the court, police officer, or person viewing the mobile credential shall not handle the telecommunications device in order to view the mobile credential and to verify the identity of the person.

(d) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 53 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 21. IC 9-24-16-3, AS AMENDED BY P.L.211-2019, SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) An identification card:

(1) in physical form must have the same dimensions and shape as a driver's license; and

(2) in the form of a mobile credential must have the same format as a driver's license;

but the card must have markings sufficient to distinguish the card from a driver's license.

(b) Except as provided in subsection (g), the front side of a physical identification card or the top portion of an identification card in the format of a mobile credential must contain the expiration date of the identification card and the following information about the individual to whom the card is being issued:

(1) Full legal name.

(2) The address of the principal residence.

(3) Date of birth.

(4) Date of issue and date of expiration.

(5) Unique identification number.

(6) Gender.

(7) Weight.

(9) Color of eyes and hair.

(10) Reproduction of the signature of the individual identified.

(11) Whether the individual is blind (as defined in IC 12-7-2-21(1)).

(12) If the individual is less than eighteen (18) years of age at the time of issuance, the dates on which the individual

will become:

(A) eighteen (18) years of age; and

(B) twenty-one (21) years of age.

(13) If the individual is at least eighteen (18) years of age but less than twenty-one (21) years of age at the time of issuance, the date on which the individual will become twenty-one (21) years of age.

(14) Digital photograph of the individual.

(c) The information contained on the identification card as required by subsection (b)(12) or (b)(13) for an individual who is less than twenty-one (21) years of age at the time of issuance shall be notated prominently on the identification card.

(d) If the individual complies with section 2(f) or 2(g) of this chapter, an indication of the individual's veteran status or status as the surviving spouse of a veteran of the armed forces of the United States, as applicable, shall be shown on the identification card.

(e) If the applicant for an identification card submits information to the bureau concerning the applicant's medical condition, the bureau shall place an identifying symbol on the face of the identification card to indicate that the applicant has a medical condition of note. The bureau shall include information on the identification card that briefly describes the medical condition of the holder of the card. The information must be printed in a manner that alerts a person reading the card to the existence of the medical condition. The applicant for an identification card is responsible for the accuracy of the information concerning the medical condition submitted under this subsection. The bureau shall inform an applicant that submission of information under this subsection is voluntary.

(f) An identification card issued by the state to an individual who:

(1) has a valid, unexpired nonimmigrant visa or has nonimmigrant visa status for entry in the United States;

(2) has a pending application for asylum in the United States;

(3) has a pending or approved application for temporary protected status in the United States;

(4) has approved deferred action status; or

(5) has a pending application for adjustment of status to that of an alien lawfully admitted for permanent residence in the United States or conditional permanent residence status in the United States;

must be clearly identified as a temporary identification card. A temporary identification card issued under this subsection may not be renewed without the presentation of valid documentary evidence proving that the holder of the identification card's temporary status has been extended.

(g) For purposes of subsection (b), an individual certified as a program participant in the address confidentiality program under IC 5-26.5 is not required to provide the address of the individual's principal residence, but may provide an address designated by the office of the attorney general under IC 5-26.5 as the address of the individual's principal residence.

(h) The bureau shall validate an identification card for Class B motor driven cycle operation upon a highway by endorsement to an individual who:

(1) applies for or has previously been issued an identification card under this chapter;

(2) makes the appropriate application for endorsement; and

(3) satisfactorily completes the test required under section 3.6 of this chapter.

The bureau shall place a designation on the face of the identification card to indicate that the individual has received a Class B motor driven cycle endorsement.

(i) Notwithstanding the July 1, 2021, effective date in SEA 80-2019, SECTION 9 (P.L.211-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 22. IC 9-24-17.5-1, AS ADDED BY P.L.178-2019, SECTION 55, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 1. **(a)** The bureau may develop a secure and uniform system to issue mobile credentials that can be accessed through an application on a telecommunications device.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 55 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 23. IC 9-24-17.5-2, AS ADDED BY P.L.178-2019, SECTION 55, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 2. (a) In addition to a physical credential issued under this article, upon request by an applicant, the bureau may issue a mobile credential to an individual who satisfies the requirements for application under this article for the following:

(1) A driver's license.

(2) A learner's permit.

(3) An identification card.

(b) The bureau shall not issue a mobile credential for:

(1) a commercial driver's license issued under IC 9-24-6.1;

(2) a commercial learner's permit issued under IC 9-24-6.1; or

(3) a photo exempt identification card issued under IC 9-24-16.5.

(c) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 55 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 24. IC 9-24-17.5-3, AS ADDED BY P.L.178-2019, SECTION 55, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. **(a)** The bureau may adopt rules under IC 4-22-2 to administer this chapter, including rules to impose a fee to issue a mobile credential as set forth in IC 9-14-8-3(4).

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 55 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).

SECTION 25. IC 9-24-17.5-4, AS ADDED BY P.L.178-2019, SECTION 55, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 4. **(a)** The bureau may contract with a third party to carry out this chapter.

(b) Notwithstanding the July 1, 2021, effective date in HEA 1506-2019, SECTION 55 (P.L.178-2019), this section takes effect July 1, 2020 (rather than July 1, 2021).".

Page 31, delete lines 23 through 40, begin a new paragraph and insert:

"**(b) The secretary must notify a dealer of a request for**

access to the dealer's place of business under subsection (a) at least three (3) days before access is needed. However, if the secretary is conducting an investigation under section 14 of this chapter, members of the staff of the division, at any time and without prior notice, may request access to the dealer's place of business under subsection (a).

(c) The following apply to records of a dealer licensed under this article:

(1) The records are subject to such reasonable periodic, special, or other audits or inspections by a representative of the secretary, outside or within Indiana, as the secretary considers necessary or appropriate in the public interest and for the protection of investors.

(2) The secretary may audit or inspect electronic records at any time and without prior notice.

(3) The secretary must notify a dealer of an audit or inspection of the dealer's paper records at least three (3) days before the audit or inspection. However, if the secretary is conducting an investigation under section 14 of this chapter, a representative of the secretary may audit or inspect the dealer's paper records at any time and without prior notice.

(4) A representative of the secretary may copy and remove copies of the records the secretary reasonably considers necessary or appropriate to conduct an audit or inspection.

(5) A representative of the secretary may request electronic copies of records the secretary reasonably considers necessary or appropriate to conduct an audit or inspection.

(6) A:

(A) representative of the secretary may make a request for records under this subsection electronically, by mail, or in person at the established place of business of the dealer during reasonable business hours; and

(B) dealer shall produce such records in the manner requested by the representative of the secretary, including in person, electronically, or by mail.".

Page 34, after line 20, begin a new paragraph and insert:

"SECTION 49. [EFFECTIVE UPON PASSAGE] **Notwithstanding the effective date in HEA 1482-2019 (P.L. 284-2019), the effective date of the following SECTIONS of that act is July 1, 2021, and not July 1, 2020:**

(1) SECTION 22 for IC 9-32-9-16.

(2) SECTION 24 for IC 9-32-9-20.

(3) SECTION 26 for IC 9-32-9-29.

SECTION 67. [EFFECTIVE UPON PASSAGE] **(a) Notwithstanding the July 1, 2021, effective date of the following sections added by P.L.178-2019, the effective date for these sections is July 1, 2020, and not July 1, 2021:**

(1) IC 9-13-2-103.4, as added by P.L.178-2019, SECTION 36.

(2) IC 9-24-17.5-1, as added by P.L.178-2019, SECTION 55.

(3) IC 9-24-17.5-2, as added by P.L.178-2019, SECTION 55.

(4) IC 9-24-17.5-3, as added by P.L.178-2019, SECTION 55.

(5) IC 9-24-17.5-4, as added by P.L.178-2019, SECTION 55.

(b) Notwithstanding the July 1, 2021, effective date of the following sections amended by P.L.178-2019, the effective date for these sections is July 1, 2020, and not July 1, 2021:

(1) IC 9-13-2-39.7, as amended by P.L.178-2019, SECTION 32.

(2) IC 9-13-2-48, as amended by P.L.178-2019, SECTION 33.

(3) IC 9-13-2-74.5, as amended by P.L.178-2019, SECTION 34.

(4) IC 9-13-2-123.5, as amended by P.L.178-2019, SECTION 37.

(5) IC 9-24-11-4, as amended by P.L.178-2019, SECTION 48.

(6) IC 9-24-11-5, as amended by P.L.178-2019, SECTION 49.

(7) IC 9-24-11-5.5, as amended by P.L.178-2019, SECTION 50.

(8) IC 9-24-11-8, as amended by P.L.178-2019, SECTION 51.

(9) IC 9-24-13-3, as amended by P.L.178-2019, SECTION 53.

(c) Notwithstanding the July 1, 2021, effective date of IC 9-24-16-3 as amended by P.L.211-2019, SECTION 9, the effective date of IC 9-24-16-3 as amended by P.L.211-2019, SECTION 9, is July 1, 2020, and not July 1, 2021.

(d) Notwithstanding the effective dates of the amendments of IC 9-24-16-3 by P.L.82-2019, SECTION 3, P.L.178-2019, SECTION 54, and P.L.211-2019, SECTION 9, the revisor of statutes shall publish IC 9-24-16-3 in the Indiana Code as amended by P.L.82-2019, SECTION 3, P.L.178-2019, SECTION 54, and P.L.211-2019, SECTION 9, effective July 1, 2020.

SECTION 68. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1246 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 7, Nays 0.

CRIDER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred Engrossed House Bill 1283, 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 1, line 4, delete "that prepares teacher candidates to" and insert "**that:**

(1) prepares teacher candidates to use evidence based trauma informed classroom instruction and recognition of social, emotional, and behavioral reactions to trauma that may interfere with a student's academic

functioning; and

(2) provides information on applicable Indiana laws regarding other instructional requirements and applicable Indiana laws relating to the instruction and recognition described in subdivision (1), including the following:

(A) IC 20-30-5-5.

(B) IC 20-30-5-6.

(C) IC 20-30-5-13.

(D) IC 20-30-5-17.

(E) IC 20-34-3-21.

(F) IC 20-34-9.".

Page 1, delete lines 5 through 7.

Page 1, line 8, delete "should" and insert "**shall**".

(Reference is to HB 1283 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

RAATZ, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred Engrossed House Bill 1305, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

RAATZ, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Judiciary, to which was referred Engrossed House Bill 1313, 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 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 31-17-2.2-1, AS AMENDED BY P.L.186-2019, SECTION 11, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. (a) Except as provided in subsection (b), a relocating individual must file a notice of the intent to move with the clerk of the court that:

(1) issued the custody order or parenting time order; or

(2) if subdivision (1) does not apply, has jurisdiction over the legal proceedings concerning the custody of or parenting time with a child.

(b) A relocating individual is not required to file a notice of intent to move with the clerk of the court if:

(1) the relocation has been addressed by a prior court order, including a court order relieving the relocating individual of the requirement to file a notice; ~~and~~

or

(2) the relocation will:

(A) result in a decrease in the distance between the relocating individual's residence and the nonrelocating individual's residence; or

(B) result in an increase of not more than twenty (20) miles in the distance between the relocating individual's residence and the nonrelocating individual's residence;

and allow the child to remain enrolled in the child's current school.

(c) Upon motion of a party, the court shall set the matter for a hearing to allow or restrain the relocation of a child and to review and modify, if appropriate, a custody order, parenting time order, grandparent visitation order, or child support order. The court's authority to modify a custody order, parenting time order, grandparent visitation order, or child support order is not affected by the fact that a relocating individual is exempt from the requirement to file a notice of relocation by subsection (b). The court shall take into account the following in determining whether to modify a custody order, parenting time order, grandparent visitation order, or child support order:

(1) The distance involved in the proposed change of residence.

(2) The hardship and expense involved for the nonrelocating individual to exercise parenting time or grandparent visitation.

(3) The feasibility of preserving the relationship between the nonrelocating individual and the child through suitable parenting time and grandparent visitation arrangements, including consideration of the financial circumstances of the parties.

(4) Whether there is an established pattern of conduct by the relocating individual, including actions by the relocating individual to either promote or thwart a nonrelocating individual's contact with the child.

(5) The reasons provided by the:

(A) relocating individual for seeking relocation; and

(B) nonrelocating parent for opposing the relocation of the child.

(6) Other factors affecting the best interest of the child.

(d) A court may order the relocating individual and the nonrelocating individual to participate in mediation or another alternative dispute resolution process before a hearing under this section:

(1) on its own motion; or

(2) upon the motion of any party.

(e) If a relocation occurs, all existing orders for custody, parenting time, grandparent visitation, and child support remain in effect until modified by the court.

(f) The court may award reasonable attorney's fees for a motion filed under this section in accordance with IC 31-15-10 and IC 34-52-1-1(b).".

Page 9, after line 28, begin a new paragraph and insert:

"SECTION 12. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1313 as printed January 24, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

KOCH, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Engrossed House Bill 1326, 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 1, line 3, after "(a)" insert "**As used in this section, "intensive outpatient treatment program" means an organized treatment program that uses behavioral health professionals and clinicians in a group setting to provide multiple treatment service components for rehabilitation of alcohol and other substance use or dependency. The term includes:**

(1) individual and family therapy;

(2) group therapy;

(3) skills training;

(4) medication training and support;

(5) peer recovery services;

(6) care coordination;

(7) counseling; and

(8) other services, as determined by the division.

(b)".

Page 1, line 5, after "who" insert "**either**".

Page 1, line 5, after "experience" insert "**in addiction treatment or hold an addiction credential, as determined by the division,**".

Page 1, line 11, delete "(b)" and insert "**(c)**".

Page 1, line 14, delete "must" and insert "**must, under the supervision of a clinician described in subsection (b), either:**

(1) hold an addiction credential, as determined by the division; or

(2)".

Page 1, line 15, delete "treatment." and insert "**treatment, as determined by the division.**".

Page 2, line 15, after "The" insert "**direct service provider shall complete**".

Page 2, line 15, delete "shall be".

Page 2, line 16, delete "completed".

Page 2, line 28, delete "signature." and insert "**the signature of the supervising provider.**".

Page 2, between lines 28 and 29, begin a new paragraph and insert:

"**(e) In developing a plan of treatment, the following must be completed to demonstrate active treatment with a client:**

(1) A signed client consent form.

(2) The completion of a list of requirements concerning audit compliance, as determined by the division in collaboration with community mental health centers, that verifies active treatment of the client's plan of treatment.

(3) Either:

(A) the signature of the client on the client's plan of treatment; or

(B) if the direct care provider, after a good faith effort, is unable to obtain the client's signature on the client's plan of treatment:

(i) the provision of documentation by the provider of the reasons the provider was unable to obtain the signature;

(ii) the continuation of attempting to obtain the client's signature on the client's plan of treatment; and

(iii) a determination by the division, based on the documentation in item (i), that the direct care provider has made a good faith effort to obtain the signature.".

Page 4, delete lines 41 through 42, begin a new paragraph and insert:

"SECTION 5. IC 12-21-5-7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 7. (a) The division may grant a waiver of any staffing requirements to a community mental health center applicant that is unable to meet any staffing ratio requirements the division has for community mental health centers.**

(b) A licensed clinical addiction counselor shall be counted by the division in determining whether a community mental health center applicant meets the direct care full-time equivalent staffing requirements for community mental health center certification.".

Page 5, delete lines 1 through 21.

Page 5, delete lines 35 through 42, begin a new paragraph and insert:

"SECTION 7. IC 12-29-2-1.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 1.5. For purposes of the required nonfederal share of medical assistance payments under Title XIX of the federal Social Security Act (42 U.S.C. 1396 et seq.), a community mental health center is a governmental unit.**".

Delete pages 6 through 7.

Page 8, delete lines 1 through 11.

Page 8, delete lines 35 through 42, begin a new paragraph and insert:

"**(d) This subsection applies for purposes of the Medicaid program to an advanced practice registered nurse who:**

(1) is operating under a collaborative agreement with a physician licensed under IC 25-22.5;

(2) is either certified as:

(A) a psychiatric nurse practitioner; or

(B) a clinical nurse specialist with a psychiatric specialty; and

(3) has, as part of the advanced practice registered nurse's scope of practice and collaborative agreement, supervisory rights and responsibilities described in this subsection.

An advanced practice registered nurse who meets the requirements of this subsection has all of the supervisory rights and responsibilities, including prior authorization, that are available to a licensed physician or a health service provider in psychology (HSPP) operating in a community mental center certified under IC 12-21-2-3(5)(C).

(e) Before January 1, 2021, the office of the secretary shall apply to the United States Department of Health and Human Services for any state plan amendment necessary to

implement subsection (d).".

Delete page 9.

Renumber all SECTIONS consecutively.

(Reference is to HB 1326 as printed January 27, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

CHARBONNEAU, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Pensions and Labor, to which was referred Engrossed House Bill 1332, 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, line 35, after "facility," insert "**an amount not to exceed**".

Page 3, line 41, delete "two hundred twenty-five percent (225%)" and insert "**two hundred seventy-five percent (275%)**".

Page 4, between lines 32 and 33, begin a new paragraph and insert:

"SECTION 3. IC 22-3-3-10, AS AMENDED BY P.L.275-2013, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 10. (a) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not to exceed fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars ($125) average weekly wages, for the period stated for the injury.

(b) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the injury.

(c) With respect to injuries in the schedule set forth in subsection (d) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183) average weekly wages, for the period stated for the injury.

(d) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the injury.

(1) Amputation: For the loss by separation of the thumb, sixty (60) weeks, of the index finger forty (40) weeks, of the second finger thirty-five (35) weeks, of the third or ring finger thirty (30) weeks, of the fourth or little finger twenty (20) weeks, of the hand by separation below the elbow joint two hundred (200) weeks, or the arm above the elbow two hundred fifty (250) weeks, of the big toe sixty (60) weeks, of the second toe thirty (30) weeks, of the third toe twenty (20) weeks, of the fourth toe fifteen (15) weeks, of the fifth or little toe ten (10) weeks, for loss occurring on and after April 1, 1959, by separation of the foot below the knee joint, one hundred seventy-five (175) weeks and of the leg above the knee joint two hundred twenty-five (225) weeks. The loss of more than one (1) phalange of a thumb or toes shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) the period for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger, shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the period for the loss of the entire finger.

(2) For the loss by separation of both hands or both feet or the total sight of both eyes, or any two (2) such losses in the same accident, five hundred (500) weeks.

(3) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, one hundred seventy-five (175) weeks.

(4) For the permanent and complete loss of hearing in one (1) ear, seventy-five (75) weeks, and in both ears, two hundred (200) weeks.

(5) For the loss of one (1) testicle, fifty (50) weeks; for the loss of both testicles, one hundred fifty (150) weeks.

(e) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1979, and before July 1, 1988, the employee shall receive, in addition to temporary total disability benefits not exceeding fifty-two (52) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages not to exceed one hundred twenty-five dollars ($125) average weekly wages for the period stated for the injury.

(f) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1988, and before July 1, 1989, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the injury.

(g) With respect to injuries in the schedule set forth in subsection (h) occurring on and after July 1, 1989, and before July 1, 1990, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183) average weekly wages, for the period stated for the injury.

(h) With respect to injuries in the following schedule occurring on and after July 1, 1990, and before July 1, 1991, the employee shall receive, in addition to temporary total disability benefits not exceeding seventy-eight (78) weeks on account of the injury, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the injury.

(1) Loss of use: The total permanent loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid for the same period as for the loss thereof by separation.

(2) Partial loss of use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange, compensation shall be paid for the proportionate loss of the use of such arm, hand, thumb, finger, leg, foot, toe, or phalange.

(3) For injuries resulting in total permanent disability, five hundred (500) weeks.

(4) For any permanent reduction of the sight of an eye less than a total loss as specified in subsection (d)(3), compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then in such event compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses, plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).

(5) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection (d)(4), compensation shall be paid for a period proportional to the degree of such permanent reduction.

(6) In all other cases of permanent partial impairment, compensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation board, not exceeding five hundred (500) weeks.

