

CONFERENCE COMMITTEE REPORT DIGEST FOR EHB 1172

Citations Affected: IC 10-14; IC 12-7-2; IC 12-31; IC 16-18-2-36.5; IC 16-20-1-14; IC 16-21-7.5; IC 16-22-8-34; IC 16-27-2-5; IC 16-28-11-5.5; IC 24-4-15; IC 25-1-7; IC 25-2.5; IC 25-13-1; IC 25-14-1; IC 25-20.5-1-1; IC 25-23-1; IC 25-23.3; IC 25-23.5-3-1.5; IC 25-23.6; IC 34-30-2-99.5; IC 25-23-1-28.

Synopsis: Health matters. Conference committee report for EHB 1172. Codifies the uniform emergency volunteer health practitioners act to provide a procedure for recognizing other states' licenses for health practitioners who volunteer to provide assistance during an emergency requiring significant health care assistance. Requires the office of the secretary of family and social services to form a nonprofit corporation to establish and operate an umbilical cord blood bank. Requires the nonprofit corporation to establish an umbilical cord blood donation initiative to promote public awareness concerning the medical benefits of umbilical cord blood. Requires beginning July 1, 2008, and until June 30, 2009, a home health agency and a personal services agency to obtain an employee's limited criminal history not more than three business days after the date that an employee begins to provide services. Establishes criteria when a nursing home is not required to provide cardiopulmonary resuscitation or other intervention on a patient who has died. Makes certain changes to the law concerning defibrillators in health clubs. Amends the definition of "regulated occupation". Removes physician referral requirements to receive acupuncture and specifies training and testing requirements. Amends the places a dental hygienist may practice under direct supervision, prescriptive supervision, and without supervision of a dentist. Establishes requirements for a dental hygienist to administer local dental anesthesia. Requires a dental assistant to work under the direct supervision of a dentist. Specifies certain procedures that may and may not be delegated to a dental assistant. Exempts licensed mental health counselors from the licensed hypnotist requirements. Establishes the interstate nurse licensure compact beginning July 1, 2009. Allows the state board of nursing to issue a registered nurse's license to certain applicants. Requires specified examination and registration fees to be used for the rehabilitation of impaired registered nurses and impaired licensed practical nurses. Allows an optometrist to refer patients to an occupational therapist. Establishes licensing and continuing education requirements for marriage and family therapist associates, and requires emergency rules for the implementation of the licensure. Requires the office of Medicaid policy and planning to receive approval to cover umbilical cord transplants under the Medicaid program. Makes conforming changes. Requires the health finance commission to address domestic violence programs. Repeals a provision that abolishes and transfers the rights,

powers, and duties of the state board of examination and registration of nurses. **(This conference committee report: (1) requires the social worker, marriage and family therapist, and mental health counselor board to adopt emergency rules regarding the implementation of the family and marriage therapist associate license; and (2) requires the health finance commission to recommend the proper agency to administer domestic violence programs for the state instead of requiring the commission to determine the proper agency to administer the program.)**

Effective: Upon passage; July 1, 2008.

CONFERENCE COMMITTEE REPORT

MADAM PRESIDENT:

Your Conference Committee appointed to confer with a like committee from the House upon Engrossed Senate Amendments to Engrossed House Bill No. 1172 respectfully reports that said two committees have conferred and agreed as follows to wit:

that the House recede from its dissent from all Senate amendments and that the House now concur in all Senate amendments to the bill and that the bill be further amended as follows:

- 1 Delete everything after the enacting clause and insert the following:
- 2 SECTION 1. IC 10-14-3-3 IS AMENDED TO READ AS
- 3 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. As used in this
- 4 chapter, "emergency management worker" includes any full-time or
- 5 part-time paid, volunteer, or auxiliary employee of:
 - 6 (1) the state;
 - 7 (2) other:
 - 8 (A) states;
 - 9 (B) territories; or
 - 10 (C) possessions;
 - 11 (3) the District of Columbia;
 - 12 (4) the federal government;
 - 13 (5) any neighboring country;
 - 14 (6) any political subdivision of an entity described in subdivisions
 - 15 (1) through (5); or
 - 16 (7) any agency or organization;
- 17 performing emergency management services at any place in Indiana
- 18 subject to the order or control of, or under a request of, the state
- 19 government or any political subdivision of the state. **The term includes**
- 20 **a volunteer health practitioner registered under IC 10-14-3.5.**
- 21 SECTION 2. IC 10-14-3-12 IS AMENDED TO READ AS
- 22 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 12. (a) The governor

1 shall declare a disaster emergency by executive order or proclamation
2 if the governor determines that a disaster has occurred or that the
3 occurrence or the threat of a disaster is imminent. The state of disaster
4 emergency continues until the governor:

5 (1) determines that the threat or danger has passed or the disaster
6 has been dealt with to the extent that emergency conditions no
7 longer exist; and

8 (2) terminates the state of disaster emergency by executive order
9 or proclamation.

10 A state of disaster emergency may not continue for longer than thirty
11 (30) days unless the state of disaster emergency is renewed by the
12 governor. The general assembly, by concurrent resolution, may
13 terminate a state of disaster emergency at any time. If the general
14 assembly terminates a state of disaster emergency under this
15 subsection, the governor shall issue an executive order or proclamation
16 ending the state of disaster emergency. All executive orders or
17 proclamations issued under this subsection must indicate the nature of
18 the disaster, the area or areas threatened, and the conditions which have
19 brought the disaster about or that make possible termination of the state
20 of disaster emergency. An executive order or proclamation under this
21 subsection shall be disseminated promptly by means calculated to bring
22 the order's or proclamation's contents to the attention of the general
23 public. Unless the circumstances attendant upon the disaster prevent or
24 impede, an executive order or proclamation shall be promptly filed
25 with the secretary of state and with the clerk of the city or town affected
26 or with the clerk of the circuit court.

27 (b) An executive order or proclamation of a state of disaster
28 emergency:

29 (1) activates the disaster response and recovery aspects of the
30 state, local, and interjurisdictional disaster emergency plans
31 applicable to the affected political subdivision or area; and

32 (2) is authority for:

33 (A) deployment and use of any forces to which the plan or
34 plans apply; and

35 (B) use or distribution of any supplies, equipment, materials,
36 and facilities assembled, stockpiled, or arranged to be made
37 available under this chapter or under any other law relating to
38 disaster emergencies.

39 (c) During the continuance of any state of disaster emergency, the
40 governor is commander-in-chief of the organized and unorganized
41 militia and of all other forces available for emergency duty. To the
42 greatest extent practicable, the governor shall delegate or assign
43 command authority by prior arrangement embodied in appropriate
44 executive orders or regulations. This section does not restrict the
45 governor's authority to delegate or assign command authority by orders
46 issued at the time of the disaster emergency.

47 (d) In addition to the governor's other powers, the governor may do
48 the following while the state of emergency exists:

49 (1) Suspend the provisions of any regulatory statute prescribing
50 the procedures for conduct of state business, or the orders, rules,
51 or regulations of any state agency if strict compliance with any of

- 1 these provisions would in any way prevent, hinder, or delay
 2 necessary action in coping with the emergency.
- 3 (2) Use all available resources of the state government and of
 4 each political subdivision of the state reasonably necessary to
 5 cope with the disaster emergency.
- 6 (3) Transfer the direction, personnel, or functions of state
 7 departments and agencies or units for performing or facilitating
 8 emergency services.
- 9 (4) Subject to any applicable requirements for compensation
 10 under section 31 of this chapter, commandeer or use any private
 11 property if the governor finds this action necessary to cope with
 12 the disaster emergency.
- 13 (5) Assist in the evacuation of all or part of the population from
 14 any stricken or threatened area in Indiana if the governor
 15 considers this action necessary for the preservation of life or other
 16 disaster mitigation, response, or recovery.
- 17 (6) Prescribe routes, modes of transportation, and destinations in
 18 connection with evacuation.
- 19 (7) Control ingress to and egress from a disaster area, the
 20 movement of persons within the area, and the occupancy of
 21 premises in the area.
- 22 (8) Suspend or limit the sale, dispensing, or transportation of
 23 alcoholic beverages, firearms, explosives, and combustibles.
- 24 (9) Make provision for the availability and use of temporary
 25 emergency housing.
- 26 (10) Allow persons who:
- 27 **(A) are registered as volunteer health practitioners by an**
 28 **approved registration system under IC 10-14-3.5; or**
 29 **(B) hold a license to practice medicine, dentistry, pharmacy,**
 30 **nursing, engineering, veterinary medicine, mortuary**
 31 **service, and similar other professions as may be specified by**
 32 **the governor to practice their respective profession in Indiana**
 33 **during the period of the state of emergency if the state in**
 34 **which a person's license was issued has a mutual aid compact**
 35 **for emergency management with Indiana.**
- 36 (11) Give specific authority to allocate drugs, foodstuffs, and
 37 other essential materials and services.
- 38 SECTION 3. IC 10-14-3.5 IS ADDED TO THE INDIANA CODE
 39 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
 40 JULY 1, 2008]:
- 41 **Chapter 3.5. Uniform Emergency Volunteer Health**
 42 **Practitioners Act**
- 43 **Sec. 1. As used in this chapter, "disaster relief organization"**
 44 **means an entity that provides emergency or disaster relief services**
 45 **that include health or veterinary services provided by volunteer**
 46 **health practitioners and:**
- 47 **(1) is designated or recognized as a provider of the services**
 48 **under a disaster response and recovery plan adopted by an**
 49 **agency of the federal government or the state emergency**
 50 **management agency; or**
 51 **(2) regularly plans and conducts the entity's activities in**

1 coordination with an agency of the federal government or the
2 state emergency management agency.

3 **Sec. 2.** As used in this chapter, "emergency" means an event or
4 condition that is an emergency, a disaster, or a public health
5 emergency under this article.

6 **Sec. 3.** As used in this chapter, "emergency declaration" means
7 a declaration of emergency issued by a person authorized to do so
8 under state or local laws of Indiana.

9 **Sec. 4.** As used in this chapter, "Emergency Management
10 Assistance Compact" means the federal interstate compact under
11 P.L.104-321, 110 Stat. 3877.

12 **Sec. 5.** As used in this chapter, "entity" means a person other
13 than an individual.

14 **Sec. 6.** As used in this chapter, "health facility" means an entity
15 licensed under the laws of Indiana or another state to provide
16 health or veterinary services.

17 **Sec. 7.** As used in this chapter, "health practitioner" means an
18 individual licensed under the laws of Indiana or another state to
19 provide health or veterinary services.

20 **Sec. 8.** As used in this chapter, "health services" means the
21 provision of treatment, care, advice, guidance, or other services or
22 supplies related to the health or death of individuals or human
23 populations to the extent necessary to respond to an emergency,
24 including:

25 (1) with respect to the physical or mental condition or
26 functional status of an individual or the structure or function
27 of the body:

28 (A) preventive, diagnostic, therapeutic, rehabilitative,
29 maintenance, or palliative care; and

30 (B) counseling, assessment, procedures, or other services;

31 (2) the sale or dispensing of a drug, a device, equipment, or
32 another item to an individual in accordance with a
33 prescription; and

34 (3) funeral, cremation, cemetery, or other mortuary services.

35 **Sec. 9.** As used in this chapter, "host entity" means an entity
36 operating in Indiana that uses volunteer health practitioners to
37 respond to an emergency.

38 **Sec. 10. (a)** As used in this chapter, "license" means
39 authorization by a state to engage in health or veterinary services
40 that are unlawful without the authorization.

41 (b) The term includes authorization under Indiana law to an
42 individual to provide health or veterinary services based upon a
43 national certification issued by a public or private entity.

44 **Sec. 11.** As used in this chapter, "person" means an individual,
45 a corporation, a business trust, a trust, a partnership, a limited
46 liability company, an association, a joint venture, a public
47 corporation, a government or governmental subdivision, an
48 agency, an instrumentality, or another legal or commercial entity.

49 **Sec. 12.** As used in this chapter, "scope of practice" means the
50 extent of the authorization to provide health or veterinary services
51 granted to a health practitioner by a license issued to the

1 practitioner in the state in which the principal part of the
 2 practitioner's services are rendered, including conditions imposed
 3 by the licensing authority.

4 **Sec. 13.** As used in this chapter, "state" means a state of the
 5 United States, the District of Columbia, Puerto Rico, the United
 6 States Virgin Islands, or a territory or an insular possession
 7 subject to the jurisdiction of the United States.

