ENGROSSED

HOUSE BILL No. 1007

DIGEST OF HB 1007 (Updated February 21, 2018 12:36 pm - DI 104)

Citations Affected: IC 12-15; IC 12-23; IC 25-23.6; IC 27-8; IC 27-13; IC 31-9; noncode.

Synopsis: Expanding mental health access. Requires the office of Medicaid policy and planning to implement a centralized credentials verification organization and credentialing process. Allows the division of mental health and addiction to grant approval for nine additional opioid treatment programs that: (1) are operated by a hospital; and (2) meet other specified requirements; if the division determines that there is a need for the program in the proposed location. Provides that mental health and addiction forensic treatment services may be administered or coordinated only by a provider certified by the division of mental health and addiction or licensed by the Indiana professional licensing agency to provide mental health and addiction treatment. (Under current law, a provider may provide services only if the provider is certified or licensed by the division of mental health and addiction.) Adds percutaneous nerve stimulators for substance abuse disorders to the definition of "opioid treatment services" for purposes of the opioid treatment pilot program and requires the pilot program report to (Continued next page)

Effective: Upon passage; July 1, 2018.

Kirchhofer, Ziemke, Davisson, Shackleford

(Senate sponsors — head, Charbonneau, Stoops)

January 8, 2018, read first time and referred to Committee on Public Health.
January 29, 2018, read second time, ordered engrossed. Engrossed.
January 30, 2018, read third time, passed. Yeas 97, nays 0.

SENATE ACTION

February 1, 2018, read first time and referred to Committee on Health and Provider Services.
February 22, 2018, amended, reported favorably — Do Pass; reassigned to Committee on Appropriations.
include data concerning the number of patients who received the treatment. Provides for temporary permits to certain individuals who are pursuing required clinical supervisory hours needed for licensure. Allows clinical social work experience hours obtained under a temporary permit to be counted to supervise certain work experience requirements. Allow a temporary permit to practice social work to be issued to an individual who either meets certain educational requirements or holds a diploma in social work from an accredited institution. Provides that the temporary permits are not renewable. Requires certain policies of accident and sickness insurance to provide coverage for substance abuse or chemical dependency treatment provided by an addiction counselor. Requires: (1) an accident and sickness insurer; and (2) a health maintenance organization; to provide provisional credentialing to a provider for which a credentialing determination is not completed in at least 30 days if certain requirements are met. Urges the legislative council to assign to an appropriate interim study committee the task of studying the impact that opioid treatment programs have on the neighborhoods and communities in the immediate area of the opioid treatment programs.
ENGROSSED

HOUSE BILL No. 1007

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

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

SECTION 1. IC 12-15-11-2 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 2. A provider desiring
to participate in the Medicaid program by providing to individuals
eligible for Medicaid services other than physician services provided
by a managed care provider, shall file a provider agreement with the
office on forms provided by the office.

SECTION 2. IC 12-15-11-5 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE JULY 1, 2018]: 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.

SECTION 3. IC 12-15-11-9 IS ADDED TO THE INDIANA CODE
AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
1, 2018]: Sec. 9. (a) The office shall implement a centralized

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credentials verification organization and credentialing process that:

1. uses a common application, as determined by provider type;
2. issues a single credentialing decision applicable to all Medicaid programs, except as determined by the office;
3. recredentials and revalidates provider information not less than once every three (3) years;
4. requires attestation of enrollment and credentialing information every six (6) months; and
5. is certificated or accredited by the National Committee for Quality Assurance or its successor organization.

(b) A managed care organization or contractor of the office may not require additional credentialing requirements in order to participate in a managed care organization's network. However, a contractor may collect additional information from the provider in order to complete a contract or provider agreement.

(c) A managed care organization or contractor of the office is not required to contract with a provider.

(d) A managed care organization or contractor of the office shall:

1. send representatives to meetings and participate in the credentialing process as determined by the office; and
2. not require additional credentialing information from a provider if a non-network credentialed provider is used.

(e) Except when a provider is no longer enrolled with the office, a credential acquired under this chapter is valid until recredentialing is required.

(f) An adverse action under this section is subject to IC 4-21.5.

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

(h) The office may adopt emergency rules to implement this section. However, an emergency rule adopted under this section expires the earlier of:

1. one (1) year after the rule was accepted for filing under IC 4-22-2-37.1(e); or

This subsection expires July 1, 2019.

(i) The office shall report the timeliness of determinations made under this section to the legislative council in an electronic format under IC 5-14-6 not later than December 31, 2018. This subsection expires January 1, 2019.
SECTION 4. IC 12-15-22-1 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 1. If after investigation
the office determines that a provider has violated a Medicaid statute or
rule adopted under a Medicaid statute, the office may impose at least
one (1) of the following sanctions:

1. Denial of payment to the provider for Medicaid services
   provided during a specified time.
2. Rejection of a prospective provider's application for
   participation in the Medicaid program.
3. Termination of a provider agreement permitting a provider's
   participation in the Medicaid program.
4. Assessment of a civil penalty against the provider in an
   amount not to exceed three (3) times the amount paid to the
   provider in excess of the amount that was legally due.
5. Assessment of an interest charge, at a rate not to exceed the
   rate established by IC 24-4.6-1-101(2) for judgments on money,
   on the amount paid to the provider in excess of the amount that
   was legally due. The interest charge accrues from the date of the
   overpayment to the provider.
6. Exclusion from the Medicaid program for a period of time
   consistent with 42 U.S.C. 1320a-7 et seq.