(7) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(i) With respect to injuries in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the injury, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52) weeks immediately preceding the week in which the injury occurred.

(1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; by separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.

(2) Amputations: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, and for the loss by separation of any of the body parts described in subdivision (3), (5), or (8), on or after July 1, 1999, the dollar values per degree applying on the date of the injury as described in subsection (j) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by separation.

(3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.

(4) For the loss by separation of both hands or both feet or the total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent

impairment.

(5) For the permanent and complete loss of vision by enucleation, thirty-five (35) degrees of permanent impairment.

(6) For the reduction of vision to one-tenth (1/10) of normal vision with glasses, thirty-five (35) degrees of permanent impairment.

(7) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.

(8) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.

(9) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.

(10) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange.

(11) For injuries resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.

(12) For any permanent reduction of the sight of an eye less than a total loss as specified in subsection (h)(4), the compensation shall be paid in an amount proportionate to the degree of a permanent reduction without correction or glasses. However, when a permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, then compensation shall be paid for fifty percent (50%) of the total loss of vision without glasses, plus an additional amount equal to the proportionate amount of the reduction with glasses, not to exceed an additional fifty percent (50%).

(13) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subsection (h)(5), compensation shall be paid in an amount proportionate to the degree of a permanent reduction.

(14) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.

(15) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(j) Compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the injury determined under subsection (i) and the following:

(1) With respect to injuries occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars ($500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars ($900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars ($1,500) per degree.

(2) With respect to injuries occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars ($500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars ($800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(3) With respect to injuries occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars ($500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars ($700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(4) With respect to injuries occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(5) With respect to injuries occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(6) With respect to injuries occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine

hundred dollars ($900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars ($2,000) per degree.

(7) With respect to injuries occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars ($2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars ($2,500) per degree.

(8) With respect to injuries occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars ($1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars ($2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars ($3,000) per degree.

(9) With respect to injuries occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred forty dollars ($1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars ($1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars ($2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars ($3,150) per degree.

(10) With respect to injuries occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars ($1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars ($1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars ($2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars ($3,200) per degree.

(11) With respect to injuries occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars ($1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred eighty-five dollars ($1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars ($2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars ($3,300) per degree.

(12) With respect to injuries occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars ($2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars ($3,500) per degree.

(13) With respect to injuries occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent impairment from one (1) to ten (10), one thousand five hundred seventeen dollars ($1,517) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars ($1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars ($2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars ($3,687) per degree.

(14) With respect to injuries occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars ($1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars ($1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars ($3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars ($3,873) per degree.

(15) With respect to injuries occurring on and after July 1, 2016, **and before July 1, 2020,** for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars ($1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars ($1,952) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars ($3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars ($4,060) per degree.

(16) With respect to injuries occurring on and after July 1, 2020, and before July 1, 2021, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred eighty-five dollars ($1,785) per degree; for each degree of permanent impairment from

eleven (11) to thirty-five (35), one thousand nine hundred ninety-one dollars ($1,991) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand two hundred fifty dollars ($3,250) per degree; for each degree of permanent impairment above fifty (50), four thousand one hundred forty-one dollars ($4,141) per degree.

(17) With respect to injuries occurring on and after July 1, 2021, and before July 1, 2022, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred twenty-one dollars ($1,821) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand thirty-one dollars ($2,031) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred fifteen dollars ($3,315) per degree; for each degree of permanent impairment above fifty (50), four thousand two hundred twenty-four dollars ($4,224) per degree.

(18) With respect to injuries occurring on and after July 1, 2022, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred fifty-seven dollars ($1,857) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand seventy-two dollars ($2,072) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred eighty-one dollars ($3,381) per degree; for each degree of permanent impairment above fifty (50), four thousand three hundred eight dollars ($4,308) per degree.

(k) The average weekly wages used in the determination of compensation for permanent partial impairment under subsections (i) and (j) shall not exceed the following:

(1) With respect to injuries occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars ($492).

(2) With respect to injuries occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars ($540).

(3) With respect to injuries occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars ($591).

(4) With respect to injuries occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars ($642).

(5) With respect to injuries occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars ($672).

(6) With respect to injuries occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars ($702).

(7) With respect to injuries occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars ($732).

(8) With respect to injuries occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars ($762).

(9) With respect to injuries occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars ($822).

(10) With respect to injuries occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars ($882).

(11) With respect to injuries occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars ($900).

(12) With respect to injuries occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars ($930).

(13) With respect to injuries occurring on or after July 1, 2008, and before July 1, 2009, nine hundred fifty-four dollars ($954).

(14) With respect to injuries occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars ($975).

(15) With respect to injuries occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars ($1,040).

(16) With respect to injuries occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars ($1,105).

(17) With respect to injuries occurring on or after July 1, 2016, **and before July 1, 2020,** one thousand one hundred seventy dollars ($1,170).

(18) With respect to injuries occurring on or after July 1, 2020, and before July 1, 2021, one thousand one hundred ninety-three dollars ($1,193).

(19) With respect to injuries occurring on or after July 1, 2021, and before July 1, 2022, one thousand two hundred seventeen dollars ($1,217).

(20) With respect to injuries occurring on or after July 1, 2022, one thousand two hundred forty-one dollars ($1,241).

SECTION 4. IC 22-3-3-22, AS AMENDED BY P.L.275-2013, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 22. (a) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1985, and before July 1, 1986, the average weekly wages are considered to be:

(1) not more than two hundred sixty-seven dollars ($267); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(b) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1986, and before July 1, 1988, the average weekly wages are considered to be:

(1) not more than two hundred eighty-five dollars ($285); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(c) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with

respect to injuries occurring on and after July 1, 1988, and before July 1, 1989, the average weekly wages are considered to be:

(1) not more than three hundred eighty-four dollars ($384); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(d) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1989, and before July 1, 1990, the average weekly wages are considered to be:

(1) not more than four hundred eleven dollars ($411); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(e) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1990, and before July 1, 1991, the average weekly wages are considered to be:

(1) not more than four hundred forty-one dollars ($441); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(f) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1991, and before July 1, 1992, the average weekly wages are considered to be:

(1) not more than four hundred ninety-two dollars ($492); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(g) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1992, and before July 1, 1993, the average weekly wages are considered to be:

(1) not more than five hundred forty dollars ($540); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(h) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1993, and before July 1, 1994, the average weekly wages are considered to be:

(1) not more than five hundred ninety-one dollars ($591); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(i) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to injuries occurring on and after July 1, 1994, and before July 1, 1997, the average weekly wages are considered to be:

(1) not more than six hundred forty-two dollars ($642); and

(2) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(j) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, the average weekly wages are considered to be:

(1) with respect to injuries occurring on and after July 1, 1997, and before July 1, 1998:

(A) not more than six hundred seventy-two dollars ($672); and

(B) not less than seventy-five dollars ($75);

(2) with respect to injuries occurring on and after July 1, 1998, and before July 1, 1999:

(A) not more than seven hundred two dollars ($702); and

(B) not less than seventy-five dollars ($75);

(3) with respect to injuries occurring on and after July 1, 1999, and before July 1, 2000:

(A) not more than seven hundred thirty-two dollars ($732); and

(B) not less than seventy-five dollars ($75);

(4) with respect to injuries occurring on and after July 1, 2000, and before July 1, 2001:

(A) not more than seven hundred sixty-two dollars ($762); and

(B) not less than seventy-five dollars ($75);

(5) with respect to injuries occurring on and after July 1, 2001, and before July 1, 2002:

(A) not more than eight hundred twenty-two dollars ($822); and

(B) not less than seventy-five dollars ($75);

(6) with respect to injuries occurring on and after July 1, 2002, and before July 1, 2006:

(A) not more than eight hundred eighty-two dollars ($882); and

(B) not less than seventy-five dollars ($75);

(7) with respect to injuries occurring on and after July 1, 2006, and before July 1, 2007:

(A) not more than nine hundred dollars ($900); and

(B) not less than seventy-five dollars ($75);

(8) with respect to injuries occurring on and after July 1, 2007, and before July 1, 2008:

(A) not more than nine hundred thirty dollars ($930); and

(B) not less than seventy-five dollars ($75);

(9) with respect to injuries occurring on and after July 1, 2008, and before July 1, 2009:

(A) not more than nine hundred fifty-four dollars ($954); and

(B) not less than seventy-five dollars ($75);

(10) with respect to injuries occurring on and after July 1, 2009, and before July 1, 2014:

(A) not more than nine hundred seventy-five dollars ($975); and

(B) not less than seventy-five dollars ($75);

(11) with respect to injuries occurring on and after July 1, 2014, and before July 1, 2015:

(A) not more than one thousand forty dollars ($1,040); and

(B) not less than seventy-five dollars ($75);

(12) with respect to injuries occurring on and after July 1, 2015, and before July 1, 2016:

(A) not more than one thousand one hundred five dollars ($1,105); and

(B) not less than seventy-five dollars ($75); ~~and~~

(13) with respect to injuries occurring on and after July 1, 2016, **and before July 1, 2020:**

(A) not more than one thousand one hundred seventy dollars ($1,170); and

(B) not less than seventy-five dollars ($75);

(14) with respect to injuries occurring on and after July 1, 2020, and before July 1, 2021:

(A) not more than one thousand one hundred ninety-three dollars ($1, 193); and

(B) not less than seventy-five dollars ($75);

(15) with respect to injuries occurring on and after July 1, 2021, and before July 1, 2022:

(A) not more than one thousand two hundred seventeen dollars ($1,217); and

(B) not less than seventy-five dollars ($75); and

(16) with respect to injuries occurring on and after July 1, 2022:

(A) not more than one thousand two hundred forty-one dollars ($1,241); and

(B) not less than seventy-five dollars ($75).

However, the weekly compensation payable shall not exceed the average weekly wages of the employee at the time of the injury.

(k) With respect to any injury occurring on and after July 1, 1985, and before July 1, 1986, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed eighty-nine thousand dollars ($89,000) in any case.

(l) With respect to any injury occurring on and after July 1, 1986, and before July 1, 1988, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed ninety-five thousand dollars ($95,000) in any case.

(m) With respect to any injury occurring on and after July 1, 1988, and before July 1, 1989, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred twenty-eight thousand dollars ($128,000) in any case.

(n) With respect to any injury occurring on and after July 1, 1989, and before July 1, 1990, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred thirty-seven thousand dollars ($137,000) in any case.

(o) With respect to any injury occurring on and after July 1, 1990, and before July 1, 1991, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred forty-seven thousand dollars ($147,000) in any case.

(p) With respect to any injury occurring on and after July 1, 1991, and before July 1, 1992, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred sixty-four thousand dollars ($164,000) in any case.

(q) With respect to any injury occurring on and after July 1, 1992, and before July 1, 1993, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred eighty thousand dollars ($180,000) in any case.

(r) With respect to any injury occurring on and after July 1, 1993, and before July 1, 1994, the maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provisions of this law or any combination of provisions may not exceed one hundred ninety-seven thousand dollars ($197,000) in any case.

(s) With respect to any injury occurring on and after July 1, 1994, and before July 1, 1997, the maximum compensation, exclusive of medical benefits, which may be paid for an injury under any provisions of this law or any combination of provisions may not exceed two hundred fourteen thousand dollars ($214,000) in any case.

(t) The maximum compensation, exclusive of medical benefits, that may be paid for an injury under any provision of this law or any combination of provisions may not exceed the following amounts in any case:

(1) With respect to an injury occurring on and after July 1, 1997, and before July 1, 1998, two hundred twenty-four thousand dollars ($224,000).

(2) With respect to an injury occurring on and after July 1, 1998, and before July 1, 1999, two hundred thirty-four thousand dollars ($234,000).

(3) With respect to an injury occurring on and after July 1, 1999, and before July 1, 2000, two hundred forty-four thousand dollars ($244,000).

(4) With respect to an injury occurring on and after July 1, 2000, and before July 1, 2001, two hundred fifty-four thousand dollars ($254,000).

(5) With respect to an injury occurring on and after July 1, 2001, and before July 1, 2002, two hundred seventy-four thousand dollars ($274,000).

(6) With respect to an injury occurring on and after July 1, 2002, and before July 1, 2006, two hundred ninety-four thousand dollars ($294,000).

(7) With respect to an injury occurring on and after July 1, 2006, and before July 1, 2007, three hundred thousand dollars ($300,000).

(8) With respect to an injury occurring on and after July 1, 2007, and before July 1, 2008, three hundred ten thousand dollars ($310,000).

(9) With respect to an injury occurring on and after July 1, 2008, and before July 1, 2009, three hundred eighteen thousand dollars ($318,000).

(10) With respect to an injury occurring on and after July 1, 2009, and before July 1, 2014, three hundred twenty-five

thousand dollars ($325,000).

(11) With respect to an injury occurring on and after July 1, 2014, and before July 1, 2015, three hundred forty-seven thousand dollars ($347,000).

(12) With respect to an injury occurring on and after July 1, 2015, and before July 1, 2016, three hundred sixty-eight thousand dollars ($368,000).

(13) With respect to an injury occurring on and after July 1, 2016, **and before July 1, 2020,** three hundred ninety thousand dollars ($390,000).

(14) With respect to an injury occurring on and after July 1, 2020, and before July 1, 2021, three hundred ninety-eight thousand dollars ($398,000).

(15) With respect to an injury occurring on and after July 1, 2021, and before July 1, 2022, four hundred six thousand dollars ($406,000).

(16) With respect to an injury occurring on and after July 1, 2022, four hundred fourteen thousand dollars ($414,000).".

Page 11, line 36, after "facility," insert "**an amount not to exceed**".

Page 12, line 1, delete "two hundred twenty-five percent" and insert "**two hundred seventy-five percent**".

Page 12, line 2, delete "(225%)" and insert "**(275%)**".

Page 18, line 36, after "facility," insert "**an amount not to exceed**".

Page 19, line 1, delete "two hundred twenty-five percent" and insert "**two hundred seventy-five percent**".

Page 19, line 2, delete "(225%)" and insert "**(275%)**".

Page 19, between lines 13 and 14, begin a new paragraph and insert:

"SECTION 7. IC 22-3-7-16, AS AMENDED BY P.L.204-2018, SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 16. (a) Compensation shall be allowed on account of disablement from occupational disease resulting in only temporary total disability to work or temporary partial disability to work beginning with the eighth day of such disability except for the medical benefits provided for in section 17 of this chapter. Compensation shall be allowed for the first seven (7) calendar days only as provided in this section. The first weekly installment of compensation for temporary disability is due fourteen (14) days after the disability begins. Not later than fifteen (15) days from the date that the first installment of compensation is due, the employer or the employer's insurance carrier shall file with the worker's compensation board electronically and tender to the employee or to the employee's dependents, with all compensation due, a properly prepared compensation agreement in a form prescribed by the board. Whenever an employer or the employer's insurance carrier denies or is not able to determine liability to pay compensation or benefits, the employer or the employer's insurance carrier shall notify the worker's compensation board and the employee in writing on a form prescribed by the worker's compensation board not later than thirty (30) days after the employer's knowledge of the claimed disablement. If a determination of liability cannot be made within thirty (30) days, the worker's compensation board may approve an additional thirty (30) days upon a written request of the employer or the employer's insurance carrier that sets forth the reasons that the determination could not be made within thirty (30) days and states the facts or circumstances that are necessary to determine liability within the additional thirty (30) days. More than thirty (30) days of additional time may be approved by the worker's compensation board upon the filing of a petition by the employer or the employer's insurance carrier that sets forth:

(1) the extraordinary circumstances that have precluded a determination of liability within the initial sixty (60) days;

(2) the status of the investigation on the date the petition is filed;

(3) the facts or circumstances that are necessary to make a determination; and

(4) a timetable for the completion of the remaining investigation.

An employer who fails to comply with this section is subject to a civil penalty under IC 22-3-4-15.

(b) Once begun, temporary total disability benefits may not be terminated by the employer unless:

(1) the employee has returned to work;

(2) the employee has died;

(3) the employee has refused to undergo a medical examination under section 20 of this chapter;

(4) the employee has received five hundred (500) weeks of temporary total disability benefits or has been paid the maximum compensation allowable under section 19 of this chapter; or

(5) the employee is unable or unavailable to work for reasons unrelated to the compensable disease.

In all other cases the employer must notify the employee in writing of the employer's intent to terminate the payment of temporary total disability benefits, and of the availability of employment, if any, on a form approved by the board. If the employee disagrees with the proposed termination, the employee must give written notice of disagreement to the board and the employer within seven (7) days after receipt of the notice of intent to terminate benefits. If the board and employer do not receive a notice of disagreement under this section, the employee's temporary total disability benefits shall be terminated. Upon receipt of the notice of disagreement, the board shall immediately contact the parties, which may be by telephone or other means and attempt to resolve the disagreement. If the board is unable to resolve the disagreement within ten (10) days of receipt of the notice of disagreement, the board shall immediately arrange for an evaluation of the employee by an independent medical examiner. The independent medical examiner shall be selected by mutual agreement of the parties or, if the parties are unable to agree, appointed by the board under IC 22-3-4-11. If the independent medical examiner determines that the employee is no longer temporarily disabled or is still temporarily disabled but can return to employment that the employer has made available to the employee, or if the employee fails or refuses to appear for examination by the independent medical examiner, temporary total disability benefits may be terminated. If either party disagrees with the opinion of the independent medical examiner, the party shall apply to the board for a hearing under

section 27 of this chapter.

(c) An employer is not required to continue the payment of temporary total disability benefits for more than fourteen (14) days after the employer's proposed termination date unless the independent medical examiner determines that the employee is temporarily disabled and unable to return to any employment that the employer has made available to the employee.

(d) If it is determined that as a result of this section temporary total disability benefits were overpaid, the overpayment shall be deducted from any benefits due the employee under this section and, if there are no benefits due the employee or the benefits due the employee do not equal the amount of the overpayment, the employee shall be responsible for paying any overpayment which cannot be deducted from benefits due the employee.

(e) For disablements occurring on and after July 1, 1976, from occupational disease resulting in temporary total disability for any work there shall be paid to the disabled employee during the temporary total disability weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages, as defined in section 19 of this chapter, for a period not to exceed five hundred (500) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days.

(f) For disablements occurring on and after July 1, 1974, from occupational disease resulting in temporary partial disability for work there shall be paid to the disabled employee during such disability a weekly compensation equal to sixty-six and two-thirds percent (66 2/3%) of the difference between the employee's average weekly wages, as defined in section 19 of this chapter, and the weekly wages at which the employee is actually employed after the disablement, for a period not to exceed three hundred (300) weeks. Compensation shall be allowed for the first seven (7) calendar days only if the disability continues for longer than twenty-one (21) days. In case of partial disability after the period of temporary total disability, the latter period shall be included as a part of the maximum period allowed for partial disability.

(g) For disabilities occurring on and after July 1, 1979, and before July 1, 1988, from occupational disease in the schedule set forth in subsection (j), the employee shall receive in addition to disability benefits, not exceeding fifty-two (52) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred twenty-five dollars ($125) average weekly wages, for the period stated for the disabilities.

(h) For disabilities occurring on and after July 1, 1988, and before July 1, 1989, from occupational disease in the schedule set forth in subsection (j), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred sixty-six dollars ($166) average weekly wages, for the period stated for the disabilities.

(i) For disabilities occurring on and after July 1, 1989, and before July 1, 1990, from occupational disease in the schedule set forth in subsection (j), the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed one hundred eighty-three dollars ($183) average weekly wages, for the period stated for the disabilities.

(j) For disabilities occurring on and after July 1, 1990, and before July 1, 1991, from occupational disease in the following schedule, the employee shall receive in addition to disability benefits, not exceeding seventy-eight (78) weeks on account of the occupational disease, a weekly compensation of sixty percent (60%) of the employee's average weekly wages, not to exceed two hundred dollars ($200) average weekly wages, for the period stated for the disabilities.