8 **Sec. 14.** As used in this chapter, "veterinary services" means the
 9 provision of treatment, care, advice, guidance, or other services or
 10 supplies related to the health or death of an animal or to animal
 11 populations to the extent necessary to respond to an emergency,
 12 including:

13 (1) diagnosis, treatment, or prevention of an animal disease,
 14 injury, or other physical or mental condition by the
 15 prescription, administration, or dispensing of vaccine,
 16 medicine, surgery, or therapy;

17 (2) use of a procedure for reproductive management; and

18 (3) monitoring and treatment of animal populations for
 19 diseases that have spread or demonstrate the potential to
 20 spread to humans.

21 **Sec. 15. (a)** As used in this chapter, "volunteer health
 22 practitioner" means a health practitioner who provides health or
 23 veterinary services, whether or not the practitioner receives
 24 compensation for those services.

25 (b) The term does not include a practitioner who receives
 26 compensation under a preexisting employment relationship with a
 27 host entity or affiliate that requires the practitioner to provide
 28 health services in Indiana, unless the practitioner is not a resident
 29 of Indiana and is employed by a disaster relief organization
 30 providing services in Indiana while an emergency declaration is in
 31 effect.

32 **Sec. 16.** This chapter applies to volunteer health practitioners
 33 who:

34 (1) are registered with a registration system that complies
 35 with section 18 of this chapter; and

36 (2) provide health or veterinary services in Indiana for a host
 37 entity while an emergency declaration is in effect.

38 **Sec. 17. (a)** While an emergency declaration is in effect, the state
 39 emergency management agency may limit, restrict, or otherwise
 40 regulate:

41 (1) the duration of practice by volunteer health practitioners;
 42 (2) the geographical areas in which volunteer health
 43 practitioners may practice;

44 (3) the types of volunteer health practitioners who may
 45 practice; and

46 (4) any other matters necessary to coordinate effectively the
 47 provision of health or veterinary services during the
 48 emergency.

49 (b) An order issued under subsection (a) may take effect
 50 immediately, without prior notice or comment, and is not a rule
 51 within the meaning of IC 4-22-2.

1 (c) A host entity that uses volunteer health practitioners to
2 provide health or veterinary services in Indiana shall:

3 (1) consult and coordinate the host entity's activities with the
4 state emergency management agency to the extent practicable
5 to provide for the efficient and effective use of volunteer
6 health practitioners; and

7 (2) comply with any laws other than this chapter relating to
8 the management of emergency health or veterinary services,
9 including this article.

10 Sec. 18. (a) To qualify as a volunteer health practitioner
11 registration system, a system must:

12 (1) accept applications for the registration of volunteer health
13 practitioners before or during an emergency;

14 (2) include information about the licensure and good standing
15 of health practitioners that is accessible by authorized
16 persons;

17 (3) be capable of confirming the accuracy of information
18 concerning whether a health practitioner is licensed and in
19 good standing before health services or veterinary services
20 are provided under this chapter; and

21 (4) meet one (1) of the following conditions:

22 (A) Be an emergency system for advance registration of
23 volunteer health practitioners established by a state and
24 funded through the Health Resources Services
25 Administration under section 319I of the federal Public
26 Health Services Act, 42 U.S.C. 247d-7b.

27 (B) Be a local unit consisting of trained and equipped
28 emergency response, public health, and medical personnel
29 formed under section 2801 of the federal Public Health
30 Services Act, 42 U.S.C. 300hh.

31 (C) Be operated by a:

32 (i) disaster relief organization;

33 (ii) licensing board;

34 (iii) national or regional association of licensing boards
35 or health practitioners;

36 (iv) health facility that provides comprehensive inpatient
37 and outpatient health care services, including a tertiary
38 care and teaching hospital; or

39 (v) governmental entity.

40 (D) Be designated by the state emergency management
41 agency as a registration system for purposes of this
42 chapter.

43 (b) While an emergency declaration is in effect, the state
44 emergency management agency, a person authorized to act on
45 behalf of the state emergency management agency, or a host entity
46 may confirm whether volunteer health practitioners used in
47 Indiana are registered with a registration system that complies
48 with subsection (a). Confirmation is limited to obtaining identities
49 of the practitioners from the system and determining whether the
50 system indicates that the practitioners are licensed and in good
51 standing.

1 (c) Upon request of a person in Indiana authorized under
2 subsection (b), or a similarly authorized person in another state, a
3 registration system located in Indiana shall notify the person of the
4 identities of volunteer health practitioners and whether the
5 practitioners are licensed and in good standing.

6 (d) A host entity is not required to use the services of a volunteer
7 health practitioner even if the practitioner is registered with a
8 registration system that indicates that the practitioner is licensed
9 and in good standing.

10 Sec. 19. (a) While an emergency declaration is in effect, a
11 volunteer health practitioner, registered with a registration system
12 that complies with section 18 of this chapter and licensed and in
13 good standing in the state upon which the practitioner's
14 registration is based, may practice in Indiana to the extent
15 authorized by this chapter as if the practitioner were licensed in
16 Indiana.

17 (b) A volunteer health practitioner qualified under subsection
18 (a) is not entitled to the protections of this chapter if the
19 practitioner is licensed in more than one (1) state and any license
20 of the practitioner is suspended, revoked, or subject to an agency
21 order limiting or restricting practice privileges or has been
22 voluntarily terminated under threat of sanction.

23 Sec. 20. (a) As used in this section:

24 (1) "credentialing" means obtaining, verifying, and assessing
25 the qualifications of a health practitioner to provide
26 treatment, care, or services in or for a health facility; and

27 (2) "privileging" means the authorizing by an appropriate
28 authority, such as a governing body, of a health practitioner
29 to provide specific treatment, care, or services at a health
30 facility subject to limits based on factors that include license,
31 education, training, experience, competence, health status,
32 and specialized skill.

33 (b) This chapter does not affect credentialing or privileging
34 standards of a health facility and does not preclude a health facility
35 from waiving or modifying those standards while an emergency
36 declaration is in effect.

37 Sec. 21. (a) Subject to subsections (b) and (c), a volunteer health
38 practitioner shall adhere to the scope of practice for a similarly
39 licensed practitioner established by the licensing provisions,
40 practice acts, or other laws of Indiana.

41 (b) Except as provided in subsection (c), this chapter does not
42 authorize a volunteer health practitioner to provide services that
43 are outside the practitioner's scope of practice, even if a similarly
44 licensed practitioner in Indiana would be permitted to provide the
45 services.

46 (c) The state emergency management agency may modify or
47 restrict the health or veterinary services that volunteer health
48 practitioners may provide under this chapter. An order under this
49 subsection may take effect immediately, without prior notice or
50 comment, and is not a rule within the meaning of IC 4-22-2.

51 (d) A host entity may restrict the health or veterinary services

1 that a volunteer health practitioner may provide under this
2 chapter.

3 (e) A volunteer health practitioner does not engage in
4 unauthorized practice unless the practitioner has reason to know
5 of a limitation, modification, or restriction under this section or
6 that a similarly licensed practitioner in Indiana would not be
7 permitted to provide the services. A volunteer health practitioner
8 has reason to know of a limitation, modification, or restriction or
9 that a similarly licensed practitioner in Indiana would not be
10 permitted to provide a service if:

11 (1) the practitioner knows the limitation, modification, or
12 restriction exists or that a similarly licensed practitioner in
13 Indiana would not be permitted to provide the service; or

14 (2) from all the facts and circumstances known to the
15 practitioner at the relevant time, a reasonable person would
16 conclude that the limitation, modification, or restriction exists
17 or that a similarly licensed practitioner in Indiana would not
18 be permitted to provide the service.

19 (f) In addition to the authority granted by laws of Indiana other
20 than this chapter to regulate the conduct of health practitioners, a
21 licensing board or other disciplinary authority in Indiana:

22 (1) may impose administrative sanctions upon a health
23 practitioner licensed in Indiana for conduct outside of Indiana
24 in response to an out-of-state emergency;

25 (2) may impose administrative sanctions upon a practitioner
26 not licensed in Indiana for conduct in Indiana in response to
27 an in-state emergency; and

28 (3) shall report any administrative sanctions imposed upon a
29 practitioner licensed in another state to the appropriate
30 licensing board or other disciplinary authority in any other
31 state in which the practitioner is known to be licensed.

32 (g) In determining whether to impose administrative sanctions
33 under subsection (f), a licensing board or other disciplinary
34 authority shall consider the circumstances in which the conduct
35 took place, including any exigent circumstances, and the
36 practitioner's scope of practice, education, training, experience,
37 and specialized skill.

38 **Sec. 22. (a) This chapter does not limit the rights, privileges, or**
39 **immunities provided to volunteer health practitioners by laws**
40 **other than this chapter. Except as provided in subsection (b), this**
41 **chapter does not affect requirements for the use of health**
42 **practitioners under the Emergency Management Assistance**
43 **Compact.**

44 (b) The state emergency management agency, under the
45 Emergency Management Assistance Compact or the Interstate
46 Emergency Management and Disaster Compact, may incorporate
47 into the emergency forces of Indiana volunteer health practitioners
48 who are not officers or employees of Indiana, a political
49 subdivision of Indiana, or a municipality or other local government
50 within Indiana.

51 **Sec. 23. The state emergency management agency may adopt**

1 rules under IC 4-22-2 to implement this chapter. In doing so, the
 2 state emergency management agency shall consult with and
 3 consider the recommendations of the entity established to
 4 coordinate the implementation of the Emergency Management
 5 Assistance Compact or the Interstate Emergency Management and
 6 Disaster Compact and shall also consult with and consider rules
 7 adopted by similarly empowered agencies in other states to
 8 promote uniformity of application of this chapter and make the
 9 emergency response systems in the various states reasonably
 10 compatible.

11 **Sec. 24.** In applying and construing this uniform act,
 12 consideration must be given to the need to promote uniformity of
 13 the law with respect to its subject matter among states that enact
 14 it.

15 SECTION 4. IC 12-7-2-118.3 IS ADDED TO THE INDIANA
 16 CODE AS A NEW SECTION TO READ AS FOLLOWS
 17 [EFFECTIVE JULY 1, 2008]: **Sec. 118.3. "Initiative", for purposes**
 18 **of IC 12-31-2, has the meaning set forth in IC 12-31-2-1.**

19 SECTION 5. IC 12-7-2-132.5 IS ADDED TO THE INDIANA
 20 CODE AS A NEW SECTION TO READ AS FOLLOWS
 21 [EFFECTIVE JULY 1, 2008]: **Sec. 132.5. "Nonprofit corporation",**
 22 **for purposes of IC 12-31, has the meaning set forth in IC 12-31-1-1.**

23 SECTION 6. IC 12-7-2-142.7 IS ADDED TO THE INDIANA
 24 CODE AS A NEW SECTION TO READ AS FOLLOWS
 25 [EFFECTIVE JULY 1, 2008]: **Sec. 142.7. "Postnatal donation", for**
 26 **purposes of IC 12-31, has the meaning set forth in IC 12-31-1-2.**

27 SECTION 7. IC 12-31 IS ADDED TO THE INDIANA CODE AS
 28 A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1,
 29 2008]:

30 **ARTICLE 31. UMBILICAL CORD BLOOD**

31 **Chapter 1. Public Umbilical Cord Blood Bank**

32 **Sec. 1.** As used in this article, "nonprofit corporation" refers to
 33 the Indiana nonprofit corporation formed by the office of the
 34 secretary under section 3 of this chapter to establish and operate
 35 a public umbilical cord blood bank.

36 **Sec. 2.** As used in this article, "postnatal donation" means any
 37 of the following donations by a patient to the public umbilical cord
 38 blood bank:

- 39 (1) Postnatal fluid, including umbilical cord blood.
- 40 (2) Postnatal tissue, including the placenta and tissue
 41 extracted from an umbilical cord.

42 **Sec. 3. (a)** The office of the secretary shall form a nonprofit
 43 corporation to establish and provide for the operation of a public
 44 umbilical cord blood bank to promote public health and to exercise
 45 other essential governmental functions.

46 **(b)** The office of the secretary shall adopt rules under IC 4-22-2
 47 concerning the protection of individual identifiable health
 48 information regarding the operation of the public umbilical cord
 49 blood bank.