SECTION 5. IC 12-23-18-5.5, AS AMENDED BY P.L.209-2015,
SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2018]: Sec. 5.5. (a) The division may not grant specific
approval to be a new opioid treatment program. This section does not
apply to applications for new opioid treatment programs:

1. pending prior to March 1, 2007; or
2. that are operated by a hospital licensed under IC 16-21, an
   institution licensed under IC 12-25, or a certified community
   mental health center:
   A. within the licensed hospital, institution, or center; or
   B. in a separate office that meets federal opioid treatment
      program requirements;
and that meets the requirements of this section.

(b) A hospital licensed under IC 16-21, an institution licensed under
IC 12-25, or a certified community mental health center may apply to
the division to operate an opioid treatment program. Upon approval,
the hospital, institution, or community mental health center may
operate an opioid treatment program in compliance with this chapter
and federal law.

(c) Before June 30, 2018, the division may approve the operation of
not more than five (5) additional opioid treatment programs described
in subsection (a)(2) only if the division determines as described in subsection (e) (f) that there is a need for a new opioid treatment program in the proposed location and the requirements of this chapter are met.

(d) Beginning July 1, 2018, the division may approve the operation of not more than nine (9) additional opioid treatment programs described in subsection (a)(2) only if the division determines as described in subsection (f) that there is a need for a new opioid treatment program in the proposed location and the requirements of this chapter are met.

(e) Not later than June 30, 2018, the division shall report to the general assembly in an electronic format under IC 5-14-6 concerning whether any new opioid treatment programs have been approved under subsection (c). The report must include the following:

(1) The impact on access to opioid treatment programs.
(2) The number of individuals served in the opioid treatment programs approved under subsection (c).
(3) Treatment outcomes for individuals receiving services in the opioid treatment programs approved under subsection (c).
(4) Any recommendations the division has concerning future treatment programs.

(f) The division shall adopt rules under IC 4-22-2 setting forth the manner in which the division will determine whether there is a need for a new opioid treatment program in a proposed program location's geographic area.

SECTION 6. IC 12-23-19-3, AS AMENDED BY P.L.203-2017, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 3. Except as provided in IC 12-23-19.5, mental health and addiction forensic treatment services may be administered or coordinated only by a provider certified or licensed by the division of mental health and addiction or licensed by the Indiana professional licensing agency to provide mental health and addiction treatment services.

SECTION 7. IC 12-23-21.2-1, AS ADDED BY P.L.125-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The following definitions apply throughout this chapter:

(1) "Certified treatment provider" means a person certified by the division to provide opioid treatment services.
(2) "Division" means the division of mental health and addiction.
(3) "Opioid treatment services" means evidence based treatment and recovery support services provided in an inpatient,
residential, or outpatient setting to individuals diagnosed with 
opioid use disorder. The services include:
  (A) opioid reversal medication;
  (B) addiction counseling;
  (C) inpatient detoxification; and 
  (D) medication assisted treatment, including a federal Food 
and Drug Administration approved long acting, nonaddictive 
medication for the treatment of opioid dependence; and 
  (E) federal Food and Drug Administration approved 
percutaneous nerve stimulators for substance abuse 
disorders.

(4) "Program" means the opioid treatment pilot program for 
opioid use disorder established under section 2 of this chapter.

SECTION 8. IC 12-23-21.2-5, AS ADDED BY P.L.125-2017, 
SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 
UPON PASSAGE]: Sec. 5. (a) The division shall collect data and 
report the outcomes of the services provided under this chapter to the 
legislative council in an electronic format under IC 5-14-6 not later 
than November 1, 2020.

  (b) The report shall include the following:
  (1) The number of patients served by the program.
  (2) The average length of time spent in the program.
  (3) The number and type of opioid treatment services provided by 
the program, including the number of patients who received 
percutaneous nerve stimulators for substance abuse disorders.
  (4) The number of patients demonstrating improvement in 
functioning, as defined by the division, while receiving opioid 
treatment services in the program.
  (5) The number of patients who transitioned to opioid abstinence.
  (6) A summary description of the most effective opioid treatment 
services.
  (7) The patient relapse rate after leaving the program.
  (8) The number of patients arrested upon leaving the program, 
and the reason for the arrest, if known.
  (9) Recommendations to improve the effectiveness and efficiency 
of the program.