(1) Amputations: For the loss by separation, of the thumb, sixty (60) weeks; of the index finger, forty (40) weeks; of the second finger, thirty-five (35) weeks; of the third or ring finger, thirty (30) weeks; of the fourth or little finger, twenty (20) weeks; of the hand by separation below the elbow, two hundred (200) weeks; of the arm above the elbow joint, two hundred fifty (250) weeks; of the big toe, sixty (60) weeks; of the second toe, thirty (30) weeks; of the third toe, twenty (20) weeks; of the fourth toe, fifteen (15) weeks; of the fifth or little toe, ten (10) weeks; of the foot below the knee joint, one hundred fifty (150) weeks; and of the leg above the knee joint, two hundred (200) weeks. The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the thumb or toe and compensation shall be paid for one-half (1/2) of the period for the loss of the entire thumb or toe. The loss of not more than two (2) phalanges of a finger shall be considered as the loss of one-half (1/2) the finger and compensation shall be paid for one-half (1/2) of the period for the loss of the entire finger.

(2) Loss of Use: The total permanent loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange and the compensation shall be paid for the same period as for the loss thereof by separation.

(3) Partial Loss of Use: For the permanent partial loss of the use of an arm, hand, thumb, finger, leg, foot, toe, or phalange, compensation shall be paid for the proportionate loss of the use of such arm, hand, thumb, finger, leg, foot, toe, or phalange.

(4) For disablements for occupational disease resulting in total permanent disability, five hundred (500) weeks.

(5) For the loss of both hands, or both feet, or the total sight of both eyes, or any two (2) of such losses resulting from the same disablement by occupational disease, five hundred (500) weeks.

(6) For the permanent and complete loss of vision by enucleation of an eye or its reduction to one-tenth (1/10) of normal vision with glasses, one hundred fifty (150) weeks, and for any other permanent reduction of the sight of an

eye, compensation shall be paid for a period proportionate to the degree of such permanent reduction without correction or glasses. However, when such permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, but correction or glasses would result in restoration of vision, then compensation shall be paid for fifty percent (50%) of such total loss of vision without glasses plus an additional amount equal to the proportionate amount of such reduction with glasses, not to exceed an additional fifty percent (50%).

(7) For the permanent and complete loss of hearing, two hundred (200) weeks.

(8) In all other cases of permanent partial impairment, compensation proportionate to the degree of such permanent partial impairment, in the discretion of the worker's compensation board, not exceeding five hundred (500) weeks.

(9) In all cases of permanent disfigurement, which may impair the future usefulness or opportunities of the employee, compensation in the discretion of the worker's compensation board, not exceeding two hundred (200) weeks, except that no compensation shall be payable under this paragraph where compensation shall be payable under subdivisions (1) through (8). Where compensation for temporary total disability has been paid, this amount of compensation shall be deducted from any compensation due for permanent disfigurement.

(k) With respect to disablements in the following schedule occurring on and after July 1, 1991, the employee shall receive in addition to temporary total disability benefits, not exceeding one hundred twenty-five (125) weeks on account of the disablement, compensation in an amount determined under the following schedule to be paid weekly at a rate of sixty-six and two-thirds percent (66 2/3%) of the employee's average weekly wages during the fifty-two (52) weeks immediately preceding the week in which the disablement occurred:

(1) Amputation: For the loss by separation of the thumb, twelve (12) degrees of permanent impairment; of the index finger, eight (8) degrees of permanent impairment; of the second finger, seven (7) degrees of permanent impairment; of the third or ring finger, six (6) degrees of permanent impairment; of the fourth or little finger, four (4) degrees of permanent impairment; of the hand by separation below the elbow joint, forty (40) degrees of permanent impairment; of the arm above the elbow, fifty (50) degrees of permanent impairment; of the big toe, twelve (12) degrees of permanent impairment; of the second toe, six (6) degrees of permanent impairment; of the third toe, four (4) degrees of permanent impairment; of the fourth toe, three (3) degrees of permanent impairment; of the fifth or little toe, two (2) degrees of permanent impairment; of separation of the foot below the knee joint, thirty-five (35) degrees of permanent impairment; and of the leg above the knee joint, forty-five (45) degrees of permanent impairment.

(2) Amputations occurring on or after July 1, 1997: For the loss by separation of any of the body parts described in subdivision (1) on or after July 1, 1997, the dollar values per degree applying on the date of the injury as described in subsection (l) shall be multiplied by two (2). However, the doubling provision of this subdivision does not apply to a loss of use that is not a loss by separation.

(3) The loss of more than one (1) phalange of a thumb or toe shall be considered as the loss of the entire thumb or toe. The loss of more than two (2) phalanges of a finger shall be considered as the loss of the entire finger. The loss of not more than one (1) phalange of a thumb or toe shall be considered as the loss of one-half (1/2) of the degrees of permanent impairment for the loss of the entire thumb or toe. The loss of not more than one (1) phalange of a finger shall be considered as the loss of one-third (1/3) of the finger and compensation shall be paid for one-third (1/3) of the degrees payable for the loss of the entire finger. The loss of more than one (1) phalange of the finger but not more than two (2) phalanges of the finger shall be considered as the loss of one-half (1/2) of the finger and compensation shall be paid for one-half (1/2) of the degrees payable for the loss of the entire finger.

(4) For the loss by separation of both hands or both feet or the total sight of both eyes or any two (2) such losses in the same accident, one hundred (100) degrees of permanent impairment.

(5) For the permanent and complete loss of vision by enucleation or its reduction to one-tenth (1/10) of normal vision with glasses, thirty-five (35) degrees of permanent impairment.

(6) For the permanent and complete loss of hearing in one (1) ear, fifteen (15) degrees of permanent impairment, and in both ears, forty (40) degrees of permanent impairment.

(7) For the loss of one (1) testicle, ten (10) degrees of permanent impairment; for the loss of both testicles, thirty (30) degrees of permanent impairment.

(8) Loss of use: The total permanent loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange shall be considered as the equivalent of the loss by separation of the arm, hand, thumb, finger, leg, foot, toe, or phalange, and compensation shall be paid in the same amount as for the loss by separation. However, the doubling provision of subdivision (2) does not apply to a loss of use that is not a loss by separation.

(9) Partial loss of use: For the permanent partial loss of the use of an arm, a hand, a thumb, a finger, a leg, a foot, a toe, or a phalange, compensation shall be paid for the proportionate loss of the use of the arm, hand, thumb, finger, leg, foot, toe, or phalange.

(10) For disablements resulting in total permanent disability, the amount payable for impairment or five hundred (500) weeks of compensation, whichever is greater.

(11) For any permanent reduction of the sight of an eye less than a total loss as specified in subdivision (5), the compensation shall be paid in an amount proportionate to the degree of a permanent reduction without correction or

glasses. However, when a permanent reduction without correction or glasses would result in one hundred percent (100%) loss of vision, then compensation shall be paid for fifty percent (50%) of the total loss of vision without glasses, plus an additional amount equal to the proportionate amount of the reduction with glasses, not to exceed an additional fifty percent (50%).

(12) For any permanent reduction of the hearing of one (1) or both ears, less than the total loss as specified in subdivision (6), compensation shall be paid in an amount proportionate to the degree of a permanent reduction.

(13) In all other cases of permanent partial impairment, compensation proportionate to the degree of a permanent partial impairment, in the discretion of the worker's compensation board, not exceeding one hundred (100) degrees of permanent impairment.

(14) In all cases of permanent disfigurement which may impair the future usefulness or opportunities of the employee, compensation, in the discretion of the worker's compensation board, not exceeding forty (40) degrees of permanent impairment except that no compensation shall be payable under this subdivision where compensation is payable elsewhere in this section.

(l) With respect to disablements occurring on and after July 1, 1991, compensation for permanent partial impairment shall be paid according to the degree of permanent impairment for the disablement determined under subsection (k) and the following:

(1) With respect to disablements occurring on and after July 1, 1991, and before July 1, 1992, for each degree of permanent impairment from one (1) to thirty-five (35), five hundred dollars ($500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), nine hundred dollars ($900) per degree; for each degree of permanent impairment above fifty (50), one thousand five hundred dollars ($1,500) per degree.

(2) With respect to disablements occurring on and after July 1, 1992, and before July 1, 1993, for each degree of permanent impairment from one (1) to twenty (20), five hundred dollars ($500) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), eight hundred dollars ($800) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(3) With respect to disablements occurring on and after July 1, 1993, and before July 1, 1997, for each degree of permanent impairment from one (1) to ten (10), five hundred dollars ($500) per degree; for each degree of permanent impairment from eleven (11) to twenty (20), seven hundred dollars ($700) per degree; for each degree of permanent impairment from twenty-one (21) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(4) With respect to disablements occurring on and after July 1, 1997, and before July 1, 1998, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(5) With respect to disablements occurring on and after July 1, 1998, and before July 1, 1999, for each degree of permanent impairment from one (1) to ten (10), seven hundred fifty dollars ($750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand dollars ($1,000) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment above fifty (50), one thousand seven hundred dollars ($1,700) per degree.

(6) With respect to disablements occurring on and after July 1, 1999, and before July 1, 2000, for each degree of permanent impairment from one (1) to ten (10), nine hundred dollars ($900) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment above fifty (50), two thousand dollars ($2,000) per degree.

(7) With respect to disablements occurring on and after July 1, 2000, and before July 1, 2001, for each degree of permanent impairment from one (1) to ten (10), one thousand one hundred dollars ($1,100) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand dollars ($2,000) per degree; for each degree of permanent impairment above fifty (50), two thousand five hundred fifty dollars ($2,500) per degree.

(8) With respect to disablements occurring on and after July 1, 2001, and before July 1, 2007, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred dollars ($1,300) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred dollars ($1,500) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred dollars ($2,400) per degree; for each degree of permanent impairment above fifty (50), three thousand dollars ($3,000) per degree.

(9) With respect to disablements occurring on and after July 1, 2007, and before July 1, 2008, for each degree of permanent impairment from one (1) to ten (10), one

thousand three hundred forty dollars ($1,340) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred forty-five dollars ($1,545) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand four hundred seventy-five dollars ($2,475) per degree; for each degree of permanent impairment above fifty (50), three thousand one hundred fifty dollars ($3,150) per degree.

(10) With respect to disablements occurring on and after July 1, 2008, and before July 1, 2009, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred sixty-five dollars ($1,365) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred seventy dollars ($1,570) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand five hundred twenty-five dollars ($2,525) per degree; for each degree of permanent impairment above fifty (50), three thousand two hundred dollars ($3,200) per degree.

(11) With respect to disablements occurring on and after July 1, 2009, and before July 1, 2010, for each degree of permanent impairment from one (1) to ten (10), one thousand three hundred eighty dollars ($1,380) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand five hundred eighty-five dollars ($1,585) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand six hundred dollars ($2,600) per degree; for each degree of permanent impairment above fifty (50), three thousand three hundred dollars ($3,300) per degree.

(12) With respect to disablements occurring on and after July 1, 2010, and before July 1, 2014, for each degree of permanent impairment from one (1) to ten (10), one thousand four hundred dollars ($1,400) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand six hundred dollars ($1,600) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand seven hundred dollars ($2,700) per degree; for each degree of permanent impairment above fifty (50), three thousand five hundred dollars ($3,500) per degree.

(13) With respect to disablements occurring on and after July 1, 2014, and before July 1, 2015, for each degree of permanent impairment from one (1) to ten (10), one thousand five hundred seventeen dollars ($1,517) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand seven hundred seventeen dollars ($1,717) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), two thousand eight hundred sixty-two dollars ($2,862) per degree; for each degree of permanent impairment above fifty (50), three thousand six hundred eighty-seven dollars ($3,687) per degree.

(14) With respect to disablements occurring on and after July 1, 2015, and before July 1, 2016, for each degree of permanent impairment from one (1) to ten (10), one thousand six hundred thirty-three dollars ($1,633) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand eight hundred thirty-five dollars ($1,835) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand twenty-four dollars ($3,024) per degree; for each degree of permanent impairment above fifty (50), three thousand eight hundred seventy-three dollars ($3,873) per degree.

(15) With respect to disablements occurring on and after July 1, 2016, **and before July 1, 2020,** for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred fifty dollars ($1,750) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred fifty-two dollars ($1,952) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand one hundred eighty-six dollars ($3,186) per degree; for each degree of permanent impairment above fifty (50), four thousand sixty dollars ($4,060) per degree.

(16) With respect to disablements occurring on and after July 1, 2020, and before July 1, 2021, for each degree of permanent impairment from one (1) to ten (10), one thousand seven hundred eighty-five dollars ($1,785) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), one thousand nine hundred ninety-one dollars ($1,991) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand two hundred fifty dollars ($3,250) per degree; for each degree of permanent impairment above fifty (50), four thousand one hundred forty-one dollars ($4,141) per degree.

(17) With respect to disablements occurring on and after July 1, 2021, and before July 1, 2022, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred twenty-one dollars ($1,821) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand thirty-one dollars ($2,031) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred fifteen dollars ($3,315) per degree; for each degree of permanent impairment above fifty (50), four thousand two hundred twenty-four dollars ($4,224) per degree.

(18) With respect to disablements occurring on and after July 1, 2022, for each degree of permanent impairment from one (1) to ten (10), one thousand eight hundred fifty-seven dollars ($1,857) per degree; for each degree of permanent impairment from eleven (11) to thirty-five (35), two thousand seventy-two dollars ($2,072) per degree; for each degree of permanent impairment from thirty-six (36) to fifty (50), three thousand three hundred eighty-one dollars ($3,381) per degree; for each degree of permanent impairment above fifty (50), four thousand three hundred eight dollars ($4,308) per degree.

(m) The average weekly wages used in the determination of

compensation for permanent partial impairment under subsections (k) and (l) shall not exceed the following:

(1) With respect to disablements occurring on or after July 1, 1991, and before July 1, 1992, four hundred ninety-two dollars ($492).

(2) With respect to disablements occurring on or after July 1, 1992, and before July 1, 1993, five hundred forty dollars ($540).

(3) With respect to disablements occurring on or after July 1, 1993, and before July 1, 1994, five hundred ninety-one dollars ($591).

(4) With respect to disablements occurring on or after July 1, 1994, and before July 1, 1997, six hundred forty-two dollars ($642).

(5) With respect to disablements occurring on or after July 1, 1997, and before July 1, 1998, six hundred seventy-two dollars ($672).

(6) With respect to disablements occurring on or after July 1, 1998, and before July 1, 1999, seven hundred two dollars ($702).

(7) With respect to disablements occurring on or after July 1, 1999, and before July 1, 2000, seven hundred thirty-two dollars ($732).

(8) With respect to disablements occurring on or after July 1, 2000, and before July 1, 2001, seven hundred sixty-two dollars ($762).

(9) With respect to disablements occurring on or after July 1, 2001, and before July 1, 2002, eight hundred twenty-two dollars ($822).

(10) With respect to disablements occurring on or after July 1, 2002, and before July 1, 2006, eight hundred eighty-two dollars ($882).

(11) With respect to disablements occurring on or after July 1, 2006, and before July 1, 2007, nine hundred dollars ($900).

(12) With respect to disablements occurring on or after July 1, 2007, and before July 1, 2008, nine hundred thirty dollars ($930).

(13) With respect to disablements occurring on or after July 1, 2008, and before July 1, 2009, nine hundred fifty-four dollars ($954).

(14) With respect to disablements occurring on or after July 1, 2009, and before July 1, 2014, nine hundred seventy-five dollars ($975).

(15) With respect to disablements occurring on or after July 1, 2014, and before July 1, 2015, one thousand forty dollars ($1,040).

(16) With respect to disablements occurring on or after July 1, 2015, and before July 1, 2016, one thousand one hundred five dollars ($1,105).

(17) With respect to disablements occurring on or after July 1, 2016, **and before July 1, 2020,** one thousand one hundred seventy dollars ($1,170).

(18) With respect to disablements occurring on or after July 1, 2020, and before July 1, 2021, one thousand one hundred ninety-three dollars ($1,193).

(19) With respect to disablements occurring on or after July 1, 2021, and before July 1, 2022, one thousand two hundred seventeen dollars ($1,217).

(20) With respect to disablements occurring on or after July 1, 2022, one thousand two hundred forty-one dollars ($1,241).

(n) If any employee, only partially disabled, refuses employment suitable to the employee's capacity procured for the employee, the employee shall not be entitled to any compensation at any time during the continuance of such refusal unless, in the opinion of the worker's compensation board, such refusal was justifiable. The employee must be served with a notice setting forth the consequences of the refusal under this subsection. The notice must be in a form prescribed by the worker's compensation board.

(o) If an employee has sustained a permanent impairment or disability from an accidental injury other than an occupational disease in another employment than that in which the employee suffered a subsequent disability from an occupational disease, such as herein specified, the employee shall be entitled to compensation for the subsequent disability in the same amount as if the previous impairment or disability had not occurred. However, if the permanent impairment or disability resulting from an occupational disease for which compensation is claimed results only in the aggravation or increase of a previously sustained permanent impairment from an occupational disease or physical condition regardless of the source or cause of such previously sustained impairment from an occupational disease or physical condition, the board shall determine the extent of the previously sustained permanent impairment from an occupational disease or physical condition as well as the extent of the aggravation or increase resulting from the subsequent permanent impairment or disability, and shall award compensation only for that part of said occupational disease or physical condition resulting from the subsequent permanent impairment. An amputation of any part of the body or loss of any or all of the vision of one (1) or both eyes caused by an occupational disease shall be considered as a permanent impairment or physical condition.

(p) If an employee suffers a disablement from an occupational disease for which compensation is payable while the employee is still receiving or entitled to compensation for a previous injury by accident or disability by occupational disease in the same employment, the employee shall not at the same time be entitled to compensation for both, unless it be for a permanent injury, such as specified in subsection (k)(1), (k)(4), (k)(5), (k)(8), or (k)(9), but the employee shall be entitled to compensation for that disability and from the time of that disability which will cover the longest period and the largest amount payable under this chapter.

(q) If an employee receives a permanent disability from an occupational disease such as specified in subsection (k)(1), (k)(4), (k)(5), (k)(8), or (k)(9) after having sustained another such permanent disability in the same employment the employee shall be entitled to compensation for both such disabilities, but the total compensation shall be paid by extending the period and not by increasing the amount of weekly compensation and, when such previous and subsequent permanent disabilities, in combination result in total permanent disability or permanent total impairment, compensation shall be payable for such

permanent total disability or impairment, but payments made for the previous disability or impairment shall be deducted from the total payment of compensation due.

(r) When an employee has been awarded or is entitled to an award of compensation for a definite period from an occupational disease wherein disablement occurs on and after April 1, 1963, and such employee dies from other causes than such occupational disease, payment of the unpaid balance of such compensation not exceeding three hundred fifty (350) weeks shall be paid to the employee's dependents of the second and third class as defined in sections 11 through 14 of this chapter and compensation, not exceeding five hundred (500) weeks shall be made to the employee's dependents of the first class as defined in sections 11 through 14 of this chapter.

(s) Any payment made by the employer to the employee during the period of the employee's disability, or to the employee's dependents, which, by the terms of this chapter, was not due and payable when made, may, subject to the approval of the worker's compensation board, be deducted from the amount to be paid as compensation, but such deduction shall be made from the distal end of the period during which compensation must be paid, except in cases of temporary disability.

(t) When so provided in the compensation agreement or in the award of the worker's compensation board, compensation may be paid semimonthly, or monthly, instead of weekly.

(u) When the aggregate payments of compensation awarded by agreement or upon hearing to an employee or dependent under eighteen (18) years of age do not exceed one hundred dollars ($100), the payment thereof may be made directly to such employee or dependent, except when the worker's compensation board shall order otherwise.

(v) Whenever the aggregate payments of compensation, due to any person under eighteen (18) years of age, exceed one hundred dollars ($100), the payment thereof shall be made to a trustee, appointed by the circuit or superior court, or to a duly qualified guardian, or, upon the order of the worker's compensation board, to a parent or to such minor person. The payment of compensation, due to any person eighteen (18) years of age or over, may be made directly to such person.