50 **Sec. 4. (a)** The board of directors of the nonprofit corporation
 51 consists of the following:

- 1 **(1) The state health commissioner or the commissioner's**
 2 **designee.**
 3 **(2) The secretary or the secretary's designee.**
 4 **(3) The secretary of commerce appointed under IC 5-28-3-4**
 5 **or the secretary's designee.**
 6 **(4) The director of the state department of health's office of**
 7 **minority health.**
 8 **(5) The following individuals appointed by the governor:**
 9 **(A) One (1) president or chief executive officer of an**
 10 **Indiana based hospital.**
 11 **(B) One (1) research scientist with expertise in umbilical**
 12 **cord blood research.**
 13 **(C) One (1) ethicist with expertise in bioethics.**
 14 **(D) One (1) physician licensed under IC 25-22.5 who**
 15 **specializes in birthing and delivery.**
 16 **(E) One (1) representative of a donor umbilical cord blood**
 17 **bank facility.**
 18 **(F) One (1) member of the interagency state council on**
 19 **black and minority health established under IC 16-46-6.**
 20 **(b) The board of directors shall appoint an advisory board. At**
 21 **least fifty-one percent (51%) of the advisory board members must**
 22 **be research scientists with expertise in stem cell research.**
 23 **(c) The advisory board, using criteria established by the board**
 24 **of directors, is responsible for reviewing applications from**
 25 **research scientists, research institutions, and other persons**
 26 **interested in receiving a postnatal donation that is ineligible for**
 27 **transplant use from the public umbilical cord blood bank.**
 28 **(d) The board of directors may contract with a person to**
 29 **perform the management and administrative operations of the**
 30 **public umbilical cord blood bank. The person shall follow the**
 31 **federal Food and Drug Administration's current good tissue**
 32 **practices.**
 33 **(e) Subject to approval by the budget agency, the board of**
 34 **directors may, without the approval of the attorney general,**
 35 **employ legal counsel, technical experts, and other officers, agents,**
 36 **and employees that the board of directors considers necessary to**
 37 **carry out the efficient operation of a public umbilical cord blood**
 38 **bank.**
 39 **(f) The board of directors shall determine the terms and**
 40 **conditions of the participating agreement that is executed with**
 41 **each participating hospital.**
 42 **Sec. 5. The nonprofit corporation shall do the following:**
 43 **(1) Establish procedures and guidelines for collecting,**
 44 **maintaining, and receiving postnatal donations.**
 45 **(2) Educate health care professionals about the procedures**
 46 **and requirements for collecting and maintaining postnatal**
 47 **donations following the birth of a newborn infant.**
 48 **(3) Establish procedures concerning patient informed consent**
 49 **and privacy that are approved by an independent institutional**
 50 **review board selected by the board of directors.**
 51 **Sec. 6. (a) The nonprofit corporation shall accept postnatal**

1 donations at no charge or cost to the donor.

2 (b) The nonprofit corporation may allow the following to use the
3 postnatal donations:

4 (1) Transplant centers.

5 (2) Research centers approved by the nonprofit corporation
6 that will use the postnatal donation to promote medical
7 advances, life science research, or biotechnology research.

8 (3) Any other entity approved by the nonprofit corporation if
9 the entity will use the postnatal donation to promote medical
10 advances, life science research, or biotechnology research.

11 (c) Any postnatal donations maintained by the public umbilical
12 cord blood bank must be allocated as follows:

13 (1) Postnatal donations that are of transplantable quality
14 according to the National Marrow Donor Program, the
15 federal Food and Drug Administration's approved protocol,
16 or other relevant national practice and quality standards
17 must be allocated for medical transplants.

18 (2) Postnatal donations that do not meet the transplant quality
19 standards referred to in subdivision (1) and that are suitable
20 for research must be made available for scientific research or
21 medical treatments that comply with relevant national
22 practice and quality standards.

23 (d) The nonprofit corporation shall acquire and maintain
24 adequate liability insurance coverage.

25 Sec. 7. The nonprofit corporation may maintain postnatal
26 donations at no charge or cost to the donor.

27 Sec. 8. The nonprofit corporation may award a grant to a
28 person for work with postnatal donations.

29 Sec. 9. The nonprofit corporation shall report annually to the
30 health finance commission established by IC 2-5-23-3 concerning
31 the following:

32 (1) The implementation of the umbilical cord blood bank.

33 (2) The number of postnatal donations used for transplants
34 and the number of postnatal donations used for research.

35 Chapter 2. Umbilical Cord Blood Donation Initiative

36 Sec. 1. As used in this chapter, "initiative" refers to the
37 umbilical cord blood donation initiative established under section
38 2 of this chapter.

39 Sec. 2. The nonprofit corporation shall establish an umbilical
40 cord blood donation initiative to promote public awareness
41 concerning the following:

42 (1) A pregnant woman's option to make a postnatal donation
43 upon the birth of a newborn infant.

44 (2) The medical benefits of postnatal tissue and postnatal
45 fluids.

46 (3) The importance of donating umbilical cord blood to the
47 public umbilical cord blood bank.

48 Sec. 3. The nonprofit corporation may accept a grant from the
49 federal government or money from the state government or private
50 contributions to establish and implement the initiative.

51 Sec. 4. (a) The initiative must include the dissemination of

1 written material that includes the following:

2 (1) Information concerning the option that is available to
3 pregnant women to make a postnatal donation upon the birth
4 of a newborn infant.

5 (2) An explanation of the benefits of public umbilical cord
6 blood banking.

7 (3) The benefits of umbilical cord blood in accordance with
8 the National Marrow Donor Program or another federal Food
9 and Drug Administration approved protocol and the use of
10 umbilical cord blood for medical treatment, including the
11 following:

12 (A) A list of the diseases or conditions that have been
13 treated through the use of umbilical cord blood.

14 (B) A list of the diseases or conditions for which scientific
15 research indicates that treatment through the use of
16 umbilical cord blood is promising.

17 (4) Information on the public umbilical cord blood bank.

18 (5) Information concerning the process by which postnatal
19 tissue and postnatal fluid are collected and the steps that a
20 pregnant woman must take before her child is born to
21 arrange to have the postnatal tissue and postnatal fluid
22 collected and donated.

23 (b) The nonprofit corporation shall:

24 (1) update the material described in subsection (a); and

25 (2) distribute the material to the following persons that treat
26 pregnant women:

27 (A) Physicians licensed under IC 25-22.5.

28 (B) Participating hospitals.

29 (C) Ambulatory surgical centers.

30 (D) Health clinics.

31 (E) Maternity homes registered under IC 16-26-1.

32 (F) Nurse midwives licensed under IC 25-23-1-13.1.

33 **Sec. 5.** The nonprofit corporation shall develop a process for
34 physicians, nurse midwives, birthing centers, and participating
35 hospitals to inform eligible candidates of the opportunity to make
36 postnatal donations to the public umbilical cord blood bank
37 following delivery of a newborn infant.

38 **Sec. 6.** The nonprofit corporation that establishes the initiative
39 described in this chapter must meet all the requirements and
40 responsibilities set forth in IC 23-17.

41 **Sec. 7. (a)** Any intellectual property developed by the nonprofit
42 corporation establishing the initiative under this chapter is the
43 property of the nonprofit corporation. A donor must consent to
44 release to the public umbilical cord blood bank any property right
45 related to the postnatal donation, including any claim of
46 intellectual property rights derived from the postnatal donation.

47 (b) The entire right, title, and interest in and to any intellectual
48 property derived from a postnatal donation transfers with the
49 postnatal tissue and postnatal fluid after the postnatal donation is
50 allocated by the public umbilical cord blood bank for research
51 purposes.

1 SECTION 8. IC 16-18-2-36.5, AS ADDED BY P.L.96-2005,
 2 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 3 JULY 1, 2008]: Sec. 36.5. (a) "Birthing center", for purposes of
 4 IC 16-21-2 **and IC 16-21-7.5**, means a freestanding entity that has the
 5 sole purpose of delivering a normal or uncomplicated pregnancy.

6 (b) The term does not include a hospital that is licensed as a hospital
 7 under IC 16-21-2.

8 SECTION 9. IC 16-20-1-14, AS AMENDED BY P.L.121-2007,
 9 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 10 JULY 1, 2008]: Sec. 14. (a) Local health officers may appoint and
 11 employ public health nurses, environmental health specialists,
 12 computer programmers, clerks, other personnel, and an administrator
 13 of public health, subject to the confirmation of the local board of
 14 health, as is necessary and reasonable to carry out and perform the
 15 duties of the local health department.

16 (b) Except as provided in subsection (d), the employees of local
 17 health departments shall perform any of the duties of the health officer
 18 delegated by the health officer, with the approval of the local board of
 19 health, on the basis of an agent-principal relation.

20 (c) The public health personnel of local health departments:

- 21 (1) must meet the minimum qualification requirements of the
- 22 local board of health;
- 23 (2) by local ordinance, become part of the county classification
- 24 system for the respective public health personnel positions; and
- 25 (3) shall perform additional duties prescribed by the rules of the
- 26 state department and local board of health under the general
- 27 supervision of the local health officer.

28 (d) If an appointee or employee of a local health officer is not a
 29 licensed water well driller under IC 25-39-3, the appointee or employee
 30 may not inspect the drilling of a water well.

31 (e) ~~After a dentist licensed under IC 25-14 who is employed by a~~
 32 ~~local health department examines a child enrolled in any grade up to~~
 33 ~~and including grade 12 and prescribes a treatment plan in writing for~~
 34 ~~the child, a licensed dental hygienist employed by the local health~~
 35 ~~department may, without supervision by the dentist, provide the child~~
 36 ~~with the following treatment in accordance with the treatment plan:~~

- 37 (1) Prophylaxis.
- 38 (2) Fluoride application.
- 39 (3) Sealants.

40 ~~However, the treatment must be completed not more than ninety (90)~~
 41 ~~days after the dentist prescribes the treatment plan. This subsection~~
 42 ~~expires June 30, 2009.~~

43 SECTION 10. IC 16-21-7.5 IS ADDED TO THE INDIANA CODE
 44 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
 45 JULY 1, 2008]:

46 **Chapter 7.5. Hospital and Birthing Center Requirement**
 47 **Regarding Umbilical Cord Blood Donation**

48 **Sec. 1. As used in this chapter, "postnatal donation" has the**
 49 **meaning set forth in IC 12-31-1-2.**

50 **Sec. 2. Before a hospital or birthing center participates in**
 51 **collecting donations for the public umbilical cord blood bank**

1 established under IC 12-31-1-3(a), the hospital or birthing center
 2 shall enter into a written agreement with the public umbilical cord
 3 blood bank establishing the:

4 (1) conditions of the hospital's or birthing center's
 5 participation; and

6 (2) obligations of the hospital or birthing center;

7 in the umbilical cord blood donation initiative established under
 8 IC 12-31-2-2.

9 Sec. 3. (a) Except as provided in section 4 of this chapter, a
 10 participating hospital or birthing center licensed under this article
 11 must offer a patient who delivers a newborn infant at the
 12 participating hospital or birthing center the option of making a
 13 postnatal donation following delivery of the newborn infant.

14 (b) A patient may not be charged for the collection or storage of
 15 a donation or for a donation to the public umbilical cord blood
 16 bank established under IC 12-31-1-3(a).

17 Sec. 4. (a) A participating hospital or birthing center is not
 18 required to collect a postnatal donation if either of the following
 19 applies:

20 (1) In the professional judgment of a physician licensed under
 21 IC 25-22.5 or a nurse midwife licensed under IC 25-23-1-13.1,
 22 the collection would threaten the health of the mother or the
 23 infant.

24 (2) The postnatal donation is contrary to the moral principles
 25 or beliefs of the religious denomination with which the
 26 participating hospital or birthing center is affiliated.

27 (b) An employee of a participating hospital or birthing center is
 28 not required to collect a postnatal donation if the postnatal
 29 donation is contrary to the religious principles or beliefs of the
 30 employee.

31 Sec. 5. A participating hospital or birthing center shall
 32 cooperate with the nonprofit corporation (as defined in
 33 IC 12-31-1-1) in accomplishing the public health goal of
 34 maximizing postnatal donations.

35 Sec. 6. A hospital or birthing center is not required to enter into
 36 an agreement with the public umbilical cord blood bank and may
 37 enter into contracts concerning postnatal tissue and postnatal
 38 fluids with any person.

39 SECTION 11. IC 16-22-8-34, AS AMENDED BY P.L.121-2007,
 40 SECTION 2, AS AMENDED BY P.L.194-2007, SECTION 4, AND
 41 AS AMENDED BY P.L.215-2007, SECTION 2, IS CORRECTED
 42 AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1,
 43 2008]: Sec. 34. (a) The board or corporation may do all acts necessary
 44 or reasonably incident to carrying out the purposes of this chapter,
 45 including the following:

46 (1) As a municipal corporation, sue and be sued in any court with
 47 jurisdiction.