SECTION 9. IC 25-23.6-5-3.5, AS AMENDED BY P.L.192-2017, 
SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 
JULY 1, 2018]: Sec. 3.5. (a) The applicant for a license as a clinical 
social worker must have at least two (2) years of clinical social work 
experience after receiving a graduate degree in social work and under 
the supervision of a qualified supervisor as determined by the board.
(b) If an individual is obtaining the clinical social work experience
described in subsection (a) in Indiana, the individual must be licensed
as a social worker under section 1 of this chapter.

(c) A doctoral internship may be applied toward the supervised
clinical social work experience requirement.

(d) Except as provided in subsection (e), the clinical social work
experience requirement may be met by work performed at or away
from the premises of the qualified supervisor.

(e) The clinical social work requirement may not be performed away
from the qualified supervisor's premises if:

(1) the work is the independent private practice of clinical social
work; and

(2) the work is not performed at a place with the supervision of a
qualified supervisor available.

(f) Any supervised clinical social work experience hours that an
applicant accumulates under this chapter, including hours obtained
under a temporary permit issued under section 11(e) of this
chapter, do not expire and may be used by the applicant to satisfy the
supervised clinical social work experience requirements under this
chapter.

SECTION 10. IC 25-23.6-5-11 IS AMENDED TO READ AS
FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 11. (a) The board may
issue a temporary permit to an individual to profess to be a social
worker or clinical social worker if the individual pays a fee and the
individual:

(1) has a valid license or certificate to practice from another state
and the individual has passed an examination substantially
equivalent to the level for which licensure is being requested;

(2) is practicing in a state that does not license or certify social
workers or clinical social workers, but is certified by a national
association approved by the board and the individual has applied
for a license from the board; or

(3) has been approved by the board to take the examination and
has graduated from a school or program approved by the board
and the individual has completed any experience requirement.

(b) Except as provided in subsection (e), a temporary permit
expires the earlier of:

(1) the date the individual holding the permit is issued a license
under this article;

(2) the date the board disapproves the individual's license
application; or

(3) one hundred eighty (180) days after the initial permit is issued.
(c) The board may renew a temporary permit if the individual holding the permit was scheduled to take the next examination and the individual:
   (1) did not take the examination; and
   (2) shows good cause for not taking the examination.
(d) A permit renewed under subsection (c) expires on the date the individual holding the permit receives the results from the next examination given after the permit was issued, and may not be extended if the applicant has failed the examination.
(e) The board shall issue a temporary permit to practice social work to an individual who:
   (1) either:
       (A) meets the educational requirements for a license as a social worker; or
       (B) holds a diploma in social work from an accredited institution; and
   (2) pays a fee for the temporary permit set by the board.
A temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed social worker. The temporary permit may not be renewed.

SECTION 11. IC 25-23.6-8-1.5, AS ADDED BY P.L.134-2008, SECTION 40, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]:
Sec. 1.5. (a) An individual who applies for a license as a marriage and family therapist associate must meet the following requirements:
   (1) Furnish satisfactory evidence to the board that the individual has:
       (A) received a master's or doctor's degree in marriage and family therapy, or in a related area as determined by the board from an institution of higher education that meets the requirements under section 2.1(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 2.1(a)(2) or 2.1(a)(3) of this chapter; and
       (B) completed the educational requirements under section 2.5 of this chapter.
   (2) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.
   (3) Furnish satisfactory evidence to the board that the individual
has not been the subject of a disciplinary action by a licensing or
certification agency of another state or jurisdiction on the grounds
that the individual was not able to practice as a marriage and
family therapist associate without endangering the public.
(4) Pay the fee established by the board.
(5) Pass an examination provided by the board.
(b) The board shall issue an associate temporary permit to
practice marriage and family therapy to an individual who:
(1) meets the educational requirements for a license as a
marriage and family therapist;
(2) is pursuing the required clinical supervisory hours for a
license as a marriage and family therapist; and
(3) pays a fee for the temporary permit set by the board.
An associate temporary permit issued under this subsection expires
one (1) year after the date the permit is issued, without regard to
the number of times the individual passes or fails the required
examination to become a licensed marriage and family therapist.
The temporary permit may not be renewed.
SECTION 12. IC 25-23.6-8.5-1.5, AS ADDED BY P.L.84-2010,
SECTION 59, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2018]: Sec. 1.5. (a) An individual who applies for a license as
a mental health counselor associate must meet the following
requirements:
(1) Furnish satisfactory evidence to the board that the individual
has:
(A) received a master's or doctor's degree in mental health
counseling therapy or in a related area as determined by the
board from an institution of higher education that meets the
requirements under section 2 of this chapter or from a foreign
school that has a program of study that meets the requirements
under section 2(3)(A) or 2(3)(B) of this chapter; and
(B) completed the educational requirements under section 3 of
this chapter.
(2) Furnish satisfactory evidence to the board that the individual
does not have a conviction for a crime that has a direct bearing on
the individual's ability to practice competently.
(3) Furnish satisfactory evidence to the board that the individual
has not been the subject of a disciplinary action by a licensing or
certification agency of another state or jurisdiction on the grounds
that the individual was not able to practice as a mental health
counselor associate without endangering the public.
(4) Pay the fee established by the board.
(5) Pass an examination provided by the board.