(w) If an employee, or a dependent, is mentally incompetent, or a minor at the time when any right or privilege accrues to the employee under this chapter, the employee's guardian or trustee may, in the employee's behalf, claim and exercise such right and privilege.

(x) All compensation payments named and provided for in this section, shall mean and be defined to be for only such occupational diseases and disabilities therefrom as are proved by competent evidence, of which there are or have been objective conditions or symptoms proven, not within the physical or mental control of the employee.".

Page 20, line 18, after "facility," insert "**an amount not to exceed**".

Page 20, line 24, delete "two hundred twenty-five percent (225%)" and insert "**two hundred seventy-five percent (275%)**".

Page 21, after line 15, begin a new paragraph and insert:

"SECTION 9. IC 22-3-7-19, AS AMENDED BY P.L.275-2013, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 19. (a) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1985, and before July 1, 1986, the average weekly wages are considered to be:

(1) not more than two hundred sixty-seven dollars ($267); and

(2) not less than seventy-five dollars ($75).

(b) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1986, and before July 1, 1988, the average weekly wages are considered to be:

(1) not more than two hundred eighty-five dollars ($285); and

(2) not less than seventy-five dollars ($75).

(c) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1988, and before July 1, 1989, the average weekly wages are considered to be:

(1) not more than three hundred eighty-four dollars ($384); and

(2) not less than seventy-five dollars ($75).

(d) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1989, and before July 1, 1990, the average weekly wages are considered to be:

(1) not more than four hundred eleven dollars ($411); and

(2) not less than seventy-five dollars ($75).

(e) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1990, and before July 1, 1991, the average weekly wages are considered to be:

(1) not more than four hundred forty-one dollars ($441); and

(2) not less than seventy-five dollars ($75).

(f) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1991, and before July 1, 1992, the average weekly wages are considered to be:

(1) not more than four hundred ninety-two dollars ($492); and

(2) not less than seventy-five dollars ($75).

(g) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1992, and before July 1, 1993, the average weekly wages are considered to be:

(1) not more than five hundred forty dollars ($540); and

(2) not less than seventy-five dollars ($75).

(h) In computing compensation for temporary total disability,

temporary partial disability, and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1993, and before July 1, 1994, the average weekly wages are considered to be:

(1) not more than five hundred ninety-one dollars ($591); and

(2) not less than seventy-five dollars ($75).

(i) In computing compensation for temporary total disability, temporary partial disability and total permanent disability, with respect to occupational diseases occurring on and after July 1, 1994, and before July 1, 1997, the average weekly wages are considered to be:

(1) not more than six hundred forty-two dollars ($642); and

(2) not less than seventy-five dollars ($75).

(j) In computing compensation for temporary total disability, temporary partial disability, and total permanent disability, the average weekly wages are considered to be:

(1) with respect to occupational diseases occurring on and after July 1, 1997, and before July 1, 1998:

(A) not more than six hundred seventy-two dollars ($672); and

(B) not less than seventy-five dollars ($75);

(2) with respect to occupational diseases occurring on and after July 1, 1998, and before July 1, 1999:

(A) not more than seven hundred two dollars ($702); and

(B) not less than seventy-five dollars ($75);

(3) with respect to occupational diseases occurring on and after July 1, 1999, and before July 1, 2000:

(A) not more than seven hundred thirty-two dollars ($732); and

(B) not less than seventy-five dollars ($75);

(4) with respect to occupational diseases occurring on and after July 1, 2000, and before July 1, 2001:

(A) not more than seven hundred sixty-two dollars ($762); and

(B) not less than seventy-five dollars ($75);

(5) with respect to disablements occurring on and after July 1, 2001, and before July 1, 2002:

(A) not more than eight hundred twenty-two dollars ($822); and

(B) not less than seventy-five dollars ($75);

(6) with respect to disablements occurring on and after July 1, 2002, and before July 1, 2006:

(A) not more than eight hundred eighty-two dollars ($882); and

(B) not less than seventy-five dollars ($75);

(7) with respect to disablements occurring on and after July 1, 2006, and before July 1, 2007:

(A) not more than nine hundred dollars ($900); and

(B) not less than seventy-five dollars ($75);

(8) with respect to disablements occurring on and after July 1, 2007, and before July 1, 2008:

(A) not more than nine hundred thirty dollars ($930); and

(B) not less than seventy-five dollars ($75);

(9) with respect to disablements occurring on and after July 1, 2008, and before July 1, 2009:

(A) not more than nine hundred fifty-four dollars ($954); and

(B) not less than seventy-five dollars ($75);

(10) with respect to disablements occurring on and after July 1, 2009, and before July 1, 2014:

(A) not more than nine hundred seventy-five dollars ($975); and

(B) not less than seventy-five dollars ($75);

(11) with respect to disablements occurring on and after July 1, 2014, and before July 1, 2015:

(A) not more than one thousand forty dollars ($1,040); and

(B) not less than seventy-five dollars ($75);

(12) with respect to disablements occurring on and after July 1, 2015, and before July 1, 2016:

(A) not more than one thousand one hundred five dollars ($1,105); and

(B) not less than seventy-five dollars ($75); ~~and~~

(13) with respect to disablements occurring on and after July 1, 2016, **and before July 1, 2020:**

(A) not more than one thousand one hundred seventy dollars ($1,170); and

(B) not less than seventy-five dollars ($75);

(14) with respect to disablements occurring on and after July 1, 2020, and before July 1, 2021:

(A) not more than one thousand one hundred ninety-three dollars ($1,193); and

(B) not less than seventy-five dollars ($75);

(15) with respect to disablements occurring on and after July 1, 2021, and before July 1, 2022:

(A) not more than one thousand two hundred seventeen dollars ($1,217); and

(B) not less than seventy-five dollars ($75); and

(16) with respect to disablements occurring on and after July 1, 2022:

(A) not more than one thousand two hundred forty-one dollars ($1,241); and

(B) not less than seventy-five dollars ($75).

(k) The maximum compensation with respect to disability or death occurring on and after July 1, 1985, and before July 1, 1986, which shall be paid for occupational disease and the results thereof under the provisions of this chapter or under any combination of its provisions may not exceed eighty-nine thousand dollars ($89,000) in any case.

(l) The maximum compensation with respect to disability or death occurring on and after July 1, 1986, and before July 1, 1988, which shall be paid for occupational disease and the results thereof under the provisions of this chapter or under any combination of its provisions may not exceed ninety-five thousand dollars ($95,000) in any case.

(m) The maximum compensation with respect to disability or death occurring on and after July 1, 1988, and before July 1, 1989, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred twenty-eight thousand dollars ($128,000) in any case.

(n) The maximum compensation with respect to disability or

death occurring on and after July 1, 1989, and before July 1, 1990, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred thirty-seven thousand dollars ($137,000) in any case.

(o) The maximum compensation with respect to disability or death occurring on and after July 1, 1990, and before July 1, 1991, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of its provisions may not exceed one hundred forty-seven thousand dollars ($147,000) in any case.

(p) The maximum compensation with respect to disability or death occurring on and after July 1, 1991, and before July 1, 1992, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred sixty-four thousand dollars ($164,000) in any case.

(q) The maximum compensation with respect to disability or death occurring on and after July 1, 1992, and before July 1, 1993, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred eighty thousand dollars ($180,000) in any case.

(r) The maximum compensation with respect to disability or death occurring on and after July 1, 1993, and before July 1, 1994, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed one hundred ninety-seven thousand dollars ($197,000) in any case.

(s) The maximum compensation with respect to disability or death occurring on and after July 1, 1994, and before July 1, 1997, that shall be paid for occupational disease and the results thereof under this chapter or under any combination of the provisions of this chapter may not exceed two hundred fourteen thousand dollars ($214,000) in any case.

(t) The maximum compensation that shall be paid for occupational disease and the results of an occupational disease under this chapter or under any combination of the provisions of this chapter may not exceed the following amounts in any case:

(1) With respect to disability or death occurring on and after July 1, 1997, and before July 1, 1998, two hundred twenty-four thousand dollars ($224,000).

(2) With respect to disability or death occurring on and after July 1, 1998, and before July 1, 1999, two hundred thirty-four thousand dollars ($234,000).

(3) With respect to disability or death occurring on and after July 1, 1999, and before July 1, 2000, two hundred forty-four thousand dollars ($244,000).

(4) With respect to disability or death occurring on and after July 1, 2000, and before July 1, 2001, two hundred fifty-four thousand dollars ($254,000).

(5) With respect to disability or death occurring on and after July 1, 2001, and before July 1, 2002, two hundred seventy-four thousand dollars ($274,000).

(6) With respect to disability or death occurring on and after July 1, 2002, and before July 1, 2006, two hundred ninety-four thousand dollars ($294,000).

(7) With respect to disability or death occurring on and after July 1, 2006, and before July 1, 2007, three hundred thousand dollars ($300,000).

(8) With respect to disability or death occurring on and after July 1, 2007, and before July 1, 2008, three hundred ten thousand dollars ($310,000).

(9) With respect to disability or death occurring on and after July 1, 2008, and before July 1, 2009, three hundred eighteen thousand dollars ($318,000).

(10) With respect to disability or death occurring on and after July 1, 2009, and before July 1, 2014, three hundred twenty-five thousand dollars ($325,000).

(11) With respect to disability or death occurring on and after July 1, 2014, and before July 1, 2015, three hundred forty-seven thousand dollars ($347,000).

(12) With respect to disability or death occurring on and after July 1, 2015, and before July 1, 2016, three hundred sixty-eight thousand dollars ($368,000).

(13) With respect to disability or death occurring on and after July 1, 2016, **and before July 1, 2020,** three hundred ninety thousand dollars ($390,000).

(14) With respect to disability or death occurring on and after July 1, 2020, and before July 1, 2021, three hundred ninety-eight thousand dollars ($398,000).

(15) With respect to disability or death occurring on and after July 1, 2021, and before July 1, 2022, four hundred six thousand dollars ($406,000).

(16) With respect to disability or death occurring on and after July 1, 2022, four hundred fourteen thousand dollars ($414,000).

(u) For all disabilities occurring on and after July 1, 1985, "average weekly wages" means the earnings of the injured employee during the period of fifty-two (52) weeks immediately preceding the disability divided by fifty-two (52). If the employee lost seven (7) or more calendar days during the period, although not in the same week, then the earnings for the remainder of the fifty-two (52) weeks shall be divided by the number of weeks and parts of weeks remaining after the time lost has been deducted. If employment before the date of disability extended over a period of less than fifty-two (52) weeks, the method of dividing the earnings during that period by the number of weeks and parts of weeks during which the employee earned wages shall be followed if results just and fair to both parties will be obtained. If by reason of the shortness of the time during which the employee has been in the employment of the employer or of the casual nature or terms of the employment it is impracticable to compute the average weekly wages for the employee, the employee's average weekly wages shall be considered to be the average weekly amount that, during the fifty-two (52) weeks before the date of disability, was being earned by a person in the same grade employed at the same work by the same employer or, if there is no person so employed, by a person in the same grade employed in that same class of employment in the same district. Whenever allowances of any character are made to an employee instead of wages or a specified part of the wage contract, they shall be considered a part of the employee's earnings.

(v) The provisions of this article may not be construed to

result in an award of benefits in which the number of weeks paid or to be paid for temporary total disability, temporary partial disability, or permanent total disability benefits combined exceeds five hundred (500) weeks. This section shall not be construed to prevent a person from applying for an award under IC 22-3-3-13. However, in case of permanent total disability resulting from a disablement occurring on or after January 1, 1998, the minimum total benefit shall not be less than seventy-five thousand dollars ($75,000).".

Renumber all SECTIONS consecutively.

(Reference is to HB 1332 as reprinted January 31, 2020.)
and when so amended that said bill do pass.
Committee Vote: Yeas 10, Nays 0.

BOOTS, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Education and Career Development, to which was referred Engrossed House Bill 1341, 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 1, line 8, delete "1999; or" and insert "**2003; and**".

Page 1, line 17, delete "1999," and insert "**2003,**".

Page 2, line 2, delete "opportunities" and insert "**the opportunities and resources**".

Page 2, delete lines 3 through 14, begin a new paragraph and insert:

"**(c) The plan developed under subsection (b) must include the following:**

(1) A description of the following:

(A) How to contact former students described in subsection (b).

(B) The opportunities that former students described in subsection (b) have to earn a diploma, including an alternative diploma described in IC 20-32-4-14 or an Indiana high school equivalency diploma.

(2) A list of the following:

(A) Resources available to former students described in subsection (b) regarding employment services.

(B) Vocational training opportunities for former students described in subsection (b).".

Page 2, line 15, delete "(e)" and insert "**(d)**".

Page 2, line 18, delete "(f)" and insert "**(e)**".

(Reference is to HB 1341 as printed January 24, 2020.)
and when so amended that said bill do pass.
Committee Vote: Yeas 9, Nays 0.

RAATZ, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Insurance and Financial Institutions, to which was referred Engrossed House Bill 1353, 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 25, between lines 31 and 32, begin a new paragraph and insert:

"SECTION 13. IC 28-7-1-17, AS AMENDED BY P.L.176-2019, SECTION 59, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 17. (a) Every loan application shall be submitted on a form approved by the credit union. Loans may be disbursed upon written approval by a majority of the credit committee or a loan officer. If the credit committee or loan officer fails to approve an application for a loan, the applicant may appeal to the board of directors, if such appeal is authorized by the bylaws.

(b) Loans to members may be made only under the following terms and conditions:

(1) All loans shall be evidenced by notes signed by the borrowing member.

(2) Except as otherwise provided in this section, the terms of any loan to a member with a maturity of more than six (6) months shall provide for principal and interest payments that will amortize the obligation in full within the terms of the loan contract. If the income of the borrowing member is seasonal, the terms of the loan contract may provide for seasonal amortization.

(3) Loans may be made upon the security of improved or unimproved real estate. Except as otherwise specified in this section, such loans must be secured by a first lien upon real estate prior to all other liens, except for taxes and assessments not delinquent, and may be made with repayment terms other than as provided in subdivision (2). The credit union loan folder for all real estate mortgage loans shall include the following:

(A) The loan application.

(B) The mortgage instrument.

(C) The note.

(D) The disclosure statement.

(E) The documentation of property insurance.

(F) For the real estate for which the loan is made:

(i) a written appraisal; ~~which must be performed by a state licensed or certified appraiser designated by the board of directors if the amount of the loan is at least two hundred fifty thousand dollars ($250,000).~~ **or**

(ii) a written estimate of market value;

consistent with the appraisal standards and transaction value limitations set forth in the appraisal regulations of the National Credit Union Administration (12 CFR 722).

(4) Loans made upon security of real estate are subject to the following restrictions:

(A) Real estate loans in which no principal amortization is required shall provide for the payment of interest at least annually and shall mature within five (5) years of the date of the loan unless extended and shall not exceed fifty percent (50%) of the fair cash value of the real estate used as security.

(B) Real estate loans on improved real estate, except for variable rate mortgage loans and rollover mortgage loans provided for in subdivision (5), shall require substantially equal payments at successive intervals of not more than one (1) year, shall mature within thirty

(30) years, and shall not exceed one hundred percent (100%) of the fair cash value of the real estate used as security.

(C) Loans primarily secured by a mortgage which constitutes a second lien on improved real estate may be made only if the aggregate amount of all loans on the real estate does not exceed one hundred percent (100%) of the fair cash value of the real estate after such loan is made. Repayment terms shall be in accordance with subdivision (2).

(D) Real estate loans may be made for the construction of improvements to real property. Funds borrowed may be advanced as work on the improvements progresses. Repayment terms must comply with subdivision (2).

(5) Subject to the limitations of subdivision (3), variable rate mortgage loans and rollover mortgage loans may be made under the same limitations and rights provided state chartered savings associations under IC 28-1-21.5 (before its repeal) or IC 28-15 or federal credit unions.

(6) As used in this subdivision, "originating lender" means the participating lender with which the member contracts. A credit union may participate with other state and federal depository financial institutions (as defined in IC 28-1-1-6) or credit union service organizations in making loans to credit union members and may sell a participating interest in any of its loans under written participation loan policies established by the board of directors. However, the credit union may not sell more than ninety percent (90%) of the principal of participating loans outstanding at the time of sale. A participating credit union that is not the originating lender may participate only in loans made to the credit union's own members or to members of another participating state or federal credit union. A master participation agreement must be properly executed. The agreement must include provisions for identifying, either through documents incorporated by reference or directly in the agreement, the participation loan or loans before the sale of the loans.

(7) As an alternative to making any loan authorized by and under the conditions set forth in subdivisions (1) through (6), a credit union may make any of the following:

(A) Any loan that may be made by a federal credit union. However, IC 24-4.5 applies to any loan that is:

(i) made under this clause; and

(ii) within the scope of IC 24-4.5.

Any provision of federal law that is in conflict with IC 24-4.5 does not apply to a loan made under this clause.

(B) Subject to subdivision (3), any alternative mortgage loan (as defined in IC 28-15-11-2) that may be made by a savings association (as defined in IC 28-15-1-11) under IC 28-15-11. A loan made under this clause by a credit union is subject to the same terms, conditions, exceptions, and limitations that apply to an alternative mortgage loan made by a savings association under IC 28-15-11.

(8) A credit union may make a loan under either:

(A) subdivisions (2) through (6); or

(B) subdivision (7);

but not both. A credit union shall make an initial determination as to whether to make a loan under subdivisions (2) through (6) or under subdivision (7). If the credit union determines that a loan or category of loans is to be made under subdivision (7), the written loan policies of the credit union must include that determination. A credit union may not combine the terms and conditions that apply to a loan made under subdivisions (2) through (6) with the terms and conditions that apply to a loan made under subdivision (7) to make a loan not expressly described and authorized either under subdivisions (2) through (6) or under subdivision (7).

(c) Nothing in this section prevents any credit union from taking an indemnifying or second mortgage on real estate as additional security.".

Renumber all SECTIONS consecutively.

(Reference is to HB 1353 as printed January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 6, Nays 0.

BASSLER, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Engrossed House Bill 1392, 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:

Replace the effective dates in SECTIONS 1 through 5 with "[EFFECTIVE JANUARY 1, 2021]".

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 16-18-2-7.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2021]: **Sec. 7.3. (a) "Advanced practice registered nurse last in attendance" means the individual who pronounced the time of death for a deceased individual.**

(b) For purposes of IC 16-37-3, the term includes an individual who holds a license under IC 25-23 and is practicing as an advanced practice registered nurse and meets the definition of IC 25-23-1-1(b).

SECTION 2. IC 16-18-2-282.1 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2021]: **Sec. 282.1. (a) "Physician assistant last in attendance" means the individual who pronounced the time of death for a deceased individual.**

(b) For purposes of IC 16-37-3, the term includes an individual who holds a license under IC 25-27.5 and is practicing as a physician assistant under a collaborative agreement that meets the requirements of IC 25-27.5-5-3.".

Page 2, line 19, delete "nurse;" and insert "**nurse**".

Page 4, line 19, delete "Two (2)" and insert "**One (1)**".

Page 4, line 20, after "be" insert "**an**".

Page 4, line 21, delete "nurses, at least one (1) of whom" and

insert "**nurse who**".

Page 5, delete lines 25 through 42.

Delete page 6.

Page 7, delete line 1.

Renumber all SECTIONS consecutively.

(Reference is to HB 1392 as printed January 28, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 11, Nays 0.

CHARBONNEAU, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Utilities, to which was referred Engrossed House Bill 1414, 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:

Replace the effective dates in SECTIONS 1 and 2 with "[EFFECTIVE JULY 1, 2020]".

Page 2, delete lines 4 through 8.

Page 2, line 9, delete "(e)" and insert "**(d)**".

Page 2, line 22, delete "(f)" and insert "**(e)**".

Page 2, line 31, delete "(g)" and insert "**(f)**".