48 (2) To serve as the exclusive local board of health and local
 49 department of health within the county with the powers and duties
 50 conferred by law upon local boards of health and local
 51 departments of health.

- 1 (3) To adopt and enforce ordinances consistent with Indiana law
 2 and administrative rules for the following purposes:
- 3 (A) To protect property owned or managed by the corporation.
 4 (B) To determine, prevent, and abate public health nuisances.
 5 (C) To establish *isolation and quarantine regulations impose*
 6 *restrictions on persons having infectious or contagious*
 7 *diseases and contacts of the persons, and regulate the*
 8 *disinfection of premises in accordance with IC 16-41-9.*
 9 (D) To license, regulate, and establish minimum sanitary
 10 standards for the operation of a business handling, producing,
 11 processing, preparing, manufacturing, packing, storing,
 12 selling, distributing, or transporting articles used for food,
 13 drink, confectionery, or condiment in the interest of the public
 14 health.
 15 (E) To control:
 16 (i) rodents, mosquitos, and other animals, including insects,
 17 capable of transmitting microorganisms and disease to
 18 humans and other animals; and
 19 (ii) the animals' breeding places.
 20 (F) To require persons to connect to available sewer systems
 21 and to regulate the disposal of domestic or sanitary sewage by
 22 private methods. However, the board and corporation have no
 23 jurisdiction over publicly owned or financed sewer systems or
 24 sanitation and disposal plants.
 25 (G) To control rabies.
 26 (H) For the sanitary regulation of water supplies for domestic
 27 use.
 28 (I) To protect, promote, or improve public health. For public
 29 health activities and to enforce public health laws, the state
 30 health data center described in IC 16-19-10 shall provide
 31 health data, medical information, and epidemiological
 32 information to the corporation.
 33 (J) To detect, report, prevent, and control disease affecting
 34 public health.
 35 (K) To investigate and diagnose health problems and health
 36 hazards.
 37 (L) To regulate the sanitary and structural conditions of
 38 residential and nonresidential buildings and unsafe premises.
 39 *(M) To regulate the remediation of lead hazards.*
 40 ~~(N)~~ (N) To license and regulate the design, construction, and
 41 operation of public pools, spas, and beaches.
 42 ~~(O)~~ (O) To regulate the storage, containment, handling, use,
 43 and disposal of hazardous materials.
 44 ~~(P)~~ (P) To license and regulate tattoo *parlors* and body
 45 piercing facilities.
 46 *(Q) To regulate the storage and disposal of waste tires.*
 47 (4) To manage the corporation's hospitals, medical facilities, and
 48 mental health facilities.
 49 (5) To *furnish provide school based health and nursing furnish*
 50 **health and nursing** services *to elementary and secondary*
 51 *schools within the county.* **to elementary and secondary schools**

- 1 **within the county.**
- 2 (6) To furnish medical care to ~~the indigent within~~ insured and
- 3 uninsured residents of the county. ~~unless medical care is~~
- 4 ~~furnished to the indigent by the division of family resources.~~
- 5 (7) To furnish dental services to the insured and uninsured
- 6 residents of the county. ~~including the services as provided in~~
- 7 ~~subsection (c) until the expiration of subsection (c).~~
- 8 ~~(7) (8) To determine the establish~~ public health policies and
- 9 programs. ~~to be carried out and administered by the corporation.~~
- 10 ~~(8) (9) To adopt an annual budget ordinance and levy taxes.~~
- 11 ~~(9) (10) To incur indebtedness in the name of the corporation.~~
- 12 ~~(10) (11) To organize the personnel and functions of the~~
- 13 corporation into divisions. ~~and subdivisions to carry out the~~
- 14 ~~corporation's powers and duties and to consolidate, divide, or~~
- 15 ~~abolish the divisions and subdivisions.~~
- 16 ~~(11) (12) To acquire and dispose of property.~~
- 17 ~~(12) (13) To receive charitable contributions and gifts as provided~~
- 18 ~~in 26 U.S.C. 170.~~
- 19 ~~(13) (14) To make charitable contributions and gifts.~~
- 20 ~~(14) (15) To establish a charitable foundation as provided in 26~~
- 21 ~~U.S.C. 501.~~
- 22 ~~(15) (16) To receive and distribute federal, state, local, or private~~
- 23 ~~grants.~~
- 24 ~~(16) (17) To receive and distribute grants from charitable~~
- 25 ~~foundations.~~
- 26 ~~(17) (18) To establish nonprofit corporations and enter into~~
- 27 ~~partnerships and joint ventures to carry out the purposes of the~~
- 28 ~~corporation. This subdivision does not authorize the merger of the~~
- 29 ~~corporation with a hospital licensed under IC 16-21.~~
- 30 ~~(18) (19) To erect, improve, remodel, or repair corporation~~
- 31 ~~buildings. or structures or improvements to existing buildings or~~
- 32 ~~structures.~~
- 33 ~~(19) (20) To determine matters of policy regarding internal~~
- 34 ~~organization and operating procedures.~~
- 35 ~~(20) (21) To do the following:~~
- 36 (A) Adopt a schedule of reasonable charges for nonresidents
- 37 of the county for medical and mental health services.
- 38 (B) Collect the charges from the patient, ~~the patient's~~
- 39 ~~insurance company, or from the governmental unit where the~~
- 40 ~~patient resided at the time of the service: a government~~
- 41 ~~program.~~
- 42 (C) Require security for the payment of the charges.
- 43 ~~(21) (22) To adopt a schedule of and to collect reasonable charges~~
- 44 ~~for patients able to pay in full or in part: medical and mental~~
- 45 ~~health services.~~
- 46 ~~(22) (23) To enforce Indiana laws, administrative rules,~~
- 47 ~~ordinances, and the code of the health and hospital corporation of~~
- 48 ~~the county.~~
- 49 ~~(23) (24) To purchase supplies, materials, and equipment. for the~~
- 50 ~~corporation.~~
- 51 ~~(24) (25) To employ personnel and establish personnel policies.~~

- 1 ~~to carry out the duties, functions, and powers of the corporation.~~
- 2 ~~(25)~~ (26) To employ attorneys admitted to practice law in Indiana.
- 3 ~~(26)~~ (27) To acquire, erect, equip, and operate the corporation's
- 4 hospitals, medical facilities, and mental health facilities.
- 5 ~~(27)~~ (28) To dispose of surplus property in accordance with a
- 6 policy by the board.
- 7 ~~(28)~~ (29) To determine the duties of officers and division
- 8 directors.
- 9 ~~(29)~~ (30) To fix the compensation of the officers and division
- 10 directors.
- 11 ~~(30)~~ (31) To carry out the purposes and object of the corporation.
- 12 ~~(31)~~ (32) To obtain loans for hospital expenses in amounts and
- 13 upon terms agreeable to the board. The board may secure the
- 14 loans by pledging accounts receivable or other security in hospital
- 15 funds.
- 16 ~~(32)~~ (33) To establish fees for licenses, services, and records. The
- 17 corporation may accept payment by credit card for fees.
- 18 *IC 5-14-3-8(d) does not apply to fees established under this*
- 19 *subdivision for certificates of birth, death, or stillbirth*
- 20 *registration.*
- 21 ~~(33)~~ (34) *To use levied taxes or other funds to make*
- 22 *intergovernmental transfers to the state to fund governmental*
- 23 *health care programs, including Medicaid and Medicaid*
- 24 *supplemental programs.*

25 (b) The board shall exercise the board's powers and duties in a
 26 manner consistent with Indiana law, administrative rules, and the code
 27 of the health and hospital corporation of the county.

28 *(c) After a dentist licensed under IC 25-14 who is employed by a*
 29 *local health department or the health and hospital corporation*
 30 *examines a child enrolled in any grade up to and including grade 12*
 31 *and prescribes a treatment plan in writing for the child; a licensed*
 32 *dental hygienist employed by the local health department or the health*
 33 *and hospital corporation may, without supervision by the dentist,*
 34 *provide the child with the following treatment in accordance with the*
 35 *treatment plan:*

- 36 *(1) Prophylaxis:*
- 37 *(2) Fluoride application:*
- 38 *(3) Sealants:*

39 *However, the treatment must be completed not more than ninety (90)*
 40 *days after the dentist prescribes the treatment plan. This subsection*
 41 *expires June 30, 2009.*

42 SECTION 12. IC 16-27-2-5, AS AMENDED BY P.L.197-2007,
 43 SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 44 UPON PASSAGE]: Sec. 5. (a) Except as provided in subsection (b), a
 45 person who operates a home health agency under IC 16-27-1 or a
 46 personal services agency under IC 16-27-4 may not employ a person to
 47 provide services in a patient's or client's temporary or permanent
 48 residence if a ~~determination of~~ that person's **limited criminal history**
 49 **check or** national criminal history background check indicates that the
 50 person has been convicted of any of the following:

- 51 (1) Rape (IC 35-42-4-1).

- 1 (2) Criminal deviate conduct (IC 35-42-4-2).
- 2 (3) Exploitation of an endangered adult (IC 35-46-1-12).
- 3 (4) Failure to report battery, neglect, or exploitation of an
- 4 endangered adult (IC 35-46-1-13).
- 5 (5) Theft (IC 35-43-4), if the conviction for theft occurred less
- 6 than ten (10) years before the person's employment application
- 7 date.
- 8 **(6) A felony that is substantially equivalent to a felony listed**
- 9 **in subdivisions (1) through (2) for which the conviction was**
- 10 **entered in another state.**

11 (b) A home health agency or personal services agency may not
 12 employ a person to provide services in a patient's or client's temporary
 13 or permanent residence for more than twenty-one (21) calendar days
 14 without receipt of a ~~determination of~~ that person's **limited criminal**
 15 **history or** national criminal history background check required by
 16 section 4 of this chapter, unless either the state police department or the
 17 Federal Bureau of Investigation under IC 10-13-3-39 is responsible for
 18 failing to provide ~~the determination of~~ the person's **limited criminal**
 19 **history or** national criminal history background check to the home
 20 health agency or personal services agency within the time required
 21 under this subsection.

22 SECTION 13. IC 16-28-11-5.5 IS ADDED TO THE INDIANA
 23 CODE AS A NEW SECTION TO READ AS FOLLOWS
 24 [EFFECTIVE JULY 1, 2008]: **Sec. 5.5. (a) This section does not**
 25 **apply to the implementation of a do not resuscitate order.**

26 **(b) This article does not require an employee of a health facility**
 27 **to provide cardiopulmonary resuscitation (CPR) or other**
 28 **intervention on a patient if a registered nurse licensed under**
 29 **IC 25-23 or a physician licensed under IC 25-22.5 who is employed**
 30 **by the health facility has determined that the following criteria**
 31 **have been met:**

- 32 **(1) The patient has experienced an unwitnessed cessation of**
- 33 **circulatory and respiratory functions.**
- 34 **(2) The patient is unresponsive.**
- 35 **(3) The patient's pupils are fixed and dilated.**
- 36 **(4) The patient's body temperature indicates hypothermia.**
- 37 **(5) The patient has generalized cyanosis.**
- 38 **(6) The patient has livor mortis.**

39 SECTION 14. IC 24-4-15-5, AS ADDED BY P.L.129-2007,
 40 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 41 JULY 1, 2008]: **Sec. 5. An owner or operator of a health club shall do**
 42 **the following:**

- 43 (1) Ensure that a defibrillator is:
- 44 **(A) located on the health club premises and is easily accessible**
- 45 **to the health club staff, members, and guests; or**
- 46 **(B) if:**
- 47 **(i) the health club is located on the premises of a business**
- 48 **of which the health club is a part; and**
- 49 **(ii) the business has an emergency response team;**
- 50 **located on the premises of the business and easily**
- 51 **accessible to the emergency response team.**