(b) The board shall issue an associate temporary permit to practice mental health counseling to an individual who:

(1) meets the educational requirements for a license as a mental health counselor;

(2) is pursuing the required clinical supervisory hours for a license as a mental health counselor; and

(3) pays a fee for the temporary permit set by the board.

An associate temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed mental health counselor. The temporary permit may not be renewed.

SECTION 13. IC 25-23.6-10.5-1.5, AS ADDED BY P.L.225-2017, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 1.5. (a) An individual who applies for a license as an addiction counselor associate must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual has:

   (A) received a baccalaureate or higher degree in addiction counseling, or in a related area as determined by the board from:

      (i) an eligible postsecondary educational institution that meets the requirement under section 3(1) of this chapter; or

      (ii) a foreign school that has a program of study that meets the requirement under section 3(2) or 3(3) of this chapter;

   and

   (B) completed the educational requirements under section 5 of this chapter.

(2) Furnish satisfactory evidence to the board that the individual does not have a:

   (A) conviction for a crime of violence (as defined in IC 35-50-1-2(a)(1) through IC 35-50-1-2(a)(18)); or

   (B) conviction in the previous two (2) years that has a direct bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as an addiction counselor associate without endangering the public.

(4) Pass an examination established by the board.

(5) Pay the fee established by the board.
(b) The board shall issue an associate temporary permit to practice addiction counseling or clinical addiction counseling to an individual who:

(1) meets the educational requirements for a license as an addiction counselor or clinical addiction counselor;
(2) is pursuing the required clinical supervisory hours for a license as an addiction counselor or clinical addiction counselor; and
(3) pays a fee for the temporary permit set by the board.

An associate temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed addiction counselor or clinical addiction counselor. The temporary permit may not be renewed.

SECTION 14. IC 27-8-6-7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 7. (a) As used in this section, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1.

(b) A policy of accident and sickness insurance that provides coverage for substance abuse or chemical dependency treatment shall provide the coverage for substance abuse or chemical dependency treatment that is:

(1) rendered by:
   (A) an addiction counselor; or
   (B) a clinical addiction counselor;
   who is licensed under IC 25-23.6-10.5; and
(2) within the scope of practice of the addiction counselor or clinical addiction counselor.

(c) This section does not require a policy of accident and sickness insurance to provide coverage for substance abuse or chemical dependency treatment generally.

SECTION 15. IC 27-8-11-7, AS ADDED BY P.L.26-2005, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 7. (a) This section applies to an insurer that issues or administers a policy that provides coverage for basic health care services (as defined in IC 27-13-1-4).

(b) The department of insurance shall prescribe the credentialing application form used by the Council for Affordable Quality Healthcare (CAQH) in electronic or paper format, which must be used by:

(1) a provider who applies for credentialing by an insurer; and
(2) an insurer that performs credentialing activities.

(c) An insurer shall notify a provider concerning a deficiency on a
completed credentialing application form submitted by the provider not later than thirty (30) business days after the insurer receives the completed credentialing application form.

(d) An insurer shall notify a provider concerning the status of the provider's completed credentialing application not later than:

(1) sixty (60) days after the insurer receives the completed credentialing application form; and

(2) every thirty (30) days after the notice is provided under subdivision (1), until the insurer makes a final credentialing determination concerning the provider.

(e) Notwithstanding subsection (d), if an insurer fails to issue a credentialing determination within thirty (30) days after receiving a completed credentialing application form from a provider, the insurer shall provisionally credential the provider if the provider meets the following criteria:

(1) The provider has submitted a completed and signed credentialing application form and any required supporting material to the insurer.

(2) The provider was previously credentialed by the insurer in Indiana and in the same scope of practice for which the provider has applied for provisional credentialing.

(3) The provider is a member of a provider group that is credentialed and a participating provider with the insurer.

(4) The provider is a network provider with the insurer.

(f) The criteria for issuing provisional credentialing under subsection (e) may not be less stringent than the standards and guidelines governing provisional credentialing from the National Committee for Quality Assurance or its successor organization.

(g) Once an insurer fully credentials a provider that holds provisional credentialing, reimbursement payments under the contract shall be retroactive to the date of the provisional credentialing. The insurer shall reimburse the provider at the rates determined by the contract between the provider and the insurer.

(h) If an insurer does not fully credential a provider that is provisionally credentialed under subsection (e), the provisional credentialing is terminated on the date the insurer notifies the provider of the adverse credentialing determination. The insurer is not required to reimburse for services rendered while the provider was provisionally credentialed.