Page 2, delete lines 34 through 42, begin a new line block indented and insert:

"**(1) the retirement, sale, or transfer is consistent with the public utility's preferred portfolio in the public utility's most recent integrated resource plan; and**

(2) the public utility has made a reasonable effort to comply with 170 IAC 4-7-2.6 and 170 IAC 4-7-4.".

Page 3, delete lines 1 through 27.

Page 3, line 28, delete "(j)" and insert "**(g)**".

Page 3, line 28, delete "May 1, 2021." and insert "**December 31, 2020.**".

Page 3, delete lines 29 through 42, begin a new paragraph and insert:

"SECTION 2. IC 8-1-8.5-12 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 12. (a) As used in this section, "coal industry employment" means employment:**

(1) at a commercial coal mine in Indiana;

(2) at a coal-fired electric generating unit in Indiana; or

(3) in an Indiana based manufacturing or transportation supply chain serving:

(A) a commercial coal mine in Indiana; or

(B) a coal-fired electric generating unit in Indiana.

(b) As used in this section, "coal transition worker" means:

(1) an individual who:

(A) has been laid off or terminated from the individual's coal industry employment; or

(B) has received a notice of termination or layoff from the individual's coal industry employment;

as a result of the permanent closure of, or a substantial layoff at, a commercial coal mine in Indiana or a coal-fired electric generating unit in Indiana; or

(2) an individual who:

(A) has:

(i) been laid off or terminated, for a reason other than cause; or

(ii) received a notice of termination or layoff, for a reason other than cause;

from the individual's coal industry employment; and

(B) is unlikely to obtain employment in an industry described in subsection (a)(1) through (a)(3) because of market forces or other factors affecting the industry.

(c) In awarding high value workforce ready credit-bearing grants under IC 21-12-8, the commission for higher education, in conjunction with the department of workforce development, shall give priority to an applicant who is a coal transition worker if the applicant is otherwise eligible for a grant under IC 21-12-8-9.".

Page 4, delete line 16.

(Reference is to HB 1414 as reprinted January 31, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 8, Nays 2.

MERRITT, Chair

Report adopted.

COMMITTEE REPORT

Madam President: The Senate Committee on Commerce and Technology, to which was referred Engrossed House Bill 1419, 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, line 39, delete "thirty-two (32)" and insert "**thirty-one (31)**".

Page 3, line 41, delete "." and insert ", **serving as a nonvoting member.**".

Page 4, line 3, delete "." and insert ", **serving as a nonvoting member.**".

Page 4, line 19, after "education" insert "**educators or**".

Page 4, delete lines 22 through 27.

Page 4, line 28, delete "(15)" and insert "**(13)**".

Page 4, line 31, delete "(16)" and insert "**(14)**".

Page 4, line 33, delete "(17)" and insert "**(15)**".

Page 4, line 35, delete "(18)" and insert "**(16)**".

Page 4, line 37, delete "(19)" and insert "**(17)**".

Page 4, line 41, delete "(20)" and insert "**(18)**".

Page 5, line 1, delete "(21)" and insert "**(19)**".

Page 5, line 4, delete "(22)" and insert "**(20)**".

Page 5, line 6, delete "(23)" and insert "**(21)**".

Page 5, line 10, delete "The member shall be appointed to fill the first".

Page 5, delete lines 11 through 12.

Page 5, line 13, delete "(24)" and insert "**(22)**".

Page 5, line 14, delete "(25)" and insert "**(23)**".

Page 5, delete lines 15 through 17.

Page 5, between lines 17 and 18, begin a new line block indented and insert:

"**(24) The commissioner of the department of corrections, serving as a nonvoting member.**

(25) The secretary of family and social services, serving

as a nonvoting member.".

Page 5, line 18, delete "(27)" and insert "**(26)**".

Page 5, line 18, reset in roman "A member of the house of representatives appointed by".

Page 5, reset in roman line 19.

Page 5, line 20, reset in roman "nonvoting member.".

Page 5, line 20, delete "Two (2) members appointed by the speaker".

Page 5, delete line 21.

Page 5, line 22, delete "(28)" and insert "**(27)**".

Page 5, line 22, reset in roman "A member of the senate appointed by the president pro".

Page 5, line 23, reset in roman "tempore of the senate who serves as a nonvoting member.".

Page 5, line 23, delete "Two".

Page 5, delete lines 24 through 25.

Page 5, line 26, delete "(29)" and insert "**(28)**".

Page 5, line 28, delete "(a)(15)" and insert "**(a)(13)**".

Page 5, line 29, delete "(a)(23)" and insert "**(a)(21)**".

Page 5, after line 41, begin a new paragraph and insert:

"SECTION 4. IC 20-32-4-15 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 15. (a) The following definitions apply throughout this section:**

(1) "Utility career cluster" means a list:

(A) compiled for purposes of college and career pathways relating to career and technical education under section 1.5(g) of this chapter; and

(B) setting forth industries or occupational fields that:

(i) are related to the provision of utility services; and

(ii) share similar knowledge and skill training requirements.

(2) "Utility services" includes:

(A) production, transmission, or distribution of electricity;

(B) acquisition, transportation, distribution, or storage of natural gas;

(C) provision of communications service (as defined in IC 8-1-32.5-3);

(D) treatment, storage, or distribution of water; and

(E) collection or treatment of wastewater.

(b) Not later than December 31, 2020:

(1) the state board shall, for purposes of developing sequences of courses leading to student concentrators in industries or occupational fields related to the provision of utility services under section 1.5(g) of this chapter, approve a utility career cluster; and

(2) the governor's workforce cabinet, in consultation with the state board, department, and department of workforce development, shall create one (1) or more course sequences:

(A) each of which is comprised of courses approved by the state board for purposes of college and career pathways relating to career and technical education under section 1.5(g) of this chapter; and

(B) each of which provides students with knowledge and skills necessary for employment in an industry or occupational field in the utility career cluster.

(c) In creating one (1) or more course sequences under subsection (b)(2), the governor's workforce cabinet, in consultation with the state board, department, and department of workforce development, shall:

(1) consider the impact of course sequences on the long term outcomes of students; and

(2) prioritize course sequences that lead to high wage, high demand jobs.

SECTION 5. IC 20-32-4-16 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 16. (a) Section 15(c) of this chapter and this section apply to any:**

(1) career clusters approved or amended, after July 1, 2020, by the state board; or

(2) course sequences leading to student concentrators created or amended, after July 1, 2020, by the governor's workforce cabinet in consultation with the state board, department, and department of workforce development.

(b) The governor's workforce cabinet shall do the following:

(1) Collect data each year regarding approved career clusters and course sequences to inform decision making around approving, creating, and amending current and future career clusters and course sequence requirements.

(2) Prepare and submit, not later than November 1 of each year, a report to the legislative council in an electronic format under IC 5-14-6 regarding the data collected under subdivision (1).".

Renumber all SECTIONS consecutively.

(Reference is to HB 1419 as reprinted January 31, 2020.)

and when so amended that said bill do pass.

Committee Vote: Yeas 9, Nays 0.

PERFECT, Chair

Report adopted.

REPORT OF THE PRESIDENT PRO TEMPORE

Madam President: Pursuant to Senate Rule 68(b), I hereby report that, subsequent to the adoption of the Committee Report on February 27, 2020, Senate Concurrent Resolution 28 was reassigned to the Committee on Homeland Security and Transportation.

BRAY

Report adopted.

SENATE MOTION

Madam President: I move that the following resolutions be adopted:

SCR 53 Senator L. Brown

Recognizing the significance of the construction of the Vietnam Memorial Wall at the Veterans National Memorial Shrine and Museum in Fort Wayne, Indiana.

SCR 54 Senator Bray
Fixing the date for the Second Regular Technical Session of the One Hundred Twenty First General Assembly.
SR 56 Senator Stoops
Honoring Indiana University Dance Marathon.

BRAY

Motion prevailed.

RESOLUTIONS ON FIRST READING

Senate Concurrent Resolution 53

Senate Concurrent Resolution 53, introduced by Senators L. Brown and Busch:

A CONCURRENT RESOLUTION recognizing the significance of the construction of the Vietnam Memorial Wall at the Veterans National Memorial Shrine and Museum in Fort Wayne, Indiana.

Whereas, On December 30, 2019, the Veterans National Memorial Shrine and Museum in Fort Wayne announced that it will erect a permanent replica of the traveling Washington, D.C., Vietnam Veterans Memorial;

Whereas, The replica monument wall will be part of a new Monument Plaza being constructed, which will include monuments honoring veterans of World War I, World War II, the Korean War, the Iraq War, and Gold Star Families;

Whereas, The Memorial Wall and Monument Plaza are vital parts of the Veterans National Memorial Shrine and Museum mission to remember all veterans and their sacrifices made throughout United States history; and

Whereas, Building a replica of the Vietnam Veterans Memorial in Fort Wayne will help to bring thousands of visitors to the Veterans National Memorial Shrine and Museum to remember all veterans who served in wartime: Therefore,

Be it resolved by the Senate of the General Assembly of the State of Indiana, the House of Representatives concurring:

SECTION 1. That the Indiana General Assembly recognizes the significance of the construction of the Vietnam Memorial Wall being constructed at the Veterans National Memorial Shrine and Museum in Fort Wayne, Indiana.

SECTION 2. The Secretary of the Senate is hereby directed to transmit a copy of this Resolution to the Veterans National Memorial Shrine and Museum.

The resolution was read in full and adopted by voice vote. The Chair instructed the Secretary to inform the House of the passage of the resolution. House sponsors: Representatives Carbaugh, Judy, Morris, GiaQuinta, and Abbott.

Senate Concurrent Resolution 54

Senate Concurrent Resolution 54, introduced by Senator Bray:

A CONCURRENT RESOLUTION fixing the date for the Second Regular Technical Session of the One Hundred Twenty First General Assembly.

Whereas, IC 2-2.1-1-3.5 authorizes the General Assembly to fix a date for the Second Regular Technical Session of the General Assembly;

Whereas, The General Assembly finds that it is in the best interest of the State of Indiana to fix a date for the Technical Session; and

Whereas, It is prudent to allow the President Pro Tempore of the Senate and the Speaker of the House of Representatives to jointly order that the Technical Session not convene if they determine the cost and inconvenience do not justify meeting in Technical Session: Therefore,

Be it resolved by the Senate of the General Assembly of the State of Indiana, the House of Representatives concurring:

SECTION 1. The date for the Second Regular Technical Session of the One Hundred Twenty First General Assembly is hereby fixed for Wednesday, May 13, 2020, at 1:30 p.m.

SECTION 2. The President Pro Tempore of the Senate and the Speaker of the House of Representatives may issue a joint order that the General Assembly not convene in Technical Session if they determine the cost and inconvenience of meeting in Technical Session are not justified.

The resolution was read in full and adopted by voice vote. The Chair instructed the Secretary to inform the House of the passage of the resolution. House sponsor: Representative Bosma.

Senate Resolution 56

Senate Resolution 56, introduced by Senator Stoops:

A SENATE RESOLUTION to honor Indiana University Dance Marathon (IUDM) and the students involved in the organization.

Whereas, In 1991, after eighteen-year-old Hoosier, Ryan White, lost his battle with AIDS, students at Indiana University started IUDM to honor Ryan and give back to the hospital where he received treatment, Riley Hospital for Children;

Whereas, Planning for the dance marathon and raising money for Riley Hospital is a year-long effort. Over 1,200 committee members work together to plan for the annual November marathon. Over 4,000 Indiana University students participate in this event;

Whereas, During the 36-hour long marathon, students stand on their feet in honor of the children at Riley Hospital for Children;

Whereas, Over the past 29 years, IUDM has raised over $36 million for the children at Riley Hospital. Through the years, this

money has funded both the Ryan White Infectious Disease Center and the Wells Center of Pediatric Research; and

Whereas, The tireless efforts of the students involved in IUDM to raise money and awareness For The Kids, a motto of the dance marathon, are worthy of honor and recognition: Therefore,

Be it resolved by the Senate of the General Assembly of the State of Indiana:

SECTION 1. That the Indiana Senate honors Indiana University Dance Marathon and the students involved in the organization.

SECTION 2. The Secretary of the Senate is hereby directed to transmit a copy of this Resolution to Jacob Holbrook, the President of IUDM.

The resolution was read in full and adopted by voice vote.

House Concurrent Resolution 43

House Concurrent Resolution 43, sponsored by Senator Crider:

A CONCURRENT RESOLUTION recognizing and honoring volunteer firefighters.

Whereas, These brave and dedicated volunteer firefighters have served courageously and risked their lives daily to protect their communities from the threat of fire;

Whereas, For 50 years these volunteer firefighters have answered the call when fire struck Hoosier communities, forsaking all else to protect and serve those in need;

Whereas, It takes a special dedication, a strong desire to help others, and a tireless sense of community to sacrifice precious time with family and friends to respond to the signal that a neighbor is in need;

Whereas, These brave volunteer firefighters have heroically performed, throughout 50 years of devoted service, above and beyond the call of duty to fulfill the tasks and responsibilities of fire protection;

Whereas, It is right and just to recognize the tireless contributions and sacrifices that volunteer firefighters have made to bring safety and security to all Hoosier communities; and

Whereas, The distinguished service of volunteer firefighters has brought pride and honor to the state of Indiana: Therefore,

Be it resolved by the House of Representatives of the General Assembly of the State of Indiana, the Senate concurring:

SECTION 1. That the Indiana General Assembly recognizes and honors the following volunteer firefighters that have spent 50 years protecting and serving communities across Indiana: Thomas Anderson, Lloyd Woodrick, Weldon Coslet, William H. Flanagin Jr., Jim E. Bullock, Delbert E. Collinsworth, Bill Corning, Randal E. Clinton, Rodney Isaac Cross, John P. Hardy, Jerry D. Knepp, Paul Martin, Bruce R. Bordner, Wayne A. Smith, Steven E. Barcus, Ralph M. Clary, Michael D. Schrader, Daryl R. Daniels, Jerry W. Hochstetler, Michael E. Shearer, Estill A. Ritchie, Robert E. Arnold, Keith A. Balliet, Gary E. Teeple, Daniel G. Anderson, Donald D. Kendall, Richard A. McCarty, Jimmie L. Stipp, Gail G. Sears, Robert J. Haunert, William L. Clark, Phil Dearinger, Carl V. McAnally, Donald Wells, Bryan L. Husband, George Thomas Asbury, William R. Shields, Tim Earl Jenks, Gordon W. Foster, Daniel L. Harshbarger, Larry R. Harmon, Jack C. Giles, Harry H. Green, Gary Poteet, Gary Allen Thomas, Jack Lee Duncan, John A. Pardo, Thomas A. Fulton, James A. Ennis, Don L. Benter, Henry David Taylor, James H. Lohring, John M. Buckman I, James Robert Fechtmeister, Mark A. Ellis, James M. Hardesty, Ronald N. Bell, Stephen L. Murphy, James R. Davis, Max S. Ferree, Raymond D. Spires, Richard K. Taylor, William Bland, Cleon Brahm, Michael J. Gutzwiller, James R. Vinup, Paul E. Covington Jr., John D. Goodrick, Larry Curl, and Walter Bedford Blakely.

SECTION 2. That the Principal Clerk of the House of Representatives shall transmit copies of this resolution to the volunteer firefighters named in this resolution.

The resolution was read in full and adopted by voice vote. The Chair instructed the Secretary to inform the House of the passage of the resolution.

MESSAGE FROM THE HOUSE

Madam President: I am directed by the House to inform the Senate that the House has passed, with amendments, Engrossed Senate Bills 50, 109, 237, 239, 383, 424, and 438 and the same are herewith returned to the Senate for concurrence.

M. CAROLINE SPOTTS
Principal Clerk of the House

MESSAGE FROM THE HOUSE

Madam President: I am directed by the House to inform the Senate that the House has passed, without amendments, Engrossed Senate Bills 181, 197, 249, 288, and 358 and the same are herewith returned to the Senate.

M. CAROLINE SPOTTS
Principal Clerk of the House

MESSAGE FROM THE HOUSE

Madam President: I am directed by the House to inform the Senate that the House has passed Senate Concurrent Resolution 6 and the same is herewith returned to the Senate.

M. CAROLINE SPOTTS
Principal Clerk of the House

MESSAGE FROM THE HOUSE

Madam President: I am directed by the House to inform the Senate that the House has passed House Concurrent Resolution 43 and the same is herewith transmitted for further action.

M. CAROLINE SPOTTS
Principal Clerk of the House

RESOLUTIONS ON SECOND READING

House Concurrent Resolution 18

Senator Kruse called up House Concurrent Resolution 18 for second reading. The resolution was read a second time and adopted by standing vote. The Chair instructed the Secretary to inform the House of the passage of the resolution.

ENGROSSED HOUSE BILLS ON SECOND READING

Engrossed House Bill 1052

Senator Charbonneau called up Engrossed House Bill 1052 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1059

Senator Doriot called up Engrossed House Bill 1059 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1094

Senator Glick called up Engrossed House Bill 1094 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1108

Senator Bassler called up Engrossed House Bill 1108 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1108–8)

Madam President: I move that Engrossed House Bill 1108 be amended to read as follows:

Page 6, line 36, delete "report," and insert "**report.**".

Page 6, line 37, delete "personnel report, or entity report established by this article.".

Page 9, line 31, after "each day" insert "**, beginning on the day that the court imposes the civil penalty and each day thereafter,**".

Page 12, line 4, after "each day" insert "**, beginning on the day that the court imposes the civil penalty and each day thereafter,**".

Page 13, line 38, delete "confidential".

Page 17, delete lines 5 through 13, begin a new paragraph and insert:

"(g) Except as permitted in this section, the information and materials that are part of an exit conference under subsection (b), ~~and~~ the results of an examination, including a preliminary report under subsection (d), **and management letters** are confidential until the occurrence of the earliest of the following:

(1) The final report is made public under subsection (a).

(2) The results of the examination are publicized under subsection (c)(2).

(3) The attorney general institutes an action under subsection (e) on the basis of the preliminary report.".

(Reference is to EHB 1108 as printed February 21, 2020.)

BASSLER

Motion prevailed.

SENATE MOTION
(Amendment 1108–4)

Madam President: I move that Engrossed House Bill 1108 be amended to read as follows:

Page 21, after line 2, begin a new paragraph and insert:

"SECTION 16. IC 20-24-9-3.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 3.5. (a) Notwithstanding IC 5-11-1-9(b), each year, on or before a date established by the department, each charter school and organizer shall obtain in a manner prescribed by the department an independent audit of all public and private funds received.**

(b) Not later than July 1, 2021, and each July 1 thereafter, each charter school and organizer shall submit a copy of the annual audit described in subsection (a) to the department.

SECTION 17. IC 20-51-4-13 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 13. (a) Notwithstanding IC 5-11-1-9(b), each year, on or before a date established by the department, each eligible school shall obtain in a manner prescribed by the department an independent audit of all public and private funds received.**

(b) Not later than July 1, 2021, and each July 1 thereafter, each eligible school shall submit a copy of the annual audit described in subsection (a) to the department.".

(Reference is to EHB 1108 as printed February 21, 2020.)

STOOPS

Motion failed. The bill was ordered engrossed.

Engrossed House Bill 1113

Senator Bassler called up Engrossed House Bill 1113 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1113–2)

Madam President: I move that Engrossed House Bill 1113 be amended to read as follows:

Page 41, between lines 26 and 27, begin a new paragraph and insert:

"SECTION 27. IC 6-1.1-15-17.3, AS AMENDED BY P.L.232-2017, SECTION 23, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 17.3. (a) As used in this section, "tax official" means:

(1) a township assessor;

(2) a county assessor;
(3) a county auditor;
(4) a county treasurer;
(5) a member of a county board; or
(6) any employee, contract employee, or independent contractor of an individual described in subdivisions (1) through (5).

(b) Except as provided in subsection (c), a tax official in a county may not serve as a tax representative of any taxpayer with respect to property subject to property taxes in the county before the county board of that county or the Indiana board. The prohibition under this subsection applies regardless of whether or not the individual receives any compensation for the representation or assistance.