- 1 (2) Employ at least one (1) individual who:
 2 (A) has satisfactorily completed a course ~~approved by the~~
 3 ~~American Red Cross or the American Heart Association~~
 4 **consistent with the most current national guidelines for;**
 5 and
 6 (B) is currently certified in;
 7 cardiopulmonary resuscitation and defibrillator use.
- 8 (3) Reasonably ensure that at least one (1) individual described
 9 ~~under in~~ subdivision (2) is on the health club premises when staff
 10 is present at the health club during the health club's business
 11 hours.
- 12 (4) A health club that is not staffed must have the following on
 13 the premises:
 14 (A) A telephone for 911 telephone call access.
 15 (B) A sign in plain view containing an advisory warning that
 16 indicates that members of the unstaffed health ~~spa club~~ should
 17 be aware that working out alone may pose risks to ~~the a~~ health
 18 ~~spa club~~ member's health and safety.
 19 (C) A sign in plain view providing instruction in the use of the
 20 ~~automated external~~ defibrillator and in cardiopulmonary
 21 resuscitation.
- 22 (5) Ensure compliance with the requirements set forth in
 23 IC 16-31-6.5.
- 24 (6) Post a sign at each entrance to the health club that indicates
 25 the location of each defibrillator.
- 26 SECTION 15. IC 24-4-15-7, AS ADDED BY P.L.129-2007,
 27 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 28 JULY 1, 2008]: Sec. 7. ~~(a)~~ The:
 29 (1) state department and the division of fire and building safety
 30 may inspect a health club at any time:
 31 ~~(1)~~ (A) according to rules adopted by the state department; or
 32 ~~(2)~~ (B) in response to a filed complaint alleging
 33 noncompliance with this chapter; **and**
 34 **(2) fire department that serves the area in which a health club**
 35 **is located shall inspect the health club for compliance with**
 36 **this chapter if the health club is inspected as part of an**
 37 **inspection program under IC 36-8-17-8.**
 38 ~~(b) A fire department may inspect a health club for compliance with~~
 39 ~~this chapter as part of an inspection program under IC 36-8-17-8.~~
- 40 SECTION 16. IC 25-1-7-1, AS AMENDED BY P.L.185-2007,
 41 SECTION 4, AS AMENDED BY P.L.193-2007, SECTION 4, AND
 42 AS AMENDED BY P.L.200-2007, SECTION 5, IS AMENDED TO
 43 READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. As used
 44 in this chapter:
 45 "Board" means the appropriate agency listed in the definition of
 46 regulated occupation in this section.
 47 "Director" refers to the director of the division of consumer
 48 protection.
 49 "Division" refers to the division of consumer protection, office of
 50 the attorney general.
 51 "Licensee" means a person who is:

- 1 (1) licensed, certified, or registered by a board listed in this
 2 section; and
 3 (2) the subject of a complaint filed with the division.
 4 "Person" means an individual, a partnership, a limited liability
 5 company, or a corporation.
 6 "Regulated occupation" means an occupation in which a person is
 7 licensed, certified, or registered by one (1) of the following:
 8 (1) Indiana board of accountancy (IC 25-2.1-2-1).
 9 (2) Board of registration for architects **and** landscape architects
 10 **and registered interior designers** (IC 25-4-1-2).
 11 (3) Indiana auctioneer commission (IC 25-6.1-2-1).
 12 (4) State board of barber examiners (IC 25-7-5-1).
 13 (5) State boxing commission (IC 25-9-1).
 14 (6) Board of chiropractic examiners (IC 25-10-1).
 15 (7) State board of cosmetology examiners (IC 25-8-3-1).
 16 (8) State board of dentistry (IC 25-14-1).
 17 (9) State board of funeral and cemetery service (IC 25-15-9).
 18 (10) State board of registration for professional engineers
 19 (IC 25-31-1-3).
 20 (11) Indiana state board of health facility administrators
 21 (IC 25-19-1).
 22 (12) Medical licensing board of Indiana (IC 25-22.5-2).
 23 (13) Indiana state board of nursing (IC 25-23-1).
 24 (14) Indiana optometry board (IC 25-24).
 25 (15) Indiana board of pharmacy (IC 25-26).
 26 (16) Indiana plumbing commission (IC 25-28.5-1-3).
 27 (17) Board of podiatric medicine (IC 25-29-2-1).
 28 (18) Board of environmental health specialists (IC 25-32-1).
 29 (19) State psychology board (IC 25-33).
 30 (20) Speech-language pathology and audiology board
 31 (IC 25-35.6-2).
 32 (21) Indiana real estate commission (IC 25-34.1-2).
 33 (22) Indiana board of veterinary medical examiners (IC 15-5-1.1).
 34 (23) Department of natural resources for purposes of licensing
 35 water well drillers under IC 25-39-3.
 36 (24) Respiratory care committee (IC 25-34.5).
 37 (25) Private ~~detectives investigator and security guard~~ licensing
 38 board ~~(IC 25-30-1-5.1)~~ (IC 25-30-1-5.2).
 39 (26) Occupational therapy committee (IC 25-23.5).
 40 (27) Social worker, marriage and family therapist, and mental
 41 health counselor board (IC 25-23.6).
 42 (28) Real estate appraiser licensure and certification board
 43 (IC 25-34.1-8).
 44 (29) State board of registration for land surveyors
 45 (IC 25-21.5-2-1).
 46 (30) Physician assistant committee (IC 25-27.5).
 47 (31) Indiana athletic trainers board (IC 25-5.1-2-1).
 48 (32) Indiana dietitians certification board (IC 25-14.5-2-1).
 49 (33) Indiana hypnotist committee (IC 25-20.5-1-7).
 50 (34) Indiana physical therapy committee (IC 25-27).
 51 (35) Manufactured home installer licensing board (IC 25-23.7).

1 (36) Home inspectors licensing board (IC 25-20.2-3-1).

2 (37) *State department of health, for out-of-state mobile health*
3 **care entities.**

4 ~~(37)~~ **(38)** *State board of massage therapy (IC 25-21.8-2-1).*

5 ~~(37)~~ ~~(38)~~ **(39)** Any other occupational or professional agency
6 created after June 30, 1981.

7 SECTION 17. IC 25-2.5-2-3 IS AMENDED TO READ AS
8 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. (a) An applicant
9 may, upon the payment of a fee established by the board, be granted a
10 license if the applicant:

11 (1) submits satisfactory evidence to the board that the applicant
12 has been licensed to practice acupuncture in another state or
13 authorized in another country ~~under qualifications substantially~~
14 **equivalent to those specified in this chapter for a license to**
15 **practice acupuncture;**

16 **(2) meets the requirements of section 1(1) through 1(4) of this**
17 **chapter; and**

18 **(3) shows to the satisfaction of the board that the applicant**
19 **has:**

20 **(A) successfully completed a clean needle technique course**
21 **substantially equivalent to a clean needle technique course**
22 **approved by a national acupuncture association approved**
23 **by the board;**

24 **(B) successfully completed a three (3) year postsecondary**
25 **training program or acupuncture college program that**
26 **meets the standards substantially equivalent to the**
27 **standards for a three (3) year postsecondary training**
28 **program or acupuncture college program approved by a**
29 **national acupuncture association approved by the board;**
30 **and**

31 **(C) passed an examination substantially equivalent to the**
32 **examination required by a national acupuncture**
33 **association approved by the board.**

34 (b) An applicant may, upon the payment of a fee established by the
35 board, be granted a professional's license to practice acupuncture if the
36 applicant submits satisfactory evidence to the board that the applicant
37 is a:

38 (1) chiropractor licensed under IC 25-10;

39 (2) dentist licensed under IC 25-14; or

40 (3) podiatrist licensed under IC 25-29;

41 with at least two hundred (200) hours of acupuncture training.

42 (c) The board shall:

43 (1) compile, at least once every two (2) years, a list of courses and
44 institutions that provide training approved for the purpose of
45 qualifying an individual for a professional's license under
46 subsection (b); and

47 (2) adopt rules that set forth procedures for the case by case
48 approval of training under subsection (b).

49 (d) If an individual's license described in subsection (b)(1), (b)(2),
50 or (b)(3) is subject to any restrictions as the result of disciplinary action
51 taken against the individual by the board that regulates the individual's

1 profession, the same restrictions shall be applied to the individual's
2 professional's license to practice acupuncture.

3 (e) An individual's professional's license issued under subsection (b)
4 shall be suspended if the individual's license described under
5 subsection (b)(1), (b)(2), or (b)(3) is suspended.

6 (f) An individual's professional's license issued under subsection (b)
7 shall be revoked if the individual's license described under subsection
8 (b)(1), (b)(2), or (b)(3) is revoked.

9 (g) The practice of acupuncture by an individual issued a
10 professional's license under subsection (b) is limited to the scope of
11 practice of the individual's license described in subsection (b)(1),
12 (b)(2), or (b)(3).

13 SECTION 18. IC 25-2.5-3-3 IS AMENDED TO READ AS
14 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. (a) Subject to section
15 1 of this chapter, it is unlawful to practice acupuncture without a
16 license issued under this article.

17 ~~(b) Subject to subsection (c); it is unlawful for a licensed
18 acupuncturist, other than a chiropractor licensed under IC 25-10;
19 podiatrist licensed under IC 25-29; or dentist licensed under IC 25-14;
20 to practice acupuncture on a patient unless the acupuncturist obtains:~~

21 ~~(1) a written letter of referral; and~~

22 ~~(2) either:~~

23 ~~(A) a written diagnosis of the patient; or~~

24 ~~(B) written documentation relating to the condition for which
25 the patient receives acupuncture;~~

26 ~~from an individual licensed under IC 25-22.5 within the twelve (12)
27 months immediately preceding the date of acupuncture treatment.~~

28 ~~(c) An acupuncturist licensed under this article may practice
29 auricular acupuncture on a patient for the purpose of treating
30 alcoholism; substance abuse; or chemical dependency without a written
31 letter of referral or written diagnosis from a physician licensed under
32 IC 25-22.5.~~

33 ~~(d) (b) If a licensed acupuncturist practices acupuncture on a patient
34 after having obtained a written letter of referral or written diagnosis of
35 the patient from a physician licensed under IC 25-22.5, as described in
36 subsection (b); the physician is immune from civil liability relating to
37 the patient's or acupuncturist's use of that diagnosis or referral except
38 for acts or omissions of the physician that amount to gross negligence
39 or willful or wanton misconduct.~~

40 SECTION 19. IC 25-13-1-2 IS AMENDED TO READ AS
41 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2. As used in this
42 article:

43 (a) "Dental hygienist" means one who is especially educated and
44 trained in the science and art of maintaining the dental health of the
45 individual or community through prophylactic or preventive measures
46 applied to the teeth and adjacent structures.

47 (b) "License" means the license to practice dental hygiene issued by
48 the state board of dentistry to dental hygienist candidates who
49 satisfactorily pass the board's examinations.

50 (c) "Board" means the state board of dentistry established by
51 IC 25-14-1.

1 (d) "Proprietor dentist" means a licensed dentist who is the owner
2 and operator of the dental office in which he practices the profession
3 of dentistry and who employs at least one (1) dentist or dental hygienist
4 to supplement his operation and conduct of his dental office.

5 (e) "Employer dentist" means a proprietor dentist who employs at
6 least one (1) dental hygienist to supplement his dental service to his
7 clientele.

8 (f) "Referral" means a recommendation that a patient seek further
9 dental care from a licensed dentist, but not a specific dentist.

10 (g) "Screening" means to identify and assess the health of the hard
11 or soft tissues of the human oral cavity.

12 (h) "Public health setting" means a location, including a mobile
13 health care vehicle, where the public is invited for health care,
14 information, and services by a program sponsored or endorsed by a
15 governmental entity or charitable organization.

16 (i) **"Direct supervision" means that a licensed dentist is**
17 **physically present in the facility when patient care is provided by**
18 **the dental hygienist.**

19 (j) **"Prescriptive supervision" means that a licensed dentist is**
20 **not required to be physically present in the facility when patient**
21 **care is provided by the dental hygienist if a licensed dentist has**
22 **examined the patient and has prescribed the patient care within the**
23 **previous forty-five (45) days.**

24 SECTION 20. IC 25-13-1-10, AS AMENDED BY P.L.121-2007,
25 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
26 JULY 1, 2008]: Sec. 10. (a) A licensed dental hygienist may ~~be~~
27 ~~employed to~~ practice dental hygiene in Indiana in the following:

28 (1) ~~The A dental office or clinical setting, except as described~~
29 **in subdivisions (3) through (5), where the dental hygienist is**
30 **practicing under the direct supervision** of a legally practicing
31 proprietor dentist.

32 (2) A dental school or dental hygiene school to teach and
33 demonstrate the practice of dental hygiene **if direct supervision**
34 **by a licensed dentist is provided for training on providing**
35 **local anesthetics by injection.**

36 (3) The dental clinic of any public, parochial, or private school or
37 other institution supported by public or private funds in which the
38 licensee is employed by the state department of health or any
39 county or city board of health or board of education or school
40 trustee or parochial authority or the governing body of any private
41 school ~~However, institutional practice, other than dental hygiene~~
42 ~~instruction and dental prophylaxis for children up to and~~
43 ~~including grade 12 pupils at all times must be where the dental~~
44 **hygienist is practicing** under the **direct or prescriptive**
45 supervision of a licensed dentist.