SECTION 16. IC 27-13-43-3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 3. (a) Notwithstanding section 2
of this chapter, if a health maintenance organization fails to issue
a credentialing determination within thirty (30) days after
receiving a completed credentialing application form from a
provider, the health maintenance organization shall provisionally
credential the provider if the provider meets the following criteria:
(1) The provider has submitted a completed and signed
credentialing application form and any required supporting
material to the health maintenance organization.
(2) The provider was previously credentialed by the health
maintenance organization in Indiana and in the same scope of
practice for which the provider has applied for provisional
credentialing.
(3) The provider is a member of a provider group that is
credentialing and a participating provider with the health
maintenance organization.
(4) The provider is a network provider with the health
maintenance organization.
(b) The criteria for issuing provisional credentialing under
subsection (a) may not be less stringent than the standards and
guidelines governing provisional credentialing from the National
Committee for Quality Assurance or its successor organization.
(c) Once a health maintenance organization fully credentials a
provider that holds provisional credentialing, reimbursement
payments under the contract shall be retroactive to the date of the
provisional credentialing. The health maintenance organization
shall reimburse the provider at the rates determined by the
contract between the provider and the health maintenance
organization.
(d) If a health maintenance organization does not fully
credential a provider that is provisionally credentialed under
subsection (a), the provisional credentialing is terminated on the
date the health maintenance organization notifies the provider of
the adverse credentialing determination. The health maintenance
organization is not required to reimburse for services rendered
while the provider was provisionally credentialed.

SECTION 17. IC 31-9-2-31, AS AMENDED BY P.L.162-2011,
SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2018]: Sec. 31. (a) "Custodian", for purposes of the juvenile
law, means a person with whom a child resides.
(b) "Custodian", for purposes of IC 31-34-1, includes any person
who is:
(1) a license applicant or licensee of:
(A) a foster home or residential child care facility that is required to be licensed or is licensed under IC 31-27;
(B) a child care center that is required to be licensed or is licensed under IC 12-17.2-4; or
(C) a child care home that is required to be licensed or is licensed under IC 12-17.2-5;
(2) a person who is responsible for care, supervision, or welfare of children while providing services as an owner, operator, director, manager, supervisor, employee, or volunteer at:
(A) a home, center, or facility described in subdivision (1);
(B) a child care ministry, as defined in IC 12-7-2-28.8, that is exempt from licensing requirements and is registered or required to be registered under IC 12-17.2-6;
(C) a home, center, or facility of a child care provider, as defined in IC 12-7-2-149.1(4); IC 12-7-2-149.1(5);
(D) a home, center, or facility that is the location of a program that provides child care, as defined in section 16.3 of this chapter, to serve migrant children and that is exempt from licensing under IC 12-17.2-2-8(6), whether or not the program is certified as described in IC 12-17.2-2-9; or
(E) a school, as defined in section 113.5 of this chapter;
(3) a child caregiver, as defined in section 16.4 of this chapter;
(4) a member of the household of the child's noncustodial parent; or
(5) an individual who has or intends to have direct contact, on a regular and continuing basis, with a child for whom the individual provides care and supervision.

SECTION 18. [EFFECTIVE UPON PASSAGE] (a) As used in this SECTION, "opioid treatment program" refers to a program:
(1) through which opioid agonist medication is dispensed to an individual in the treatment of opiate addiction and for which certification is required under 42 CFR Part 8; and
(2) that is subject to IC 12-23-18.
(b) The legislative council is urged to assign to an appropriate interim study committee the task of studying the impact that opioid treatment programs have on the neighborhoods and communities in the immediate area of the opioid treatment programs. An interim study committee assigned a study under this SECTION shall do the following:
(1) Consider the effect on the neighborhoods and communities in the immediate area that the opioid treatment programs have on the following:

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(A) Criminal activity, including violent crimes, property crimes, and drug related crimes.

(B) Emergency medical services, including the number of calls for assistance, runs provided, and cases of overdoses.

(C) The effect on the local economy, including the area property values.

(D) The effect on the residents' quality of life, including any additional traffic and excessive noises.

(E) Any other direct impacts that opioid treatment programs have on the surrounding area.

(2) Study other states' and localities' best practices to monitor and regulate opioid treatment programs to reduce negative impacts to the neighborhoods and communities in the immediate area of the opioid treatment programs.

(c) This SECTION expires January 1, 2019.

SECTION 19. An emergency is declared for this act.
COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1007, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, delete lines 1 through 17.
Delete pages 2 through 3.
Page 4, delete lines 1 through 23, begin a new paragraph and insert:
"SECTION 1. IC 12-15-11-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 2. A provider desiring to participate in the Medicaid program by providing to individuals eligible for Medicaid services other than physician services provided by a managed care provider, shall file a provider agreement with the office on forms provided by the office.

SECTION 2. IC 12-15-11-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: 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.

SECTION 3. IC 12-15-11-9 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 9. (a) The office shall implement a centralized credentials verification organization and credentialing process that:

(1) uses a common application, as determined by provider type;
(2) issues a single credentialing decision applicable to all Medicaid programs, except as determined by the office;
(3) recredits and revalidates provider information not less than once every three (3) years;
(4) requires attestation of enrollment and credentialing information every six (6) months; and
(5) is certificated or accredited by the National Committee for Quality Assurance or its successor organization.