(c) Subsection (b) does not:
(1) prohibit a contract employee or independent contractor of a tax official from serving as a tax representative before the county board or Indiana board for a taxpayer with respect to property subject to property taxes in the county unless the contract employee or independent contractor personally and substantially participated in the assessment of the property; or
(2) prohibit an individual from appearing before the county board or Indiana board regarding property owned by the individual.

(d) An individual who is a former county assessor, former township assessor, former employee or contract employee of a county assessor or township assessor, or an independent contractor formerly employed by a county assessor or township assessor may not serve as a tax representative for or otherwise assist another person in an assessment appeal before a county board or the Indiana board if:
(1) the appeal involves the assessment of property located in:
(A) the county in which the individual was the county assessor or was an employee, contract employee, or independent contractor of the county assessor; or
(B) the township in which the individual was the township assessor or was an employee, contract employee, or independent contractor of the township assessor; and
(2) while the individual was the county assessor or township assessor, was employed by or a contract employee of the county assessor or the township assessor, or was an independent contractor for the county assessor or the township assessor, the individual personally and substantially participated in the assessment of the property.
The prohibition under this subsection applies regardless of whether the individual receives any compensation for the representation or assistance. However, this subsection does not prohibit an individual from appearing before the Indiana board or county board regarding property owned by the individual.

(e) The department shall prepare and make available to taxpayers a power of attorney form that allows the owner of property that is the subject of an appeal under this article to appoint a relative (as defined in IC 2-2.2-1-17) for specific assessment years to represent the owner concerning the appeal before the county board or the department of local government finance. A relative who is appointed by the owner of the property under this subsection:
(1) may represent the owner before the county board or the department of local government finance but not the Indiana board concerning the appeal; and
(2) is not required to be certified as a tax representative in order to represent the owner concerning the appeal.

(f) Notwithstanding any other law, but subject to subsections (b) and (d) and IC 6-1.1-31.7-3.5, an individual may serve as a tax representative of any taxpayer concerning property subject to property taxes in the county:
(1) before the county board of that county, if:
(A) the individual is certified as a level one or level two assessor-appraiser under IC 6-1.1-35.5; and
(B) the taxpayer authorizes the individual to serve as the taxpayer's tax representative on a form that is:
(i) prepared by the department of local government finance; and
(ii) submitted with the taxpayer's notice to initiate an appeal; or
(2) before the county board of that county or the Indiana board, if the individual is certified as a level three assessor-appraiser under IC 6-1.1-35.5.".

Page 126, line 8, strike "2020." and insert "**2021.**".
Page 126, line 24, strike "2021." and insert "**2022.**".
Renumber all SECTIONS consecutively.
(Reference is to EHB 1113 as printed February 26, 2020.)

NIEMEYER

Motion prevailed. The bill was ordered engrossed.

Engrossed House Bill 1131

Senator Garten called up Engrossed House Bill 1131 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1131–2)

Madam President: I move that Engrossed House Bill 1131 be amended to read as follows:

Replace the effective date in each SECTION with "[EFFECTIVE UPON PASSAGE]".

Page 2, between lines 31 and 32, begin a new paragraph and insert:

"SECTION 3. IC 8-1-2-61.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 61.9. (a) As used in this section, "utility" means a municipally owned utility (as defined in IC 8-1-2-1(h)) that provides water service or wastewater service, or both, to the public.**

(b) This section applies only to a utility that on January 1, 2020, provides water service, wastewater service, or both, to property that satisfies all of the following:
(1) The property is not located within the municipality that owns or operates the utility.
(2) The property was in an unincorporated part of a township that reorganized with a municipality under IC 36-1.5 to become a part of the resulting reorganized

municipality.

(c) Notwithstanding IC 8-1-2.7 and any other law under which a water or wastewater utility is exempt from or may withdraw from the jurisdiction of the commission, a utility to which this section applies is subject to the jurisdiction of the commission with respect to:

(1) rates and charges;

(2) stocks, bonds, notes, or other evidence of indebtedness;

(3) rules; and

(4) the annual report filing requirement.

However, a utility to which this section applies may impose and collect rates and charges existing on February 1, 2020, until the rates and charges are replaced by rates and charges determined under the rate case required by subsection (d).

(d) A utility to which this section applies must file a rate case with the commission before July 1, 2020.".

Page 10, after line 8, begin a new paragraph and insert:

"SECTION 10. IC 36-9-23-25.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 25.5. Notwithstanding any other provision of this chapter, a utility to which IC 8-1-2-61.9 applies is subject to the jurisdiction of the Indiana utility regulatory commission with respect to:**

(1) rates and charges;

(2) stocks, bonds, notes, or other evidence of indebtedness;

(3) rules; and

(4) the annual report filing requirement.

SECTION 11. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1131 as printed February 25, 2020.)

J.D. FORD

Motion prevailed.

SENATE MOTION
(Amendment 1131–3)

Madam President: I move that Engrossed House Bill 1131 be amended to read as follows:

Replace the effective date in each SECTION with "[EFFECTIVE UPON PASSAGE]".

Page 1, line 3, delete "(a)".

Page 1, delete line 9.

Page 1, between lines 9 and 10, begin a new paragraph and insert:

"SECTION 2. IC 8-1-1.9-4, AS ADDED BY P.L.126-2018, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 4. (a) Notwithstanding IC 8-1-2.7 and any other law under which a water or wastewater utility is exempt from or may withdraw from the jurisdiction of the commission, a water or wastewater utility that is organized ~~as a legal entity~~ after June 30, 2018, is subject to the jurisdiction of the commission with respect to:

(1) rates and charges;

(2) stocks, bonds, notes, or other evidence of indebtedness;

(3) rules; and

(4) the annual report filing requirement;

for the period of ten (10) years beginning on the day on which the water or wastewater utility is organized. ~~as a legal entity.~~

(b) This section does not affect:

(1) any statutes requiring or permitting a water or wastewater utility to petition the commission before providing service to the public; or

(2) the commission's jurisdiction regarding statutes and petitions referred to in subdivision (1).".

Page 10, after line 8, begin a new paragraph and insert:

"SECTION 10. IC 36-9-25-11.3, AS ADDED BY P.L.175-2006, SECTION 24, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 11.3. (a) This section applies to:

(1) a board and district created under section 3(b)(2) of this chapter; **and**

(2) a board and district to which the following apply:

(A) The district is within the jurisdiction of a department established under section 1(a)(2) of this chapter.

(B) The district is under an order or party to an agreement with one (1) or more state or federal agencies to remediate environmental conditions.

(b) For purposes of this section, "commission" refers to the Indiana utility regulatory commission created by IC 8-1-1-2.

(c) For purposes of this section, "fees" means fees:

(1) for the treatment and disposal of sewage and other waste discharged into the sewer system of the district; and

(2) related to property that is subject to full taxation.

(d) Fees do not take effect until the fees are:

(1) approved by the board; and

(2) either:

(A) approved in an ordinance adopted by the legislative body of each municipality in the district; or

(B) established by the commission under this section.

(e) Not earlier than thirty (30) days after fees are approved under subsection (d)(1), the board may petition the commission to establish the fees under:

(1) the procedures set forth in IC 8-1-2; and

(2) subsection (f).

(f) The commission shall observe the following requirements when establishing fees for a district:

(1) Fees must be sufficient to enable the district to furnish reasonably adequate services and facilities.

(2) Fees for a service must be nondiscriminatory, reasonable, and just and must produce sufficient revenue, together with taxes levied under this chapter, to do the following:

(A) Pay all legal and other necessary expenses incident to the operation of the utility, including the following:

(i) Maintenance costs.

(ii) Operating charges.

(iii) Upkeep.

(iv) Repairs.

(v) Depreciation.

(vi) Interest charges on bonds or other obligations, including leases.

(B) Provide a sinking fund for the liquidation of bonds or other obligations, including leases.

(C) Provide a debt service reserve for bonds or other obligations, including leases, in an amount established by the board. The amount may not exceed the maximum annual debt service on the bonds or obligations or the maximum annual lease rentals, if any.

(D) Provide adequate money for working capital.

(E) Provide adequate money for making extensions and replacements to the extent not provided for through depreciation in clause (A).

(F) Provide money for the payment of taxes that may be assessed against the district.

(3) The fees charged by the district must produce an income sufficient to maintain district property in a sound physical and financial condition to render adequate and efficient service. Fees may not be too low to meet these requirements.

(4) If the board petitions the commission under subsection (e), the fees established must produce a reasonable return on the sanitary district facilities.

(5) Fees other than fees established for a municipally owned utility taxed under IC 6-1.1-8-3 must be sufficient to compensate the municipality for taxes that would be due the municipality on the utility property located in the municipality if the property were privately owned.

(6) The commission must grant a request by the board to postpone an increase in fees until after the occurrence of a future event.

(g) The board may transfer fees in lieu of taxes established under subsection (f)(5) to the general fund of the appropriate municipality.

(h) Fees established by the commission under this section take effect to the same extent as if the fees were approved by an ordinance adopted by the legislative body of each municipality in the district.

SECTION 11. **An emergency is declared for this act.**".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1131 as printed February 25, 2020.)

GARTEN

Motion prevailed. The bill was ordered engrossed.

Engrossed House Bill 1174

Senator Crider called up Engrossed House Bill 1174 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1176

Senator Ruckelshaus called up Engrossed House Bill 1176 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1176–1)

Madam President: I move that Engrossed House Bill 1176 be amended to read as follows:

Replace the effective date in SECTION 1 with "[EFFECTIVE JANUARY 1, 2021]".

Replace the effective date in SECTION 9 with "[EFFECTIVE JANUARY 1, 2021]".

Replace the effective date in SECTION 12 with "[EFFECTIVE JANUARY 1, 2021]".

Page 2, line 13, reset in roman "shall".

Page 2, line 13, delete "may".

Page 2, line 15, after "IC 12-9-1-1." insert "**Except when the monthly fee is less than the product determined under IC 12-12.7-2-23(b),**".

Page 2, line 15, delete "The" and insert "the".

Page 2, line 15, reset in roman "shall".

Page 2, line 15, delete "may".

Page 2, line 27, after "family" insert "**service plan, if those services are a covered benefit under the plan once**".

Page 2, line 28, delete "service plan once".

Page 2, line 31, delete "subsection (i)." and insert "**this section.**".

Page 6, between lines 28 and 29, begin a new paragraph and insert:

"SECTION 9. IC 12-12.7-2-23 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 23. (a) As used in this section, "covered plan" means a plan providing coverage for early intervention services under IC 5-10-8-7.3, IC 21-38-6-1, or IC 27-8-27-6.**

(b) The division may not be paid by a covered plan for early intervention services provided under this chapter at a rate that is less than the product of the following:

(1) The covered plan's CPT code (as defined by 27-1-37.5-3) rate for each service provided; multiplied by

(2) The frequency of each service.".

Page 6, line 31, delete "Subject to IC 12-12.7-2-23,".

Page 6, line 32, delete "an" and insert "An".

Page 6, line 33, reset in roman "shall".

Page 6, line 33, delete "may".

Page 6, line 34, after "services." insert "**Except when the monthly fee is less than the product determined under IC 12-12.7-2-23(b),**".

Page 6, line 34, delete "The" and insert "**the**".

Page 6, line 35, reset in roman "shall".

Page 6, line 36, delete "may".

Page 6, line 38, after "family" insert "**service plan, if those services are a covered benefit under the plan once**".

Page 6, line 39, delete "service plan once".

Page 6, line 42, delete "subsection (b)." and insert "**this section.**".

Page 7, line 19, after "department" insert "**of insurance**".

Page 7, line 39, after "department" insert "**of insurance**".

Page 8, line 1, after "(a)" delete "Subject to IC 12-12.7-2-23".

Page 8, line 2, delete "a" and insert "**A**".

Page 8, line 3, reset in roman "shall".

Page 8, line 3, delete "may".

Page 8, line 4, after "services." insert "**Except when the monthly fee is less than the product determined under IC 12-12.7-2-23(b),**".

Page 8, line 4, delete "The" and insert "the".

Page 8, line 5, reset in roman "shall".

Page 8, line 5, delete "may".

Page 8, line 8, after "family" insert "**service plan, if those services are a covered benefit under the plan once**".

Page 8, line 9, delete "service plan once".

Page 9, line 6, delete "subject to state or federal regulation." and insert "**a self-funded or fully-funded plan.**".

Renumber all SECTIONS consecutively.

(Reference is to EHB as printed February 25, 2020.)

RUCKELSHAUS

Motion prevailed.

SENATE MOTION
(Amendment 1176–2)

Madam President: I move that Engrossed House Bill 1176 be amended to read as follows:

Page 2, delete lines 32 through 42, begin a new paragraph and insert:

"SECTION 2. IC 12-12.7-2-3, AS AMENDED BY SEA 238-2020, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) As used in this chapter, "early intervention services" means developmental services that meet the following conditions:

(1) Are provided under public supervision.

(2) Are selected in collaboration with the parents.

(3) Are provided at no cost, except when federal or state law provides for a system of payments by the families, including a sliding fee schedule.

(4) Are designed to meet the:

(A) developmental needs of infants and toddlers with disabilities in at least one (1) of the areas specified in section 4(a)(1) of this chapter; and

(B) needs of the family to assist appropriately the development of the infant or toddler as identified by the individualized family service plan adopted in accordance with 20 U.S.C. 1436.

(5) Meet all required state and federal standards.

(6) Are provided by qualified personnel, including the following:

(A) Early childhood special educators, early childhood educators, and special educators, including teachers of children with:

(i) hearing impairments, including deafness; and

(ii) vision impairments, including blindness.

(B) Speech and language pathologists and audiologists.

(C) Occupational therapists.

(D) Physical therapists.

(E) Psychologists.

(F) Social workers.

(G) Nurses.

(H) Nutritionists.

(I) Family therapists.

(J) Orientation and mobility specialists.

(K) Pediatricians and other physicians for diagnostic and evaluation purposes.

(L) Registered dieticians.

(M) Vision specialists, including ophthalmologists and optometrists.

(7) To the maximum extent appropriate, are provided in natural environments, including the home and community settings in which children without disabilities participate.

(8) Are provided in conformity with an individualized family service plan adopted in accordance with 20 U.S.C. 1436.

(b) The term includes the following services:

(1) Family training, counseling, and home visits.

(2) Special instruction.

(3) Speech and language pathology, audiology, and sign language and cued language services.

(4) Occupational therapy.

(5) Physical therapy.

(6) Psychological services.

(7) Service coordination services.

(8) Medical services only for diagnostic, evaluation, or consultation purposes.

(9) Early identification, screening, and assessment services.

(10) Other health services necessary for an infant or a toddler to benefit from the services.

(11) Vision services.

(12) Supportive technology services.

(13) Transportation and related costs that are necessary to enable an infant or a toddler and the infant's or toddler's family to receive early intervention services.

(14) Habilitative services that are necessary to enable an infant or toddler to keep, learn, improve, or recover skills and functioning for daily living, including skills and functioning affected by a developmental delay.

~~(14)~~ **(15)** Assistive technology devices and services.

~~(15)~~ **(16)** Nursing services.

~~(16)~~ **(17)** Nutrition services.

~~(17)~~ **(18)** Social work services.

(c) This section does not provide an exhaustive list of the services that may constitute early intervention services or the qualified personnel that may provide early intervention services. Nothing in this section prohibits an individualized family service plan from including another type of:

(1) service as an early intervention service if the service meets the criteria set forth in subsection (a); or

(2) personnel that may provide early intervention services as long as the personnel meet the requirements of 34 CFR 303.31.".

Page 3, delete lines 1 through 40.

Renumber all SECTIONS consecutively.

(Reference is to EHB 1176 as printed February 25, 2020.)

RUCKELSHAUS

Motion prevailed. The bill was ordered engrossed.

Engrossed House Bill 1222

Senator Walker called up Engrossed House Bill 1222 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1222–1)

Madam President: I move that Engrossed House Bill 1222 be amended to read as follows:

Page 23, line 12, delete "." and insert "**if the petition was unanimously approved by the entire membership of the county election board or the board of elections and registration.**".

(Reference is to EHB 1222 as printed February 19, 2020.)

NIEMEYER

Motion prevailed.

SENATE MOTION
(Amendment 1222–13)

Madam President: I move that Engrossed House Bill 1222 be amended to read as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 3-5-2-40.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 40.4. "Presidential election year" refers to a year in which an election for electors for President of the United States is held.**".

Page 12, delete lines 16 through 42.

Delete pages 13 through 15.

Page 16, delete lines 1 through 19.

Page 21, between lines 23 and 24, begin a new paragraph and insert:

"SECTION 30. IC 3-10-8-1, AS AMENDED BY P.L.219-2013, SECTION 28, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. A special election shall be held in the following cases:

(1) Whenever two (2) or more candidates for a federal, state, legislative, circuit, or school board office receive the highest and an equal number of votes for the office, except as provided in Article 5, Section 5 of the Constitution of the State of Indiana or in IC 20.

(2) Whenever a vacancy occurs in the office of United States Senator, as provided in IC 3-13-3-1.

(3) Whenever a vacancy occurs in the office of United States Representative unless the vacancy occurs less than seventy-four (74) days before a general election.

(4) Whenever a vacancy occurs in any local office the filling of which is not otherwise provided by law.

(5) Whenever required by law for a public question. **Notwithstanding any other law, a special election for a local public question may not be held in a year after a presidential election year.**

(6) Whenever ordered by a court under IC 3-12-8-17 or the state recount commission under IC 3-12-11-18.

(7) Whenever required under IC 3-13-5 to fill a vacancy in a legislative office unless the vacancy occurs less than seventy-four (74) days before a general election.

SECTION 31. IC 3-10-8-1.2 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 1.2. (a) As used in this section, "applicable statute" refers to either of the following:**

(1) IC 20-46-1 (referendum tax levy).

(2) IC 20-46-9 (school safety referendum tax levy).

(b) As used in this section, "levy" refers to a tax levy imposed, reimposed, or extended by a school corporation under an applicable statute.

(c) Notwithstanding section 1(5) of this chapter, a school corporation may reimpose or extend a levy in 2021, 2025, or 2027 under an applicable statute if the school corporation would have been permitted to reimpose or extend the levy under this title and the applicable statute, both as in effect before January 1, 2020.

(d) If a school corporation reimposes or extends a levy as provided in subsection (c), the school corporation may not further reimpose or extend that levy for a period of time permitted under the applicable statute that expires during a year after a presidential election year.

(e) This section expires January 1, 2028.".

Page 22, delete lines 9 through 24.

Page 47, delete lines 28 through 42.

Page 48, delete lines 1 through 25.

Page 50, delete lines 19 through 42, begin a new paragraph and insert:

"SECTION 73. IC 6-1.1-20-3.6, AS AMENDED BY P.L.246-2017, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3.6. (a) Except as provided in sections 3.7 and 3.8 of this chapter, this section applies only to a controlled project described in section 3.5(a) of this chapter.

(b) If a sufficient petition requesting the application of the local public question process has been filed as set forth in section 3.5 of this chapter, a political subdivision may not impose property taxes to pay debt service on bonds or lease rentals on a lease for a controlled project unless the political subdivision's proposed debt service or lease rental is approved ~~in an election on~~ **by** a local public question ~~held~~ under this section.

(c) Except as provided in subsection (k), the following question shall be submitted to the eligible voters at the election conducted under this section:

"Shall _____ (insert the name of the political subdivision) issue bonds or enter into a lease to finance _____ (insert a brief description of the controlled project), which is estimated to cost not more than _____ (insert the total cost of the project) and is estimated to increase the property tax rate for debt service by _____ (insert increase in tax rate as determined by the department of local government finance)?".

The public question must appear on the ballot in the form approved by the county election board. If the political subdivision proposing to issue bonds or enter into a lease is located in more than one (1) county, the county election board of each county shall jointly approve the form of the public question that will appear on the ballot in each county. The form approved by the county election board may differ from the language certified to the county election board by the county auditor. If the county election board approves the language of a public question under this subsection, the county election board shall submit the language to the department of local government finance for review.