46 (4) The dental clinic of a bona fide hospital, sanitarium, or
47 ~~eleemosynary charitable~~ institution duly established and being
48 operated under the laws of Indiana in which the licensee is
49 employed by the directors or governing board of such hospital,
50 sanitarium, or institution. However, such practice must be under
51 the **direct or prescriptive** supervision at all times of a licensed

1 dentist who is a staff member of the hospital or sanitarium or a
2 member of the governing board of the institution.

3 (5) ~~The A:~~

4 (A) ~~fixed charitable dental care clinic; or an industrial or a~~
5 ~~commercial establishment in which the licensee's services are~~

6 (B) ~~public health setting; or~~

7 (C) ~~correctional institution;~~

8 **that has been approved by the board and where the dental**
9 **hygienist is under the direct or prescriptive supervision of a**
10 **licensed dentist.**

11 (b) A licensed dental hygienist may provide without supervision the
12 following:

13 (1) Dental hygiene instruction and in-service training without
14 restriction on location.

15 (2) ~~Dental prophylaxis for children up to and including grade 12~~
16 ~~if the dental hygienist is employed by any of the following:~~

17 (A) ~~The state department of health;~~

18 (B) ~~The department of education;~~

19 (C) ~~The elementary or secondary school where the services are~~
20 ~~provided.~~

21 (3) ~~(2) Screening and referrals for any person in a public health~~
22 ~~setting.~~

23 (4) ~~Services as provided in IC 16-20-1-14 and IC 16-22-8-34.~~

24 SECTION 21. IC 25-13-1-10.6 IS ADDED TO THE INDIANA
25 CODE AS A NEW SECTION TO READ AS FOLLOWS
26 [EFFECTIVE JULY 1, 2008]: **Sec. 10.6. (a) A licensed dental**
27 **hygienist may administer local dental anesthetics under the direct**
28 **supervision of a licensed dentist if the dental hygienist has:**

29 (1) **completed board approved educational requirements,**
30 **including cardiopulmonary resuscitation and emergency care**
31 **training; and**

32 (2) **received a board issued dental hygiene anesthetic permit.**

33 (b) **Local dental anesthetics do not include nitrous oxide or**
34 **similar anesthetics.**

35 SECTION 22. IC 25-13-1-11 IS AMENDED TO READ AS
36 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 11. A person is deemed
37 to be practicing dental hygiene within the meaning of this chapter who:

38 (1) uses the titles "Licensed Dental Hygienist", "Dental
39 Hygienist", or the letters "L.D.H." or "D.H." in connection with
40 his or her name;

41 (2) holds himself or herself out to the public in any manner that
42 he or she can or will render services as a dental hygienist;

43 (3) removes calcific deposits or accretions from the surfaces of
44 human teeth or cleans or polishes such teeth;

45 (4) applies and uses within the patient's mouth such antiseptic
46 sprays, washes, or medicaments for the control or prevention of
47 dental caries as his or her employer dentist may direct;

48 (5) treats gum disease; ~~or~~

49 (6) uses impressions and x-ray photographs for treatment
50 purposes; **or**

51 (7) **administers local dental anesthetics, except for the**

1 **administration of local dental anesthetics by:**

2 **(A) a dentist as provided in IC 25-14-1-23(a)(6); or**

3 **(B) a physician licensed under IC 25-22.5.**

4 SECTION 23. IC 25-14-1-1.5, AS AMENDED BY P.L.1-2006,
5 SECTION 430, IS AMENDED TO READ AS FOLLOWS
6 [EFFECTIVE JULY 1, 2008]: Sec. 1.5. As used in this article:

7 "Agency" refers to the Indiana professional licensing agency
8 established by IC 25-1-5-3.

9 "Board" refers to the state board of dentistry established under this
10 chapter.

11 "Deep sedation" means a controlled state of depressed
12 consciousness, accompanied by partial loss of protective reflexes,
13 including inability to respond purposefully to verbal command,
14 produced by a pharmacologic method.

15 **"Dental assistant" means a qualified dental staff member, other
16 than a licensed dental hygienist, who assists a licensed dentist with
17 patient care while working under the dentist's direct supervision.**

18 **"Direct supervision" means that a licensed dentist is physically
19 present in the facility when patient care is provided by the dental
20 assistant.**

21 "General anesthesia" means a controlled state of unconsciousness,
22 accompanied by partial or complete loss of protective reflexes,
23 including inability to independently maintain an airway and respond
24 purposefully to physical stimulation or verbal command, produced by
25 a pharmacologic method.

26 "Light parenteral conscious sedation" means a minimally depressed
27 level of consciousness under which an individual retains the ability to
28 independently and continuously maintain an airway and respond
29 appropriately to physical stimulation and verbal command, produced
30 by an intravenous pharmacologic method.

31 SECTION 24. IC 25-14-1-23, AS AMENDED BY P.L.121-2007,
32 SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
33 JULY 1, 2008]: Sec. 23. (a) A person is practicing dentistry within the
34 meaning of this chapter if the person does any of the following:

35 (1) Uses the word "dentist" or "dental surgeon", the letters
36 "D.D.S." or "D.M.D.", or other letters or titles in connection with
37 dentistry.

38 (2) Directs and controls the treatment of patients within a place
39 where dental services are performed.

40 (3) Advertises or permits to be advertised by sign, card, circular,
41 handbill, newspaper, radio, or otherwise that ~~he~~ **the person** can
42 or will attempt to perform dental operations of any kind.

43 (4) Offers to diagnose or professes to diagnose or treats or
44 professes to treat any of the lesions or diseases of the human oral
45 cavity, teeth, gums, or maxillary or mandibular structures.

46 (5) Extracts human teeth or corrects malpositions of the teeth or
47 jaws.

48 (6) Except as provided in IC 25-13-1-10.5 **and IC 25-13-1-10.6,**
49 administers dental anesthetics.

50 (7) Uses x-ray pictures for dental diagnostic purposes.

51 (8) Makes impressions or casts of any oral tissues or structures for

1 the purpose of diagnosis or treatment thereof or for the
 2 construction, repair, reproduction, or duplication of any prosthetic
 3 device to alleviate or cure any oral lesion or replace any lost oral
 4 structures, tissue, or teeth.

5 (9) Advertises to the public by any method, except trade and
 6 professional publications, to furnish, supply, construct, reproduce,
 7 repair, or adjust any prosthetic denture, bridge, appliance, or other
 8 structure to be worn in the human mouth.

9 (10) Is the employer of a dentist who is hired to provide dental
 10 services.

11 (11) Directs or controls the use of dental equipment or dental
 12 material while the equipment or material is being used to provide
 13 dental services. However, a person may lease or provide advice
 14 or assistance concerning dental equipment or dental material if
 15 the person does not restrict or interfere with the custody, control,
 16 or use of the equipment or material by the dentist. This
 17 subdivision does not prevent a dental hygienist who is licensed
 18 under IC 25-13 from owning dental equipment or dental materials
 19 within the dental hygienist's scope of practice.

20 (12) Directs, controls, or interferes with a dentist's clinical
 21 judgment.

22 (13) Exercises direction or control over a dentist through a written
 23 contract concerning the following areas of dental practice:

24 (A) The selection of a patient's course of treatment.

25 (B) Referrals of patients, except for requiring referrals to be
 26 within a specified provider network, subject to the exceptions
 27 under IC 27-13-36-5.

28 (C) Content of patient records.

29 (D) Policies and decisions relating to refunds, if the refund
 30 payment would be reportable under federal law to the National
 31 Practitioner Data Bank, and warranties.

32 (E) The clinical content of advertising.

33 (F) Final decisions relating to the employment of dental office
 34 personnel.

35 However, this subdivision does not prohibit a person from
 36 providing advice or assistance concerning the areas of dental
 37 practice referred to in this subdivision or an insurer (as defined in
 38 IC 27-1-26-1) from carrying out the applicable provisions of
 39 IC 27 under which the insurer is licensed.

40 However, a person does not have to be a dentist to be a manufacturer
 41 of dental prostheses.

42 (b) In addition to subsection (a), a person is practicing dentistry who
 43 directly or indirectly by any means or method furnishes, supplies,
 44 constructs, reproduces, repairs, or adjusts any prosthetic denture,
 45 bridge, appliance, or any other structure to be worn in the human
 46 mouth and delivers the resulting product to any person other than the
 47 duly licensed dentist upon whose written work authorization the work
 48 was performed. A written work authorization shall include the
 49 following:

50 (1) The name and address of the dental laboratory to which it is
 51 directed.

- 1 (2) The case identification.
- 2 (3) A specification of the materials to be used.
- 3 (4) A description of the work to be done and, if necessary,
- 4 diagrams thereof.
- 5 (5) The date of issuance of the authorization.
- 6 (6) The signature and address of the licensed dentist or other
- 7 dental practitioner by whom the work authorization is issued.

8 A separate work authorization shall be issued for each patient of the
9 issuing licensed dentist or other dental practitioner for whom dental
10 technological work is to be performed.

11 (c) This section shall not apply to those procedures which a legally
12 licensed and practicing dentist may delegate to ~~competent office~~
13 ~~personnel~~ **a dental assistant** as to which procedures the dentist
14 exercises **direct** supervision and responsibility. ~~Delegated~~

15 (d) Procedures **delegated by a dentist** may not include ~~either:~~ **the**
16 **following:**

17 (1) Those procedures which require professional judgment and
18 skill such as diagnosis, treatment planning, ~~and~~ the cutting of hard
19 or soft tissues, or any intraoral impression which would lead to
20 the fabrication of ~~an appliance, which, when worn by the patient,~~
21 ~~would come in direct contact with hard or soft tissues and which~~
22 ~~could result in tissue irritation or injury; or a final prosthetic~~
23 **appliance.**

24 (2) ~~those~~ **Except for procedures described in subsections (g)**
25 **and (h), procedures delegated to a dental assistant may not**
26 **include** procedures allocated under IC 25-13-1 to a licensed
27 dental ~~hygienists:~~ **hygienist.**

28 (e) This chapter shall not prevent dental students from performing
29 dental operations under the supervision of competent instructors within
30 the dental school or a university recognized by the board or in any
31 public clinic under the supervision of the authorized superintendent of
32 such clinic authorized under the authority and general direction of the
33 board of health or school board of any city or town in Indiana.

34 ~~(d)~~ (f) Licensed pharmacists of this state may fill prescriptions of
35 licensed dentists of this state for any drug necessary in the practice of
36 dentistry.

37 (g) **Notwithstanding IC 25-13-1-11(4), a dental assistant who has**
38 **completed a board approved curriculum may apply medicaments**
39 **for the control or prevention of dental caries under the direct**
40 **supervision of a licensed dentist. The curriculum must include**
41 **instruction on the following:**

- 42 (1) **Ethics and jurisprudence.**
- 43 (2) **Reasons for fluorides.**
- 44 (3) **Systemic fluoride.**
- 45 (4) **Topical fluoride.**
- 46 (5) **Fluoride application.**
- 47 (6) **Laboratory work on topical fluoride applications and**
- 48 **patient competency.**

49 (h) **Notwithstanding IC 25-13-1-11(3), a dental assistant who has**
50 **completed a board approved curriculum may polish the coronal**
51 **surface of teeth under the direct supervision of a licensed dentist.**

1 **The curriculum must include instruction on the following:**

- 2 (1) **Ethics and jurisprudence.**
 3 (2) **Plaque and materia alba.**
 4 (3) **Intrinsic and extrinsic stain.**
 5 (4) **Abrasive agents.**
 6 (5) **Use of a slow speed hand piece, prophylaxis cup, and occlusal**
 7 **polishing brush.**
 8 (6) **Theory of selective polishing.**
 9 (7) **Laboratory work concerning slow speed hand piece, hand**
 10 **dexterity, and patient competency.**

11 SECTION 25. IC 25-20.5-1-1 IS AMENDED TO READ AS
 12 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. This chapter does not
 13 apply to the following **if the person has received training in the**
 14 **performance of hypnotism:**

- 15 (1) A licensed dentist practicing dentistry under IC 25-14.
 16 (2) A licensed physician practicing medicine under IC 25-22.5.
 17 (3) A licensed osteopath practicing medicine under IC 25-22.5.
 18 (4) A licensed psychologist practicing psychology under
 19 IC 25-33.
 20 (5) A ~~certified~~ **licensed** social worker or clinical social worker
 21 practicing social work or clinical social work under IC 25-23.6.
 22 (6) A registered nurse licensed under IC 25-23.
 23 (7) A ~~certified~~ **licensed** marriage and family therapist practicing
 24 marriage and family therapy under IC 25-23.6.
 25 **(8) A licensed mental health counselor practicing mental**
 26 **health counseling under IC 25-23.6.**
 27 ~~(8)~~ **(9)** An individual who teaches Lamaze prenatal and delivery
 28 relaxation techniques to pregnant women.
 29 ~~(9)~~ **(10)** A law enforcement officer who:
 30 (A) is trained in hypnotism; and
 31 (B) uses hypnosis only for law enforcement purposes.
 32 ~~(10)~~ **(11)** A licensed chiropractor practicing the science of
 33 chiropractic under IC 25-10.
 34 ~~(11)~~ **(12)** An individual who performs hypnotism exclusively for
 35 entertainment or amusement purposes at a theater, night club, or
 36 other place that offers entertainment to the public for
 37 consideration or promotional purposes.