(b) A managed care organization or contractor of the office may not require additional credentialing requirements in order to participate in a managed care organization's network. However, a contractor may collect additional information from the provider in order to complete a contract or provider agreement.
(c) A managed care organization or contractor of the office is not required to contract with a provider.
(d) A managed care organization or contractor of the office shall:
   (1) send representatives to meetings and participate in the credentialing process as determined by the office; and
   (2) not require additional credentialing information from a provider if a non-network credentialed provider is used.
(e) Except when a provider is no longer enrolled with the office, a credential acquired under this chapter is valid until recredentialing is required.
(f) An adverse action under this section is subject to IC 4-21.5.
(g) The office may adopt rules under IC 4-22-2 to implement this section.
(h) The office may adopt emergency rules to implement this section. However, an emergency rule adopted under this section expires the earlier of:
   (1) one (1) year after the rule was accepted for filing under IC 4-22-2-37.1(e); or
   (2) June 30, 2019.
   This subsection expires July 1, 2019.
(i) The office shall report the timeliness of determinations made under this section to the legislative council in an electronic format under IC 5-14-6 not later than December 31, 2018. This subsection expires January 1, 2019.

SECTION 4. IC 12-15-22-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 1. If after investigation the office determines that a provider has violated a Medicaid statute or rule adopted under a Medicaid statute, the office may impose at least one (1) of the following sanctions:
   (1) Denial of payment to the provider for Medicaid services provided during a specified time.
   (2) Rejection of a prospective provider's application for participation in the Medicaid program.
   (3) Termination of a provider agreement permitting a provider's participation in the Medicaid program.
   (4) Assessment of a civil penalty against the provider in an amount not to exceed three (3) times the amount paid to the provider in excess of the amount that was legally due.
   (5) Assessment of an interest charge, at a rate not to exceed the rate established by IC 24-4.6-1-101(2) for judgments on money, on the amount paid to the provider in excess of the amount that
was legally due. The interest charge accrues from the date of the overpayment to the provider.

(6) Exclusion from the Medicaid program for a period of time consistent with 42 U.S.C. 1320a-7 et seq."

Page 5, delete lines 28 through 42.

Page 6, delete lines 1 through 40, begin a new paragraph and insert:

"SECTION 9. IC 12-23-19-3, AS AMENDED BY P.L.203-2017, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 3. Except as provided in IC 12-23-19.5, mental health and addiction forensic treatment services may be administered or coordinated only by a provider certified or licensed by the division of mental health and addiction or licensed by the Indiana professional licensing agency to provide mental health and addiction treatment services.

SECTION 10. IC 25-23.6-5-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 11. (a) The board may issue a temporary permit to an individual to profess to be a social worker or clinical social worker if the individual pays a fee and the individual:

(1) has a valid license or certificate to practice from another state and the individual has passed an examination substantially equivalent to the level for which licensure is being requested;
(2) is practicing in a state that does not license or certify social workers or clinical social workers, but is certified by a national association approved by the board and the individual has applied for a license from the board; or
(3) has been approved by the board to take the examination and has graduated from a school or program approved by the board and the individual has completed any experience requirement.

(b) Except as provided in subsection (e), a temporary permit expires the earlier of:

(1) the date the individual holding the permit is issued a license under this article;
(2) the date the board disapproves the individual's license application; or
(3) one hundred eighty (180) days after the initial permit is issued.

(c) The board may renew a temporary permit if the individual holding the permit was scheduled to take the next examination and the individual:

(1) did not take the examination; and
(2) shows good cause for not taking the examination.

(d) A permit renewed under subsection (c) expires on the date the
individual holding the permit receives the results from the next examination given after the permit was issued, and may not be extended if the applicant has failed the examination.

(e) The board shall issue a temporary permit to practice social work to an individual who:

(1) meets the educational requirements for a license as a social worker; and

(2) pays a fee for the temporary permit set by the board.

A temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed social worker. The temporary permit may not be renewed.

SECTION 11. IC 25-23.6-8-1.5, AS ADDED BY P.L.134-2008, SECTION 40, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]:

Sec. 1.5. (a) An individual who applies for a license as a marriage and family therapist associate must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual has:

(A) received a master's or doctor's degree in marriage and family therapy, or in a related area as determined by the board from an institution of higher education that meets the requirements under section 2.1(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 2.1(a)(2) or 2.1(a)(3) of this chapter; and

(B) completed the educational requirements under section 2.5 of this chapter.

(2) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a marriage and family therapist associate without endangering the public.

(4) Pay the fee established by the board.

(5) Pass an examination provided by the board.

(b) The board shall issue an associate temporary permit to practice marriage and family therapy to an individual who:

(1) meets the educational requirements for a license as a
marriage and family therapist;
(2) is pursuing the required clinical supervisory hours for a license as a marriage and family therapist; and
(3) pays a fee for the temporary permit set by the board.

An associate temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed marriage and family therapist. The temporary permit may not be renewed.