(d) The department of local government finance shall review the language of the public question to evaluate whether the description of the controlled project is accurate and is not biased against either a vote in favor of the controlled project or a vote

against the controlled project. The department of local government finance may either approve the ballot language as submitted or recommend that the ballot language be modified as necessary to ensure that the description of the controlled project is accurate and is not biased. The department of local government finance shall certify its approval or recommendations to the county auditor and the county election board not more than ten (10) days after the language of the public question is submitted to the department for review. If the department of local government finance recommends a modification to the ballot language, the county election board shall, after reviewing the recommendations of the department of local government finance, submit modified ballot language to the department for the department's approval or recommendation of any additional modifications. The public question may not be certified by the county auditor under subsection (e) unless the department of local government finance has first certified the department's final approval of the ballot language for the public question.

(e) The county auditor shall certify the finally approved public question under IC 3-10-9-3 to the county election board of each county in which the political subdivision is located. The certification must occur not later than noon:

(1) seventy-four (74) days before a primary election if the public question is to be placed on the primary or municipal primary election ballot; or

(2) August 1 if the public question is to be placed on the general or municipal election ballot.

Subject to the certification requirements and deadlines under this subsection and except as provided in subsection (j), the public question shall be placed on the ballot at the next primary election, general election, or municipal election in which all voters of the political subdivision are entitled to vote. ~~However, if a primary election, general election, or municipal election will not be held during the first year in which the public question is eligible to be placed on the ballot under this section and if the political subdivision requests the public question to be placed on the ballot at a special election, the public question shall be placed on the ballot at a special election to be held on the first Tuesday after the first Monday in May or November of the year. The certification must occur not later than noon seventy-four (74) days before a special election to be held in May (if the special election is to be held in May) or noon on August 1 (if the special election is to be held in November). The fiscal body of the political subdivision that requests the special election shall pay the costs of holding the special election. The county election board shall give notice under IC 5-3-1 of a special election conducted under this subsection. A special election conducted under this subsection is under the direction of the county election board. The county election board shall take all steps necessary to carry out the special election.~~

(f) The circuit court clerk shall certify the results of the public question to the following:

(1) The county auditor of each county in which the political subdivision is located.

(2) The department of local government finance.

(g) Subject to the requirements of IC 6-1.1-18.5-8, the political subdivision may issue the proposed bonds or enter into the proposed lease rental if a majority of the eligible voters voting on the public question vote in favor of the public question.

(h) If a majority of the eligible voters voting on the public question vote in opposition to the public question, both of the following apply:

(1) The political subdivision may not issue the proposed bonds or enter into the proposed lease rental.

(2) Another public question under this section on the same or a substantially similar project may not be submitted to the voters earlier than:

(A) except as provided in clause (B), seven hundred (700) days after the date of the public question; or

(B) three hundred fifty (350) days after the date of the election, if a petition that meets the requirements of subsection (m) is submitted to the county auditor.

(i) IC 3, to the extent not inconsistent with this section, applies to an election held under this section.

(j) A political subdivision may not divide a controlled project in order to avoid the requirements of this section and section 3.5 of this chapter. A person that owns property within a political subdivision or a person that is a registered voter residing within a political subdivision may file a petition with the department of local government finance objecting that the political subdivision has divided a controlled project into two (2) or more capital projects in order to avoid the requirements of this section and section 3.5 of this chapter. The petition must be filed not more than ten (10) days after the political subdivision gives notice of the political subdivision's decision under section 3.5 of this chapter or a determination under section 5 of this chapter to issue bonds or enter into leases for a capital project that the person believes is the result of a division of a controlled project that is prohibited by this subsection. If the department of local government finance receives a petition under this subsection, the department shall, not later than thirty (30) days after receiving the petition, make a final determination on the issue of whether the political subdivision divided a controlled project in order to avoid the requirements of this section and section 3.5 of this chapter. If the department of local government finance determines that a political subdivision divided a controlled project in order to avoid the requirements of this section and section 3.5 of this chapter and the political subdivision continues to desire to proceed with the project, the political subdivision may appeal the determination of the department of local government finance to the Indiana board of tax review. A political subdivision shall be considered to have divided a capital project in order to avoid the requirements of this section and section 3.5 of this chapter if the result of one (1) or more of the subprojects cannot reasonably be considered an independently desirable end in itself without reference to another capital project. This subsection does not prohibit a political subdivision from undertaking a series of capital projects in which the result of each capital project can reasonably be considered an independently desirable end in itself without reference to another capital project.

(k) This subsection applies to a political subdivision for which a petition requesting a public question has been submitted under

section 3.5 of this chapter. The legislative body (as defined in IC 36-1-2-9) of the political subdivision may adopt a resolution to withdraw a controlled project from consideration in a public question. If the legislative body provides a certified copy of the resolution to the county auditor and the county election board not later than sixty-three (63) days before the election at which the public question would be on the ballot, the public question on the controlled project shall not be placed on the ballot and the public question on the controlled project shall not be held, regardless of whether the county auditor has certified the public question to the county election board. If the withdrawal of a public question under this subsection requires the county election board to reprint ballots, the political subdivision withdrawing the public question shall pay the costs of reprinting the ballots. If a political subdivision withdraws a public question under this subsection that would have been held at a special election and the county election board has printed the ballots before the legislative body of the political subdivision provides a certified copy of the withdrawal resolution to the county auditor and the county election board, the political subdivision withdrawing the public question shall pay the costs incurred by the county in printing the ballots. If a public question on a controlled project is withdrawn under this subsection, a public question under this section on the same controlled project or a substantially similar controlled project may not be submitted to the voters earlier than three hundred fifty (350) days after the date the resolution withdrawing the public question is adopted.

(l) If a public question regarding a controlled project is placed on the ballot to be voted on at an election under this section, the political subdivision shall submit to the department of local government finance, at least thirty (30) days before the election, the following information regarding the proposed controlled project for posting on the department's Internet web site:

(1) The cost per square foot of any buildings being constructed as part of the controlled project.

(2) The effect that approval of the controlled project would have on the political subdivision's property tax rate.

(3) The maximum term of the bonds or lease.

(4) The maximum principal amount of the bonds or the maximum lease rental for the lease.

(5) The estimated interest rates that will be paid and the total interest costs associated with the bonds or lease.

(6) The purpose of the bonds or lease.

(7) In the case of a controlled project proposed by a school corporation:

(A) the current and proposed square footage of school building space per student;

(B) enrollment patterns within the school corporation; and

(C) the age and condition of the current school facilities.

(m) If a majority of the eligible voters voting on the public question vote in opposition to the public question, a petition may be submitted to the county auditor to request that the limit under subsection (h)(2)(B) apply to the holding of a subsequent public question by the political subdivision. If such a petition is submitted to the county auditor and is signed by the lesser of:

(1) five hundred (500) persons who are either owners of property within the political subdivision or registered voters residing within the political subdivision; or

(2) five percent (5%) of the registered voters residing within the political subdivision;

the limit under subsection (h)(2)(B) applies to the holding of a second public question by the political subdivision and the limit under subsection (h)(2)(A) does not apply to the holding of a second public question by the political subdivision.".

Delete pages 51 through 58.

Page 59, delete lines 1 through 40.

Page 59, delete lines 41 through 42, begin a new paragraph and insert:

"SECTION 74. IC 20-23-4-21, AS AMENDED BY P.L.244-2017, SECTION 22, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 21. (a) If the chairperson of the county committee does not receive the certification or combined certifications under section 20(f) of this chapter not later than ninety (90) days after the receipt by the county committee of the plan referred to in section 20(a) of this chapter, the judge of the circuit court of the county from which the county committee submitting the plan was appointed shall:

(1) certify the public question under IC 3-10-9-3; and

(2) order the county election board to ~~conduct a special election in which~~ **place** the **public question on the ballot at the next primary, general, or municipal election at which** registered voters residing in the proposed community school corporation may vote to determine whether the corporation will be created.

~~(b) If:~~

~~(1) a primary election at which county officials are nominated; or~~

~~(2) a general election at which county officials are elected;~~

~~and for which the question can be certified in compliance with IC 3-10-9-3 is to be held not later than six (6) months after the receipt by the chairperson of the county committee of the plan referred to in section 20(a) of this chapter, regardless of whether the ninety (90) day period referred to in subsection (a) has expired, the judge shall order the county election board to conduct the special election to be held in conjunction with the primary or general election.~~

~~(c) If a primary or general election will not be held in the six (6) month period referred to in subsection (b), the special election shall be held:~~

~~(1) not earlier than sixty (60) days; and~~

~~(2) not later than one hundred twenty (120) days;~~

~~after the expiration of the ninety (90) day period referred to in subsection (a).~~

~~(d)~~ **(b)** The county election board shall give notice under IC 5-3-1 of ~~the special election~~ **a public question** referred to in subsection (a).

~~(e)~~ **(c)** The notice referred to in subsection ~~(d)~~ **(b)** of a ~~special election~~ **public question** must:

(1) clearly state that the election is called to afford the registered voters an opportunity to approve or reject a proposal for the formation of a community school corporation;

(2) contain:

(A) a general description of the boundaries of the community school corporation as set out in the plan;

(B) a statement of the terms of adjustment of:

(i) property;

(ii) assets;

(iii) debts; and

(iv) liabilities;

of an existing school corporation that is to be divided in the creation of the community school corporation;

(C) the name of the community school corporation;

(D) the number of members comprising the board of school trustees; and

(E) the method of selecting the board of school trustees of the community school corporation; and

(3) designate the date, time, and voting place or places at which the election will be held.

~~(f) A special~~ **(d) An** election ~~referred to in~~ **at which a public question is submitted to the voters under** subsection (a) is under the direction of the county election board in the county. ~~The election board shall take all steps necessary to carry out the special election. If the special election is not conducted at a primary or general election, the cost of conducting the election is:~~

~~(1) charged to each component school corporation embraced in the community school corporation in the same proportion as the component school corporation's assessed valuation is to the total assessed valuation of the community school corporation; and~~

~~(2) paid:~~

~~(A) from the school corporation's operations fund not otherwise appropriated of; and~~

~~(B) without appropriation by;~~

~~each component school corporation.~~

~~If a component school corporation is to be divided and its territory assigned to two (2) or more community corporations, the component school corporation's cost of the special election is in proportion to the corporation's assessed valuation included in the community school corporation.~~

~~(g)~~ **(e)** The county election board shall place the public question on the ballot in the form prescribed by IC 3-10-9-4. The public question must state "Shall the (here insert name) community school corporation be formed as provided in the Reorganization Plan of the County Committee for the Reorganization of School Corporations?". Except as otherwise provided in this chapter, the election is governed by IC 3.

~~(h)~~ **(f)** If a majority of the votes cast ~~at a special election referred to in subsection (a)~~ on the public question are in favor of the formation of the corporation, a community school corporation is created and takes effect on the earlier of:

(1) the July 1; or

(2) the January 1;

that next follows the date of publication of the notice referred to in subsection ~~(d).~~ **(b).**

~~(i)~~ **(g)** If a public official fails to perform a duty required of the official under this section within the time prescribed in this section, the omission does not invalidate the proceedings taken under this section.

~~(j)~~ **(h)** An action:

(1) to contest the validity of the formation or creation of a community school corporation under this section;

(2) to declare that a community school corporation:

(A) has not been validly formed or created; or

(B) is not validly existing; or

(3) to enjoin the operation of a community school corporation;

may not be instituted later than thirty (30) days after the date of the ~~special~~ election referred to in subsection (a).

SECTION 75. IC 20-23-6-5, AS AMENDED BY P.L.278-2019, SECTION 169, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 5. (a) If a petition is filed in one (1) or more of the school corporations protesting consolidation as provided in this chapter by the ~~legal~~ voters of any school corporation the governing body of which proposes to consolidate, the governing body in each school corporation in which a protest petition is filed shall certify the public question to each county election board of the county in which the school corporation is located. The county election board shall ~~call an election of the~~ **place a public question on the ballot at the next primary, general, or municipal election asking the** voters of the school corporation ~~to determine~~ if ~~a majority of~~ the ~~legal~~ voters of the corporation ~~is in~~ favor ~~of~~ consolidating the school corporations.

(b) If a protest is filed in more than one (1) school corporation, the elections shall be held on the same day. Each county election board shall give notice by publication once each week for two (2) consecutive weeks in a newspaper of general circulation in the school corporation. If a newspaper is not published in the:

(1) township;

(2) town; or

(3) city;

the notice shall be published in the nearest newspaper published in the county or counties, **stating** that ~~on a day and at an hour to be named in the notice, the polls will be open at the usual voting places in the various precincts in the corporation for taking the vote of the legal~~ **a public question will be on the ballot asking the** voters ~~upon~~ whether the school corporation shall be consolidated with the other school corporations joining in the resolution.

~~(c) The public question shall be placed on the ballot in the form provided by IC 3-10-9-4 and must state: "Shall (insert name of school corporation) be consolidated with (insert names of other school corporations)?".~~

~~(d)~~ **(c)** Notice shall be given not later than thirty (30) days ~~after the petition is filed. The election shall be held not less than ten (10) days or more than twenty (20) days after the last publication of the notice.~~ **before the date of the election.**

~~(e)~~ **(d)** The governing body of each school corporation in which an election is held is bound by the majority vote of those voting. ~~However, if the election falls within a period of not more than six (6) months before a primary or general election, the election shall be held concurrently with the primary or general election if the public question is certified to the county election board not later than the deadline set forth in IC 3-10-9-3.~~

~~(f)~~ **(e)** If a majority of those voting in any one (1) school corporation votes against the plan of consolidation, the plan fails. However, the failure does not prevent any or all the school corporations from taking further initial action for the consolidation of school corporations under this chapter.".

Delete pages 60 through 63.

Page 64, delete lines 1 through 15.

Page 65, delete lines 10 through 42, begin a new paragraph and insert:

"SECTION 77. IC 20-46-1-14, AS AMENDED BY P.L.278-2019, SECTION 175, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 14. ~~(a)~~ The referendum shall be held ~~in~~ **at** the next primary election, general election, or municipal election in which all the registered voters who are residents of the appellant school corporation are entitled to vote after certification of the question under IC 3-10-9-3. The certification of the question must occur not later than noon:

(1) seventy-four (74) days before a primary election if the question is to be placed on the primary or municipal primary election ballot; or

(2) August 1 if the question is to be placed on the general or municipal election ballot.

~~(b) However, if a primary election, general election, or municipal election will not be held during the first year in which the public question is eligible to be placed on the ballot under this chapter and if the appellant school corporation requests the public question to be placed on the ballot at a special election, the public question shall be placed on the ballot at a special election to be held on the first Tuesday after the first Monday in May or November of the year. The certification must occur not later than noon:~~

~~(1) sixty (60) days before a special election to be held in May (if the special election is to be held in May); or~~

~~(2) on August 1 (if the special election is to be held in November).~~

~~(c) If the referendum is not conducted at a primary election, general election, or municipal election, the appellant school corporation in which the referendum is to be held shall pay all the costs of holding the referendum.~~

SECTION 78. IC 20-46-9-14, AS ADDED BY P.L.272-2019, SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 14. ~~(a)~~ The referendum shall be held in the next primary election, general election, or municipal election in which all the registered voters who are residents of the school corporation are entitled to vote after certification of the question under IC 3-10-9-3. The certification of the question must occur not later than noon:

(1) sixty (60) days before a primary election if the question is to be placed on the primary or municipal primary election ballot; or

(2) August 1 if the question is to be placed on the general or municipal election ballot.

~~(b) However, if a primary election, general election, or municipal election will not be held during the first year in which the public question is eligible to be placed on the ballot under this chapter and if the school corporation requests the public question to be placed on the ballot at a special election, the public question shall be placed on the ballot at a special election to be held on the first Tuesday after the first Monday in May or November of the year. The certification must occur not later than noon:~~

~~(1) sixty (60) days before a special election to be held in May (if the special election is to be held in May); or~~

~~(2) August 1 (if the special election is to be held in November).~~

~~(c) If the referendum is not conducted at a primary election, general election, or municipal election, the school corporation in which the referendum is to be held shall pay all the costs of holding the referendum.~~".

Page 66, delete lines 1 through 23.

Page 68, line 32, after "next" insert "**primary, general, or municipal**".

Page 68, line 32, after "election" insert "**.**".

Page 68, line 32, delete "permitted under IC 3-10-9-3(a).".

Page 71, line 32, after "next" insert "**primary, general, or municipal**".

Page 71, line 32, after "election" insert ".".

Page 71, line 32, delete "permitted".

Page 71, line 33, delete "under IC 3-10-9-3(a).".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1222 as printed February 19, 2020.)

WALKER

Motion prevailed.

SENATE MOTION
(Amendment 1222–4)

Madam President: I move that Engrossed House Bill 1222 be amended to read as follows:

Page 3, delete lines 34 through 42, begin a new paragraph and insert:

"SECTION 4. IC 3-6-5-14, AS AMENDED BY P.L.258-2013, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 14. (a) Each county election board, in addition to duties otherwise prescribed by law, shall do the following:

(1) Conduct all elections and administer the election laws within the county, except as provided in IC 3-8-5 ~~and IC 3-10-7~~ **(before its expiration)** for town conventions and municipal elections in certain small towns.

(2) Prepare all ballots.

(3) Distribute all ballots to all of the precincts in the county.

(b) Not later than the Monday before distributing ballots and voting systems to the precincts in the county, the county election board shall notify the county chairman of each major political party and, upon request, the chairman of any other bona fide political party in the county, that sample ballots are available for inspection.".

Page 4, delete lines 1 through 5.

Page 5, line 25, after "IC 3-8-2" delete ".".

Page 5, line 25, reset in roman "or IC 3-8-5.".

Page 5, line 25, after "IC 3-8-5" delete "." and insert "**(before its expiration).**".

Page 5, line 30, reset in roman "IC 3-8-5,".

Page 5, line 30, after "IC 3-8-5" delete "," and insert "**(before**

its expiration),".

Page 8, delete lines 13 through 15, begin a new paragraph and insert:

"SECTION 11. IC 3-8-5-18 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 18. This chapter expires January 1, 2021.**".

Page 8, delete lines 31 through 39, begin a new paragraph and insert:

"SECTION 13. IC 3-8-7-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 3. (a) Except as provided in subsection (b), an error in certification discovered before sixty (60) days before a general election shall be corrected by the public officials charged with the duties of certification.

(b) An error in certification of candidates for a town office under IC 3-8-5 **(before its expiration)** discovered before September 18 before a town election shall be corrected by the public officials charged with the duties of certification.".

Page 10, line 42, reset in roman "3-8-5-13 or".

Page 10, line 42, after "IC 3-8-5-13" insert "**(before its expiration)**".

Page 11, delete lines 2 through 28, begin a new paragraph and insert:

"SECTION 17. IC 3-8-7-28, AS AMENDED BY P.L.216-2015, SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 28. (a) Except as provided in subsections (b) and (c), if a nominee certified under this chapter, IC 3-8-5 **(before its expiration),** IC 3-8-6, or IC 3-10-1 desires to withdraw as the nominee, the nominee must file a notice of withdrawal in writing with the public official with whom the certificate of nomination was filed by noon:

(1) July 15 before a general or municipal election;

(2) August 1 before a municipal election in a town subject to IC 3-8-5-10 **(before its expiration);**

(3) on the date specified for town convention nominees under IC 3-8-5-14.5 **(before its expiration);**

(4) on the date specified for declared write-in candidates under IC 3-8-2-2.7;

(5) on the date specified for a school board candidate under IC 3-8-2.5-4; or

(6) forty-five (45) days before a special election.

(b) A candidate who is disqualified from being a candidate under IC 3-8-1-5 must file a notice of withdrawal immediately upon becoming disqualified. IC 3-8-8-7 and the filing requirements of subsection (a) do not apply to a notice of withdrawal filed under this subsection.

(c) A candidate who has moved from the election district the candidate sought to represent must file a notice of withdrawal immediately after changing the candidate's residence. IC 3-8-8-7 and the filing requirements of subsection (a) do not apply to a notice of withdrawal filed under this subsection.".