38 SECTION 26. IC 25-23-1-1.1, AS AMENDED BY P.L.1-2007,
 39 SECTION 170, IS AMENDED TO READ AS FOLLOWS
 40 [EFFECTIVE JULY 1, 2008]: Sec. 1.1. (a) As used in this chapter,
 41 "registered nurse" means a person who holds a valid license issued:

- 42 (1) under this chapter; **or**
 43 (2) **by a party state (as defined in IC 25-23.3-2-11); and**

44 who bears primary responsibility and accountability for nursing
 45 practices based on specialized knowledge, judgment, and skill derived
 46 from the principles of biological, physical, and behavioral sciences.

47 (b) As used in this chapter, "registered nursing" means performance
 48 of services which include but are not limited to:

- 49 (1) assessing health conditions;
 50 (2) deriving a nursing diagnosis;
 51 (3) executing a nursing regimen through the selection,

- 1 performance, and management of nursing actions based on
 2 nursing diagnoses;
 3 (4) advocating the provision of health care services through
 4 collaboration with or referral to other health professionals;
 5 (5) executing regimens delegated by a physician with an
 6 unlimited license to practice medicine or osteopathic medicine, a
 7 licensed dentist, a licensed chiropractor, a licensed optometrist,
 8 or a licensed podiatrist;
 9 (6) teaching, administering, supervising, delegating, and
 10 evaluating nursing practice;
 11 (7) delegating tasks which assist in implementing the nursing,
 12 medical, or dental regimen; or
 13 (8) performing acts which are approved by the board or by the
 14 board in collaboration with the medical licensing board of
 15 Indiana.

16 (c) As used in this chapter, "assessing health conditions" means the
 17 collection of data through means such as interviews, observation, and
 18 inspection for the purpose of:

- 19 (1) deriving a nursing diagnosis;
 20 (2) identifying the need for additional data collection by nursing
 21 personnel; and
 22 (3) identifying the need for additional data collection by other
 23 health professionals.

24 (d) As used in this chapter, "nursing regimen" means preventive,
 25 restorative, maintenance, and promotion activities which include
 26 meeting or assisting with self-care needs, counseling, and teaching.

27 (e) As used in this chapter, "nursing diagnosis" means the
 28 identification of needs which are amenable to nursing regimen.

29 SECTION 27. IC 25-23-1-1.2, AS AMENDED BY P.L.1-2007,
 30 SECTION 171, IS AMENDED TO READ AS FOLLOWS
 31 [EFFECTIVE JULY 1, 2008]: Sec. 1.2. As used in this chapter,
 32 "licensed practical nurse" means a person who holds a valid license
 33 issued under this chapter **or by a party state (as defined in**
 34 **IC 25-23.3-2-11)** and who functions at the direction of:

- 35 (1) a registered nurse;
 36 (2) a physician with an unlimited license to practice medicine or
 37 osteopathic medicine;
 38 (3) a licensed dentist;
 39 (4) a licensed chiropractor;
 40 (5) a licensed optometrist; or
 41 (6) a licensed podiatrist;

42 in the performance of activities commonly performed by practical
 43 nurses and requiring special knowledge or skill.

44 SECTION 28. IC 25-23-1-7, AS AMENDED BY P.L.1-2007,
 45 SECTION 172, IS AMENDED TO READ AS FOLLOWS
 46 [EFFECTIVE JULY 1, 2008]: Sec. 7. (a) The board shall do the
 47 following:

- 48 (1) Adopt under IC 4-22-2 rules necessary to enable it to carry
 49 into effect this chapter.
 50 (2) Prescribe standards and approve curricula for nursing
 51 education programs preparing persons for licensure under this

- 1 chapter.
- 2 (3) Provide for surveys of such programs at such times as it
- 3 considers necessary.
- 4 (4) Accredite such programs as meet the requirements of this
- 5 chapter and of the board.
- 6 (5) Deny or withdraw accreditation from nursing education
- 7 programs for failure to meet prescribed curricula or other
- 8 standards.
- 9 (6) Examine, license, and renew the license of qualified
- 10 applicants.
- 11 (7) Issue subpoenas, compel the attendance of witnesses, and
- 12 administer oaths to persons giving testimony at hearings.
- 13 (8) Cause the prosecution of all persons violating this chapter and
- 14 have power to incur necessary expenses for these prosecutions.
- 15 (9) Adopt rules under IC 4-22-2 that do the following:
- 16 (A) Prescribe standards for the competent practice of
- 17 registered, practical, and advanced practice nursing.
- 18 (B) Establish with the approval of the medical licensing board
- 19 created by IC 25-22.5-2-1 requirements that advanced practice
- 20 nurses must meet to be granted authority to prescribe legend
- 21 drugs and to retain that authority.
- 22 (C) Establish, with the approval of the medical licensing board
- 23 created by IC 25-22.5-2-1, requirements for the renewal of a
- 24 practice agreement under section 19.4 of this chapter, which
- 25 shall expire on October 31 in each odd-numbered year.
- 26 (10) Keep a record of all its proceedings.
- 27 (11) Collect and distribute annually demographic information on
- 28 the number and type of registered nurses and licensed practical
- 29 nurses employed in Indiana.
- 30 **(12) Adopt rules and administer the interstate nurse licensure**
- 31 **compact under IC 25-23.3.**
- 32 (b) The board may do the following:
- 33 (1) Create ad hoc subcommittees representing the various nursing
- 34 specialties and interests of the profession of nursing. Persons
- 35 appointed to a subcommittee serve for terms as determined by the
- 36 board.
- 37 (2) Utilize the appropriate subcommittees so as to assist the board
- 38 with its responsibilities. The assistance provided by the
- 39 subcommittees may include the following:
- 40 (A) Recommendation of rules necessary to carry out the duties
- 41 of the board.
- 42 (B) Recommendations concerning educational programs and
- 43 requirements.
- 44 (C) Recommendations regarding examinations and licensure
- 45 of applicants.
- 46 (3) Appoint nurses to serve on each of the ad hoc subcommittees.
- 47 **(4) Withdraw from the interstate nurse licensure compact**
- 48 **under IC 25-23.2 (repealed).**
- 49 **(5) If requested by the nonprofit corporation formed under**
- 50 **IC 12-31-1-3, provide assistance to the public umbilical cord**
- 51 **blood bank and umbilical cord blood donation initiative.**

1 (c) Nurses appointed under subsection (b) must:

- 2 (1) be committed to advancing and safeguarding the nursing
3 profession as a whole; and
4 (2) represent nurses who practice in the field directly affected by
5 a subcommittee's actions.

6 SECTION 29. IC 25-23-1-11, AS AMENDED BY P.L.1-2007,
7 SECTION 173, IS AMENDED TO READ AS FOLLOWS
8 [EFFECTIVE JULY 1, 2008]: Sec. 11. (a) Any person who applies to
9 the board for a license to practice as a registered nurse must:

10 (1) not have:

- 11 (A) been convicted of a crime that has a direct bearing on the
12 person's ability to practice competently; or
13 (B) committed an act that would constitute a ground for a
14 disciplinary sanction under IC 25-1-9;

15 (2) have completed:

- 16 (A) the prescribed curriculum and met the graduation
17 requirements of a state accredited program of registered
18 nursing that only accepts students who have a high school
19 diploma or its equivalent as determined by the board; or
20 (B) the prescribed curriculum and graduation requirements of
21 a nursing education program in a foreign country that is
22 substantially equivalent to a board approved program as
23 determined by the board. The board may by rule adopted under
24 IC 4-22-2 require an applicant under this subsection to
25 successfully complete an examination approved by the board
26 to measure the applicant's qualifications and background in the
27 practice of nursing and proficiency in the English language;
28 and

29 (3) be physically and mentally capable of and professionally
30 competent to safely engage in the practice of nursing as
31 determined by the board.

32 The board may not require a person to have a baccalaureate degree in
33 nursing as a prerequisite for licensure.

34 (b) The applicant must pass an examination in such subjects as the
35 board may determine.

36 (c) The board may issue by endorsement a license to practice as a
37 registered nurse to an applicant who has been licensed as a registered
38 nurse, by examination, under the laws of another state if the applicant
39 presents proof satisfactory to the board that, at the time that the
40 applicant applies for an Indiana license by endorsement, the applicant
41 holds a current license in another state and possesses credentials and
42 qualifications that are substantially equivalent to requirements in
43 Indiana for licensure by examination. The board may specify by rule
44 what constitutes substantial equivalence under this subsection.

45 (d) The board may issue by endorsement a license to practice as a
46 registered nurse to an applicant who:

47 (1) has completed the English version of the:

- 48 (A) Canadian Nurse Association Testing Service Examination
49 (CNAT); or
50 (B) **Canadian Registered Nurse Examination (CRNE);**

51 (2) achieved the passing score required on the examination at the

1 time the examination was taken;

2 (3) is currently licensed in a Canadian province or in another
3 state; and

4 (4) meets the other requirements under this section.

5 (e) Each applicant for examination and registration to practice as a
6 registered nurse shall pay a fee set by the board, ~~The board may set a~~
7 ~~proctoring fee to be paid by applicants who are graduates of a state~~
8 ~~accredited school in another state. a part of which must be used for~~
9 **the rehabilitation of impaired registered nurses and impaired**
10 **licensed practical nurses.** Payment of the fee or fees shall be made by
11 the applicant prior to the date of examination. **The lesser of the**
12 **following amounts from fees collected under this subsection shall**
13 **be deposited in the impaired nurses account of the state general**
14 **fund established by section 34 of this chapter:**

15 (1) **Twenty-five percent (25%) of the license application fee**
16 **per license applied for under this section.**

17 (2) **The cost per license to operate the impaired nurses**
18 **program, as determined by the Indiana professional licensing**
19 **agency.**

20 (f) Any person who holds a license to practice as a registered nurse
21 in:

22 (1) Indiana; or

23 (2) **a party state (as defined in IC 25-23.3-2-11);**

24 may use the title "Registered Nurse" and the abbreviation "R.N.". No
25 other person shall practice or advertise as or assume the title of
26 registered nurse or use the abbreviation of "R.N." or any other words,
27 letters, signs, or figures to indicate that the person using same is a
28 registered nurse.