SECTION 12. IC 25-23.6-8.5-1.5, AS ADDED BY P.L.84-2010, SECTION 59, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]:

Sec. 1.5. (a) An individual who applies for a license as a mental health counselor associate must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual has:
   (A) received a master's or doctor's degree in mental health counseling therapy or in a related area as determined by the board from an institution of higher education that meets the requirements under section 2 of this chapter or from a foreign school that has a program of study that meets the requirements under section 2(3)(A) or 2(3)(B) of this chapter; and
   (B) completed the educational requirements under section 3 of this chapter.
(2) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.
(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a mental health counselor associate without endangering the public.
(4) Pay the fee established by the board.
(5) Pass an examination provided by the board.

(b) The board shall issue an associate temporary permit to practice mental health counseling to an individual who:

(1) meets the educational requirements for a license as a mental health counselor;
(2) is pursuing the required clinical supervisory hours for a license as a mental health counselor; and
(3) pays a fee for the temporary permit set by the board.

An associate temporary permit issued under this subsection expires.
one (1) year after the date the permit is issued, without regard to
the number of times the individual passes or fails the required
examination to become a licensed mental health counselor. The
temporary permit may not be renewed.

SECTION 13. IC 25-23.6-10.5-1.5, AS ADDED BY P.L.225-2017,
SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2018]: Sec. 1.5. (a) An individual who applies for a license as
an addiction counselor associate must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual
has:

(A) received a baccalaureate or higher degree in addiction
counseling, or in a related area as determined by the board from:

(i) an eligible postsecondary educational institution that
meets the requirement under section 3(1) of this chapter; or

(ii) a foreign school that has a program of study that meets
the requirement under section 3(2) or 3(3) of this chapter;

and

(B) completed the educational requirements under section 5 of
this chapter.

(2) Furnish satisfactory evidence to the board that the individual
does not have a:

(A) conviction for a crime of violence (as defined in
IC 35-50-1-2(a)(1) through IC 35-50-1-2(a)(18)); or

(B) conviction in the previous two (2) years that has a direct
bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual
has not been the subject of a disciplinary action by a licensing or
certification agency of another state or jurisdiction on the grounds
that the individual was not able to practice as an addiction
counselor associate without endangering the public.

(4) Pass an examination established by the board.

(5) Pay the fee established by the board.

(b) The board shall issue an associate temporary permit to
practice addiction counseling or clinical addiction counseling to an
individual who:

(1) meets the educational requirements for a license as an
addiction counselor or clinical addiction counselor;

(2) is pursuing the required clinical supervisory hours for a
license as an addiction counselor or clinical addition
counselor; and

(3) pays a fee for the temporary permit set by the board.

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An associate temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed addiction counselor or clinical addiction counselor. The temporary permit may not be renewed."

Page 7, delete line 40.

Page 7, line 41, delete "meets" and insert "insurer shall provisionally credential the provider if the provider meets".

Page 7, line 42, after "completed" insert "and signed".

Page 8, line 1, after "form" insert "and any required supporting material".

Page 8, line 2, delete "credentialed." and insert "credentialed by the insurer in Indiana and in the same scope of practice for which the provider has applied for provisional credentialing.".

Page 8, delete lines 5 through 11, begin a new line block indented and insert:

"(4) The provider is a network provider with the insurer.

(f) The criteria for issuing provisional credentialing under subsection (e) may not be less stringent than the standards and guidelines governing provisional credentialing from the National Committee for Quality Assurance or its successor organization.".

Page 8, line 12, delete "approves the credentialing application of" and insert "fully credentials".

Page 8, line 15, delete "An insurer must make retroactive".

Page 8, delete lines 16 through 25 and insert "The insurer shall reimburse the provider at the rates determined by the contract between the provider and the insurer.

(h) If an insurer does not fully credential a provider that is provisionally credentialed under subsection (e), the provisional credentialing is terminated on the date the insurer notifies the provider of the adverse credentialing determination. The insurer is not required to reimburse for services rendered while the provider was provisionally credentialed.".

Page 8, line 32, delete "the provider is deemed to be provisionally credentialed".

Page 8, line 33, delete "by".

Page 8, line 33, after "organization" insert "shall provisionally credential the provider".

Page 8, line 35, after "completed" insert "and signed".

Page 8, line 36, after "form" insert "and any required supporting material".

Page 8, line 37, delete "credentialed." and insert "credentialed by
the health maintenance organization in Indiana and in the same scope of practice for which the provider has applied for provisional credentialing."

Page 8, delete lines 41 through 42.
Page 9, delete lines 1 through 6, begin a new line block indented and insert:

"(4) The provider is a network provider with the health maintenance organization.

(b) The criteria for issuing provisional credentialing under subsection (a) may not be less stringent than the standards and guidelines governing provisional credentialing from the National Committee for Quality Assurance or its successor organization.".

Page 9, line 7, delete "approves the".
Page 9, line 8, delete "credentialing application of" and insert "fully credentials".

Page 9, line 10, delete "A health".
Page 9, delete lines 11 through 22 and insert "The health maintenance organization shall reimburse the provider at the rates determined by the contract between the provider and the health maintenance organization.