Page 11, line 34, after "IC 3-8-2" delete ";".

Page 11, line 34, reset in roman "or IC 3-8-5;".

Page 11, line 34, after "IC 3-8-5" delete ";" and insert "**(before its expiration);**".

Page 16, line 25, after "is" insert ":".

Page 16, line 26, reset in roman "(1)".

Page 16, line 26, after "IC 3-8-2-5" delete "." and insert ";".

Page 16, line 26, reset in roman "and".

Page 16, line 27, reset in roman "(2) not a municipal office subject to IC 3-8-5-17".

Page 16, line 27, after "IC 3-8-5-17" insert "**(before its expiration).**".

Page 35, line 13, after "at" insert ":".

Page 35, line 14, reset in roman "(A)".

Page 35, line 14, after "IC 3-8-4" insert ";".

Page 35, line 14, reset in roman "or".

Page 35, line 15, reset in roman "(B) a town convention conducted under IC 3-8-5;".

Page 35, line 15, delete ";" and insert "**(before its expiration);**".

Page 43, delete lines 23 through 33, begin a new paragraph and insert:

"SECTION 62. IC 3-13-1-18 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 18. (a) If a candidate vacancy occurs in a town subject to IC 3-8-5 **(before its expiration)** for any office on the ticket of a political party whose candidates were selected by petition of nomination, the vacancy may be filled only as prescribed by this section.

(b) To fill the vacancy, the town chairman of the party must file a certificate of candidate selection together with the consent required by section 14 of this chapter with the official with whom certificates must be filed. The certificate of candidate selection must be filed not later than the date and hour that a certificate of nomination by a town convention must be filed under IC 3-8-5-13 **(before its expiration).**".

Page 44, reset in roman lines 31 through 32.

Page 44, line 32, after "IC 3-8-5-14.7" delete "." and insert "**(before their expiration).**".

Page 44, line 33, reset in roman "(c)".

Page 44, line 33, delete "(b)".

Page 44, line 40, reset in roman "(d)".

Page 44, line 40, delete "(c)".

Page 45, line 5, reset in roman "(e)".

Page 45, line 5, delete "(d)".

Page 47, delete lines 25 through 27, begin a new paragraph and insert:

"SECTION 69. IC 3-14-2-30 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 30. **(a)** A person who knowingly votes at a town convention in violation of IC 3-8-5-11(c) commits a Class A misdemeanor.

(b) This section expires January 1, 2021.".

Page 68, delete lines 16 through 17, begin a new paragraph and insert:

"SECTION 90. IC 35-52-3-43, AS ADDED BY P.L.169-2014, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 43. **(a)** IC 3-14-2-30 defines a crime concerning voting.

(b) This section expires January 1, 2021.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1222 as printed February 19, 2020.)

J.D. FORD

Motion prevailed. The bill was ordered engrossed.

Engrossed House Bill 1235

Senator Crider called up Engrossed House Bill 1235 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1264

Senator Houchin called up Engrossed House Bill 1264 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1279

Senator Mishler called up Engrossed House Bill 1279 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1279–5)

Madam President: I move that Engrossed House Bill 1279 be amended to read as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 5-1.3-3-11, AS ADDED BY P.L.189-2018, SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 11. **(a)** The IFA, the NWIRDA, or the NICTD may:

(1) in the manner provided by IC 32-24; or

(2) as otherwise required for a railroad federal aid project funded in any part under 49 U.S.C. 103, et seq.;

acquire by appropriation any land, rights-of-way, property, rights, easements, or other legal or equitable interests necessary or convenient for the construction or the efficient operation of any rail project. However, compensation for the property taken shall first be made in money as provided by IC 32-24 or as otherwise required for a railroad federal aid project funded in any part under 49 U.S.C. 103, et seq.

(b) The IFA, the NWIRDA, or the NICTD:

(1) may enter upon land to conduct a survey or investigation by manual or mechanical means for the construction or operation of a rail project; and

(2) shall, when acting under subdivision (1), have all the same powers and duties that the Indiana department of transportation has under IC 8-23-7-26 through IC 8-23-7-28.".

Page 10, line 29, after "corporation" insert ", **a nonprofit affiliate entity established by the northwest Indiana regional development authority under IC 36-7.5-4.5-18.5, or a nonprofit affiliate entity established by the north central Indiana regional development authority under IC 36-7.6-3-3.5**".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1279 as printed February 21, 2020.)

MISHLER

Motion prevailed.

SENATE MOTION
(Amendment 1279–6)

Madam President: I move that Engrossed House Bill 1279 be amended to read as follows:

Page 16, between lines 14 and 15, begin a new paragraph and insert:

"SECTION 4. IC 8-25-3-6, AS AMENDED BY P.L.197-2016, SECTION 94, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 6. (a) The following apply to the funding of a public transportation project:

(1) For the first year of operations, an amount must be raised from sources other than taxes and fares that is equal to at least ten percent (10%) of the revenue that the budget agency certifies that the county will receive in that year from a local income tax imposed to fund the public transportation project.

(2) For the second year of operations and each year thereafter, at least ten percent (10%) of the annual operating expenses of the public transportation project must be paid from sources other than taxes and fares. For purposes of this subdivision, operating expenses include only those expenses incurred in the operation of fixed route services that are established or expanded as a result of a public transportation project authorized and funded under this article.

The budget agency shall assist the fiscal body of an eligible county in determining the amount of money that must be raised under subdivision (1).

(b) A county fiscal body or another entity authorized to carry out a public transportation project under IC 8-25-4 shall raise the revenue required by subsection (a) for a particular calendar year before the end of the third quarter of the preceding calendar year. Money raised under this section must be deposited in the county public transportation fund established under section 7 of this chapter.

(c) If a county fiscal body or other entity fails to raise the revenue required by subsection (a) before the deadline specified in subsection (b), the county in which the public transportation project is located is responsible for paying the difference between:

(1) the amount that subsection (a) requires to be raised from sources other than taxes and fares; minus

(2) the amount actually raised from sources other than taxes and fares.

(d) The state budget committee shall annually review the amount raised from sources other than taxes and fares for a public transportation project in eligible counties.

(e) This subsection applies only to Marion County. If, for any year of operation, the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares, then after December 31 of that year the following apply until the fiscal body of Marion County pays the amount required under this section, as determined following the annual state budget committee review under subsection (d):

(1) Beginning after June 30, 2020, the treasurer of state shall withhold ten percent (10%) from the amount of the certified distribution attributable to the additional tax rate imposed in Marion County under 6-3.6-7-27.

(2) The fiscal body of Marion County may use the county's public transportation fund only for a purpose

identified under section 7(e) of this chapter.

(3) The fiscal body of Marion County may issue bonds only for a purpose identified under IC 8-25-5-3.

(4) The fiscal body of Marion County may not pledge revenues under this article for the payment of bonds and principal on bonds under IC 8-25-5-6.

SECTION 5. IC 8-25-3-7, AS ADDED BY P.L.153-2014, SECTION 17, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 7. (a) If the fiscal body of an eligible county imposes taxes to fund a public transportation project, the county treasurer of the eligible county shall establish a county public transportation project fund to receive tax revenues collected for the public transportation project. Money received from a foundation established under IC 8-25-7 or IC 8-25-8 may be deposited into the fund.

(b) Money in a fund established under subsection (a) at the end of the eligible county's fiscal year remains in the fund. Interest earned by the fund must be deposited in the fund.

(c) **Except as provided in subsections (e) and (f),** money deposited in an eligible county's public transportation project fund may be used only to purchase, establish, operate, repair, or maintain a public transportation project authorized under this article. Money in the fund may be pledged by the fiscal body of the eligible county to the repayment of bonds issued for purposes of a public transportation project authorized under this article.

(d) The fiscal body of an eligible county may, in the manner provided by law, appropriate money from the fund to a public transportation corporation that is authorized to purchase, establish, operate, repair, or maintain the public transportation project if the public transportation project is located, either entirely or partially, within the eligible county.

(e) This subsection applies only to Marion County. If, for any year of operation, the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter, then after December 31 of that year money deposited in Marion County's public transportation fund may be used only for the following purposes until the fiscal body of Marion County pays the amount described under section 6 of this chapter, as determined following the annual state budget committee review under section 6(d) of this chapter:

(1) To operate, repair, or maintain a public transportation project that is:

(A) authorized under this article; and

(B) constructed and in service before October 1 in the year that the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter.

(2) To pay debt service on bonds:

(A) issued under this article before October 1 in the year that the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter; or

(B) issued under this article after September 30 in the year that the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter, for the purpose of refunding or refinancing bonds described in clause (A).

(f) This subsection applies only to Marion County. If, for any year of operation, the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter, then after December 31 of that year money deposited in Marion County's public transportation fund may not be used to do any of the following:

(1) Purchase or establish a public transportation project that is not constructed and in service before October 1 in the year that the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter.

(2) Extend a public transportation project that is constructed and in service before October 1 in the year that the fiscal body of Marion County does not pay at least ten percent (10%) of the annual operating expenses of the public transportation project from sources other than taxes and fares as required by section 6 of this chapter.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1279 as printed February 21, 2020.)

FREEMAN

Upon request of Senator Breaux the President ordered the roll of the Senate to be called. Roll Call 251: yeas 35, nays 12.

Motion prevailed. The bill was ordered engrossed.

Engrossed House Bill 1309

Senator Messmer called up Engrossed House Bill 1309 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1049

Senator Holdman called up Engrossed House Bill 1049 for second reading. The bill was read a second time by title. There being no amendments, the bill was ordered engrossed.

Engrossed House Bill 1372

Senator Bassler called up Engrossed House Bill 1372 for second reading. The bill was read a second time by title.

SENATE MOTION
(Amendment 1372–4)

Madam President: I move that Engrossed House Bill 1372 be amended to read as follows:

Page 40, delete lines 32 through 42.

Delete page 41.

Page 42, delete lines 1 through 31.

Renumber all SECTIONS consecutively.

(Reference is to EHB 1372 as printed February 21, 2020.)

BASSLER

Motion prevailed.

SENATE MOTION
(Amendment 1372–3)

Madam President: I move that Engrossed House Bill 1372 be amended to read as follows:

Page 55, between lines 28 and 29, begin a new paragraph and insert:

"**Sec. 32. (a) A licensee that satisfies the requirements of this chapter is entitled to an affirmative defense to any cause of action sounding in tort that:**

(1) is brought under the laws or in the courts of this state; and

(2) alleges that the failure to implement reasonable information security controls resulted in a data breach concerning nonpublic information.

(b) The affirmative defense available under this section does not limit any other affirmative defenses available to a licensee.".

(Reference is to EHB 1372 as printed February 21, 2020.)

L. BROWN

Motion prevailed.

SENATE MOTION
(Amendment 1372–5)

Madam President: I move that Engrossed House Bill 1372 be amended to read as follows:

Page 79, between lines 14 and 15, begin a new paragraph and insert:

"SECTION 14. IC 27-7-17 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 17. Medical Payment Coverage

Sec. 1. As used in this chapter, "covered individual" means an individual who is entitled to coverage under a health plan.

Sec. 2. As used in this chapter, "health care services" has the meaning set forth in IC 27-8-11-1.

Sec. 3. (a) As used in this chapter, "health plan" means a plan through which coverage is provided for health care services through insurance, prepayment, reimbursement, or otherwise. The term includes the following:

(1) A policy of accident and sickness insurance (as defined in IC 27-8-5-1).

(2) An individual contract (as defined in IC 27-13-1-21) or a group contract (as defined in IC 27-13-1-16).

(3) A state employee health plan offered under IC 5-10-8.

(4) An employee welfare benefit plan (as defined in 29 U.S.C. 1002 et seq.) to the extent allowable under federal law.

(5) Accident only insurance.

(6) Medicare supplement insurance.

(b) The term does not include the following:

(1) Credit, long term care, or disability income insurance.

(2) Liability insurance coverage.

(3) Worker's compensation or similar insurance.

(4) Medical payment coverage.

(5) A specified disease policy issued as an individual policy.

(6) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.

Sec. 4. (a) As used in this chapter, "medical payment coverage" means an insurance policy benefit that provides payment for expenses incurred by an individual as a result of injury, illness, or death arising from the:

(1) operation of a motor vehicle; or

(2) individual's presence on a premises;

that is covered by the insurance policy.

(b) The term includes coverage for emergency medical transportation, health care services, and funeral and burial expenses.

(c) The term does not include benefits provided by the following:

(1) Liability insurance coverage.

(2) A health plan.

Sec. 5. (a) Medical payment coverage is supplemental to the benefits:

(1) to which a covered individual is entitled under a health plan; and

(2) that are the same as or similar to benefits available to the covered individual under the medical payment coverage.

(b) A health plan may not require the use or exhaustion of medical payment coverage as a condition of payment of benefits:

(1) under the health plan; and

(2) for health care services rendered to a covered individual.

Sec. 6. In the absence of health plan benefits that are the same as or similar to benefits available to an individual under medical payment coverage, the medical payment coverage is primary coverage.

Sec. 7. Nothing in this chapter imposes on any health plan an obligation to provide greater benefits to a covered individual with medical payment coverage than would be provided to a covered individual without medical payment coverage.

Sec. 8. This chapter does not affect any right of subrogation provided under a health plan.

Sec. 9. Nothing in this chapter affects the ability of a covered individual to prohibit a health care provider from billing the covered individual's medical payment coverage insurer directly.

Sec. 10. A contractual provision that is:

(1) contained in a contract entered into, amended, or renewed after June 30, 2020; and

(2) contrary to this chapter;

is void.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1372 as printed February 21, 2020.)

BOHACEK

Motion prevailed.

SENATE MOTION
(Amendment 1372–7)

Madam President: I move that Engrossed House Bill 1372 be amended to read as follows:

Page 55, line 27, delete "commercial bank or a credit union," and insert "**financial institution (as defined in 15 U.S.C. 6809),**".

Page 55, line 28, delete "commercial bank or credit union" and insert "**financial institution**".

(Reference is to EHB 1372 as printed February 21, 2020.)

BASSLER

Motion prevailed.

SENATE MOTION
(Amendment 1372–6)

Madam President: I move that Engrossed House Bill 1372 be amended to read as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 5-10-8-24 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 24. (a) As used in this section, "state employee health plan" means the following:**

(1) A self-insurance program established under section 7(b) of this chapter.

(2) A contract for prepaid health services entered into under section 7(c) of this chapter.

(b) A state employee health plan must provide coverage for treatment of:

(1) pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS); and

(2) pediatric acute-onset neuropsychiatric syndrome (PANS);

including treatment with intravenous immunoglobulin therapy.

(c) The coverage required by this section may not be subject to annual or lifetime limitation, deductible, copayment, or coinsurance provisions that are more restrictive than the annual or lifetime limitation, deductible, copayment, or coinsurance provisions that apply generally under the state employee health plan.".

Page 79, between lines 14 and 15, begin a new paragraph and insert:

"SECTION 15. IC 27-8-37 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]:

Chapter 37. Coverage for Pediatric Neuropsychiatric Disorders

Sec. 1. As used in this chapter, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1, offered on an individual or group basis.

Sec. 2. A policy of accident and sickness insurance must provide coverage for treatment of:

(1) pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS); and

(2) pediatric acute-onset neuropsychiatric syndrome (PANS);

including treatment with intravenous immunoglobulin therapy.

Sec. 3. The coverage required by this chapter may not be subject to annual or lifetime limitation, deductible, copayment, or coinsurance provisions that are more restrictive than the annual or lifetime limitation, deductible, copayment, or coinsurance provisions that apply generally under the policy of accident and sickness insurance.".

Page 80, between lines 29 and 30, begin a new paragraph and insert:

"SECTION 17. IC 27-13-7-26 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2020]: **Sec. 26. (a) An individual contract and a group contract must provide coverage for treatment of:**

(1) pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS); and

(2) pediatric acute-onset neuropsychiatric syndrome (PANS);

including treatment with intravenous immunoglobulin therapy.

(b) The coverage required by this section may not be subject to annual or lifetime limitation, deductible, copayment, or coinsurance provisions that are more restrictive than the annual or lifetime limitation, deductible, copayment, or coinsurance provisions that apply generally under the individual contract or group contract.

SECTION 18. [EFFECTIVE JULY 1, 2020] **(a) IC 5-10-8-24, as added by this act, applies to a state employee health plan that is established, entered into, amended, or renewed after June 30, 2020.**

(b) IC 27-8-37, as added by this act, applies to a policy of accident and sickness insurance that is issued, delivered, amended, or renewed after June 30, 2020.

(c) IC 27-13-7-26, as added by this act, applies to an individual contract or a group contract that is entered into, delivered, amended, or renewed after June 30, 2020.

(d) This SECTION expires July 1, 2023.".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1372 as printed February 21, 2020.)

NIEZGODSKI

Upon request of Senator Niezgodski the President ordered the roll of the Senate to be called. Roll Call 252: yeas 32, nays 14.

Motion prevailed. The bill was ordered engrossed.

ENGROSSED HOUSE BILLS ON THIRD READING

Engrossed House Bill 1091

Senator Kruse called up Engrossed House Bill 1091 for third reading:

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

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 253: yeas 46, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Chair instructed the Secretary to inform the House of the passage of the bill.

Engrossed House Bill 1165

Senator Sandlin called up Engrossed House Bill 1165 for third reading:

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

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 254: yeas 28, nays 18. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Chair instructed the Secretary to inform the House of the passage of the bill.

Engrossed House Bill 1348

Senator Busch called up Engrossed House Bill 1348 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning state and local administration.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 255: yeas 45, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Chair instructed the Secretary to inform the House of the passage of the bill.

SENATE MOTION

Madam President: I move that Engrossed House Bill 1222, which is eligible for third reading, be returned to second reading for purposes of amendment.

WALKER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Breaux be added as cosponsor of Engrossed House Bill 1004.

CHARBONNEAU

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Niezgodski be added as cosponsor of Engrossed House Bill 1015.

SANDLIN

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Tallian be added as cosponsor of Engrossed House Bill 1015.

SANDLIN

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Niezgodski be added as cosponsor of Engrossed House Bill 1043.

BOOTS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senators Spartz, Garten, and J.D. Ford be added as cosponsors of Engrossed House Bill 1063.

DORIOT

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Niezgodski be added as cosponsor of Engrossed House Bill 1063.

DORIOT

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Charbonneau be added as second sponsor of Engrossed House Bill 1065.

HOLDMAN

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Perfect be added as second sponsor of Engrossed House Bill 1113.

BASSLER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Melton be added as cosponsor of Engrossed House Bill 1113.

BASSLER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Doriot be added as second sponsor of Engrossed House Bill 1131.

GARTEN

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator J.D. Ford be added as cosponsor of Engrossed House Bill 1151.

BOOTS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Niezgodski be added as cosponsor of Engrossed House Bill 1151.

BOOTS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Koch be added as third sponsor of Engrossed House Bill 1153.

RAATZ

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Stoops be added as cosponsor of Engrossed House Bill 1176.

RUCKELSHAUS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Doriot be added as second sponsor of Engrossed House Bill 1235.

CRIDER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Grooms be added as second sponsor of Engrossed House Bill 1264.

HOUCHIN

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Melton be added as cosponsor of Engrossed House Bill 1279.

MISHLER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Donato be added as cosponsor of Engrossed House Bill 1283.

ROGERS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Melton be added as cosponsor of Engrossed House Bill 1283.

ROGERS

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Becker be added as second sponsor of Engrossed House Bill 1326.

CRIDER

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Rogers be added as cosponsor of Engrossed House Bill 1341.

KRUSE

Motion prevailed.

SENATE MOTION

Madam President: I move that Senator Koch be added as cosponsor of Engrossed House Bill 1419.

RAATZ

Motion prevailed.

SENATE MOTION

Madam President: I move we adjourn until 1:30 p.m., Monday, March 2, 2020.

BRAY

Motion prevailed.

The Senate adjourned at 4:06 p.m.

JENNIFER L. MERTZ
Secretary of the Senate

SUZANNE CROUCH
President of the Senate