(d) If a health maintenance organization does not fully credential a provider that is provisionally credentialed under subsection (a), the provisional credentialing is terminated on the date the health maintenance organization notifies the provider of the adverse credentialing determination. The health maintenance organization is not required to reimburse for services rendered while the provider was provisionally credentialed.".

Page 10, after line 14, begin a new paragraph and insert:

"SECTION 20. [EFFECTIVE UPON PASSAGE] (a) As used in this SECTION, "opioid treatment program" refers to a program:

(1) through which opioid agonist medication is dispensed to an individual in the treatment of opiate addiction and for which certification is required under 42 CFR Part 8; and

(2) that is subject to IC 12-23-18.

(b) The legislative council is urged to assign to an appropriate interim study committee the task of studying the impact that opioid treatment programs have on the neighborhoods and communities in the immediate area of the opioid treatment programs. An interim study committee assigned a study under this SECTION shall do the following:

(1) Consider the effect on the neighborhoods and communities in the immediate area that the opioid treatment programs
have on the following:
(A) Criminal activity, including violent crimes, property crimes, and drug related crimes.
(B) Emergency medical services, including the number of calls for assistance, runs provided, and cases of overdoses.
(C) The effect on the local economy, including the area property values.
(D) The effect on the residents' quality of life, including any additional traffic and excessive noises.
(E) Any other direct impacts that opioid treatment programs have on the surrounding area.

(2) Study other states' and localities' best practices to monitor and regulate opioid treatment programs to reduce negative impacts to the neighborhoods and communities in the immediate area of the opioid treatment programs.

(c) This SECTION expires January 1, 2019.

SECTION 21. An emergency is declared for this act.

and when so amended that said bill do pass.

(Reference is to HB 1007 as introduced.)

KIRCHHOFER

Committee Vote: yeas 12, nays 0.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1007, 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 33 and 34, begin a new paragraph and insert:
"SECTION 8. IC 12-23-21.2-1, AS ADDED BY P.L.125-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. The following definitions apply throughout this chapter:
(1) "Certified treatment provider" means a person certified by the division to provide opioid treatment services.
(2) "Division" means the division of mental health and addiction.\n
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"Opioid treatment services" means evidence based treatment and recovery support services provided in an inpatient, residential, or outpatient setting to individuals diagnosed with opioid use disorder. The services include:

(A) opioid reversal medication;
(B) addiction counseling;
(C) inpatient detoxification; and
(D) medication assisted treatment, including a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid dependence; and
(E) federal Food and Drug Administration approved percutaneous nerve stimulators for substance abuse disorders.

"Program" means the opioid treatment pilot program for opioid use disorder established under section 2 of this chapter.

SECTION 9. IC 12-23-21.2-5, AS ADDED BY P.L.125-2017, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 5. (a) The division shall collect data and report the outcomes of the services provided under this chapter to the legislative council in an electronic format under IC 5-14-6 not later than November 1, 2020.

(b) The report shall include the following:

1. The number of patients served by the program.
2. The average length of time spent in the program.
3. The number and type of opioid treatment services provided by the program, including the number of patients who received percutaneous nerve stimulators for substance abuse disorders.
4. The number of patients demonstrating improvement in functioning, as defined by the division, while receiving opioid treatment services in the program.
5. The number of patients who transitioned to opioid abstinence.
6. A summary description of the most effective opioid treatment services.
7. The patient relapse rate after leaving the program.
8. The number of patients arrested upon leaving the program, and the reason for the arrest, if known.
9. Recommendations to improve the effectiveness and efficiency of the program.

SECTION 10. IC 25-23.6-5-3.5, AS AMENDED BY P.L.192-2017, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 3.5. (a) The applicant for a license as a clinical social worker must have at least two (2) years of clinical social work
experience after receiving a graduate degree in social work and under
the supervision of a qualified supervisor as determined by the board.

(b) If an individual is obtaining the clinical social work experience
described in subsection (a) in Indiana, the individual must be licensed
as a social worker under section 1 of this chapter.

(c) A doctoral internship may be applied toward the supervised
clinical social work experience requirement.

(d) Except as provided in subsection (e), the clinical social work
experience requirement may be met by work performed at or away
from the premises of the qualified supervisor.

(e) The clinical social work requirement may not be performed away
from the qualified supervisor's premises if:

(1) the work is the independent private practice of clinical social
work; and

(2) the work is not performed at a place with the supervision of a
qualified supervisor available.

(f) Any supervised clinical social work experience hours that an
applicant accumulates under this chapter, including hours obtained
under a temporary permit issued under section 11(e) of this
chapter, do not expire and may be used by the applicant to satisfy the
supervised clinical social work experience requirements under this
chapter."

Page 5, delete lines 25 through 26, begin a new line block indented
and insert:

"(1) either:

(A) meets the educational requirements for a license as a
social worker; or

(B) holds a diploma in social work from an accredited
institution; and"

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass and be reassigned to the
Senate Committee on Appropriations.

(Reference is to HB 1007 as printed January 26, 2018.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 9, Nays 0.