29 SECTION 30. IC 25-23-1-12, AS AMENDED BY P.L.1-2007,
30 SECTION 174, IS AMENDED TO READ AS FOLLOWS
31 [EFFECTIVE JULY 1, 2008]: Sec. 12. (a) A person who applies to the
32 board for a license to practice as a licensed practical nurse must:

33 (1) not have been convicted of:

34 (A) an act which would constitute a ground for disciplinary
35 sanction under IC 25-1-9; or

36 (B) a crime that has a direct bearing on the person's ability to
37 practice competently;

38 (2) have completed:

39 (A) the prescribed curriculum and met the graduation
40 requirements of a state accredited program of practical nursing
41 that only accepts students who have a high school diploma or
42 its equivalent, as determined by the board; or

43 (B) the prescribed curriculum and graduation requirements of
44 a nursing education program in a foreign country that is
45 substantially equivalent to a board approved program as
46 determined by the board. The board may by rule adopted under
47 IC 4-22-2 require an applicant under this subsection to
48 successfully complete an examination approved by the board
49 to measure the applicant's qualifications and background in the
50 practice of nursing and proficiency in the English language;
51 and

- 1 (3) be physically and mentally capable of, and professionally
 2 competent to, safely engage in the practice of practical nursing as
 3 determined by the board.
- 4 (b) The applicant must pass an examination in such subjects as the
 5 board may determine.
- 6 (c) The board may issue by endorsement a license to practice as a
 7 licensed practical nurse to an applicant who has been licensed as a
 8 licensed practical nurse, by examination, under the laws of another
 9 state if the applicant presents proof satisfactory to the board that, at the
 10 time of application for an Indiana license by endorsement, the applicant
 11 possesses credentials and qualifications that are substantially
 12 equivalent to requirements in Indiana for licensure by examination. The
 13 board may specify by rule what shall constitute substantial equivalence
 14 under this subsection.
- 15 (d) Each applicant for examination and registration to practice as a
 16 practical nurse shall pay a fee set by the board, ~~The board may set a~~
 17 ~~proctoring fee to be paid by applicants who are graduates of a state~~
 18 ~~accredited school in another state: a part of which must be used for~~
 19 ~~the rehabilitation of impaired registered nurses and impaired~~
 20 ~~licensed practical nurses.~~ Payment of the fees shall be made by the
 21 applicant before the date of examination. **The lesser of the following**
 22 **amounts from fees collected under this subsection shall be**
 23 **deposited in the impaired nurses account of the state general fund**
 24 **established by section 34 of this chapter:**
- 25 (1) **Twenty-five percent (25%) of the license application fee**
 26 **per license applied for under this section.**
- 27 (2) **The cost per license to operate the impaired nurses**
 28 **program, as determined by the Indiana professional licensing**
 29 **agency.**
- 30 (e) Any person who holds a license to practice as a licensed
 31 practical nurse in:
- 32 (1) Indiana; or
 33 (2) **a party state (as defined in IC 25-23.3-2-11);**
 34 may use the title "Licensed Practical Nurse" and the abbreviation
 35 "L.P.N.". No other person shall practice or advertise as or assume the
 36 title of licensed practical nurse or use the abbreviation of "L.P.N." or
 37 any other words, letters, signs, or figures to indicate that the person
 38 using them is a licensed practical nurse.
- 39 SECTION 31. IC 25-23-1-16.1, AS AMENDED BY P.L.1-2006,
 40 SECTION 451, IS AMENDED TO READ AS FOLLOWS
 41 [EFFECTIVE JULY 1, 2008]: Sec. 16.1. (a) A license to practice as a
 42 registered nurse expires on October 31 in each odd-numbered year.
 43 Failure to renew the license on or before the expiration date will
 44 automatically render the license invalid without any action by the
 45 board.
- 46 (b) A license to practice as a licensed practical nurse expires on
 47 October 31 in each even-numbered year. Failure to renew the license
 48 on or before the expiration date will automatically render the license
 49 invalid without any action by the board.
- 50 (c) The procedures and fee for renewal shall be set by the board.
- 51 (d) At the time of license renewal, each registered nurse and each

1 licensed practical nurse shall pay a renewal fee, a portion of which
 2 shall be for the rehabilitation of impaired registered nurses and
 3 impaired licensed practical nurses. The lesser of the following amounts
 4 from fees collected under this subsection shall be deposited in the
 5 impaired nurses account of the state general fund established by section
 6 34 of this chapter:

7 (1) ~~Sixteen percent (16%)~~ **Twenty-five percent (25%)** of the
 8 license renewal fee per license renewed under this section.

9 (2) The cost per license to operate the impaired nurses program,
 10 as determined by the Indiana professional licensing agency.

11 SECTION 32. IC 25-23-1-27, AS AMENDED BY P.L.1-2007,
 12 SECTION 175, IS AMENDED TO READ AS FOLLOWS
 13 [EFFECTIVE JULY 1, 2008]: Sec. 27. A person who:

14 (1) sells or fraudulently obtains or furnishes any nursing diploma,
 15 license or record;

16 (2) practices nursing under cover of any diploma or license or
 17 record illegally or fraudulently obtained or assigned or issued
 18 unlawfully or under fraudulent representation;

19 (3) practices nursing as a registered nurse or licensed practical
 20 nurse unless licensed to do so under this chapter **or IC 25-23.3;**

21 (4) uses in connection with the person's name any designation
 22 tending to imply that the person is a registered nurse or a licensed
 23 practical nurse unless licensed to practice under this chapter **or**
 24 **IC 25-23.3;**

25 (5) practices nursing during the time the person's license issued
 26 under this chapter **or IC 25-23.3** is suspended or revoked;

27 (6) conducts a school of nursing or a program for the training of
 28 practical nurses unless the school or program has been accredited
 29 by the board; or

30 (7) otherwise violates this chapter;

31 commits a Class B misdemeanor.

32 SECTION 33. IC 25-23-1-34, AS AMENDED BY P.L.1-2007,
 33 SECTION 176, IS AMENDED TO READ AS FOLLOWS
 34 [EFFECTIVE JULY 1, 2008]: Sec. 34. (a) The impaired nurses account
 35 is established within the state general fund for the purpose of providing
 36 money for providing rehabilitation of impaired registered nurses or
 37 licensed practical nurses under this article. The account shall be
 38 administered by the Indiana professional licensing agency.

39 (b) Expenses of administering the account shall be paid from money
 40 in the account. The account consists of the following:

41 (1) Funds collected for the rehabilitation of impaired registered
 42 nurses and impaired licensed practical nurses under ~~section~~
 43 **sections 11(e), 12(d), and 16.1(d)** of this chapter.

44 (2) Funds collected under section 31(c)(2) of this chapter.

45 ~~(3) Funds collected for the rehabilitation of impaired registered~~
 46 ~~nurses and impaired licensed practical nurses under~~
 47 ~~IC 25-23.2-3-5 (repeated).~~

48 ~~(4)~~ **(3)** Fines collected from registered nurses or licensed practical
 49 nurses under IC 25-1-9-9(a)(6).

50 (c) The treasurer of state shall invest the money in the account not
 51 currently needed to meet the obligations of the account in the same

1 manner as other public money may be invested.

2 (d) Money in the account is appropriated to the board for the
3 purpose stated in subsection (a).

4 SECTION 34. IC 25-23.3 IS ADDED TO THE INDIANA CODE
5 AS A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY
6 1, 2008]:

7 **ARTICLE 23.3. INTERSTATE NURSE LICENSURE**
8 **COMPACT**

9 **Chapter 1. Purpose**

10 **Sec. 1. It is the purpose of this compact to allow qualified nurses**
11 **who are licensed in a compact state to practice nursing in another**
12 **compact state and to reduce redundant licensing requirements of**
13 **nurses who practice in multiple states.**

14 **Chapter 2. Definitions**

15 **Sec. 1. The definitions in this chapter apply throughout this**
16 **article.**

17 **Sec. 2. "Adverse action" means a home or remote state action.**

18 **Sec. 3. "Alternative program" means a voluntary,**
19 **nondisciplinary monitoring program approved by a nurse licensing**
20 **board.**

21 **Sec. 4. "Board" has the meaning set forth in IC 25-23-1-1.**

22 **Sec. 5. "Coordinated licensure information system" means an**
23 **integrated process:**

24 **(1) for collecting, storing, and sharing information on nurse**
25 **licensure and enforcement activities related to nurse licensure**
26 **laws; and**

27 **(2) administered by a nonprofit organization composed of and**
28 **controlled by state nurse licensing boards.**

29 **Sec. 6. "Home state" means the party state that is a nurse's**
30 **primary state of residence.**

31 **Sec. 7. "Home state action" means any administrative, civil,**
32 **equitable, or criminal action permitted by the home state's laws**
33 **that are imposed on a nurse by the home state's licensing board,**
34 **including an action against an individual's license, such as**
35 **revocation, suspension, probation, or any other action that affects**
36 **a nurse's authorization to practice.**

37 **Sec. 8. "Licensing board" means a party state's regulatory body**
38 **responsible for issuing nurse licenses.**

39 **Sec. 9. "Multistate licensure privilege" means current, official**
40 **authority from a remote state permitting the practice of nursing as**
41 **either a registered nurse or a licensed practical/vocational nurse in**
42 **that party state. All party states have the authority, in accordance**
43 **with state due process law, to take actions against a nurse's**
44 **privilege, such as revocation, suspension, probation, or any other**
45 **action that affects a nurse's authorization to practice.**

46 **Sec. 10. "Nurse" means a registered nurse or licensed**
47 **practical/vocational nurse as defined by the state practice laws of**
48 **each party state.**

49 **Sec. 11. "Party state" means any state that has adopted this**
50 **compact.**

51 **Sec. 12. "Remote state" means a party state, other than the**

1 home state:

2 (1) where a patient is located at the time nursing care is
3 provided; or

4 (2) in the case of the practice of nursing not involving a
5 patient, in a party state where the recipient of nursing
6 practice is located.

7 Sec. 13. "Remote state action" means:

8 (1) any administrative, civil, equitable, or criminal action
9 permitted by a remote state's laws that are imposed on a
10 nurse by the remote state's licensing board or other authority,
11 including actions against an individual's multistate licensure
12 privilege to practice in the remote state; and

13 (2) cease and desist and other injunctive or equitable orders
14 issued by remote states or the licensing boards of remote
15 states.

16 Sec. 14. "State" means a state, territory, or possession of the
17 United States, the District of Columbia, or the Commonwealth of
18 Puerto Rico.

19 Sec. 15. "State practice laws" means the individual party state's
20 laws and rules that govern the practice of nursing, define the scope
21 of nursing practice, and create the methods and grounds for
22 imposing discipline. The term does not include the initial
23 qualifications for licensure or requirements necessary to obtain
24 and retain a license, except for qualifications or requirements of
25 the home state.

26 Chapter 3. General Provisions and Jurisdiction

27 Sec. 1. A license to practice registered nursing issued by a home
28 state to a resident in that state shall be recognized by each party
29 state as authorizing a multistate licensure privilege to practice as
30 a registered nurse in the party state. A license to practice licensed
31 practical/vocational nursing issued by a home state to a resident in
32 that state shall be recognized by each party state as authorizing a
33 multistate licensure privilege to practice as a licensed
34 practical/vocational nurse in the party state. To obtain or retain a
35 license, an applicant must meet the home state's qualifications for
36 licensure and license renewal and all other applicable state laws.

37 Sec. 2. A party state may, in accordance with state due process
38 laws, limit or revoke the multistate licensure privilege of any nurse
39 to practice in the state and may take any other actions under
40 applicable state laws necessary to protect the health and safety of
41 the state's citizens. If a party state takes such an action, it shall
42 promptly notify the administrator of the coordinated licensure
43 information system. The administrator of the coordinated licensure
44 information system shall promptly notify the home state of any
45 such actions by remote states.

46 Sec. 3. A nurse practicing in a party state must comply with the
47 state practice laws of the state in which a patient is located at the
48 time care is rendered. In addition, the practice of nursing is not
49 limited to patient care, but includes all nursing practice as defined
50 by the state practice laws of a party state. The practice of nursing
51 subjects a nurse to the jurisdiction of the nurse licensing board, the

1 courts, and the laws in that party state.

2 **Sec. 4. This compact does not affect additional requirements**
 3 **imposed by states for advanced practice registered nursing.**
 4 **However, a multistate licensure privilege to practice registered**
 5 **nursing granted by a party state shall be recognized by other party**
 6 **states as a license to practice registered nursing if a license is**
 7 **required by state law as a precondition for qualifying for advanced**
 8 **practice registered nurse authorization.**

9 **Sec. 5. Individuals not residing in a party state continue to be**
 10 **able to apply for nurse licensure as provided under the laws of**
 11 **each party state. However, the license granted to these individuals**
 12 **is not recognized as granting the privilege to practice nursing in**
 13 **any other party state unless explicitly agreed to by that party state.**

14 **Chapter 4. Applications for Licensure in a Party State**

15 **Sec. 1. Upon application for a license, the licensing board in a**
 16 **party state shall ascertain, through the coordinated licensure**
 17 **information system, whether the applicant has ever held, or is the**
 18 **holder of, a license issued by any other party state, whether there**
 19 **are any restrictions on the multistate licensure privilege, and**
 20 **whether any other adverse action by any state has been taken**
 21 **against the license.**

22 **Sec. 2. A nurse in a party state may hold licensure in only one**
 23 **(1) party state at a time, issued by the home state.**

24 **Sec. 3. A nurse who intends to change primary state of residence**
 25 **may apply for licensure in the new home state before the change.**
 26 **However, a new license may not be issued by a party state until a**
 27 **nurse provides evidence of change in primary state of residence**
 28 **satisfactory to the new home state's licensing board.**

29 **Sec. 4. (a) If a nurse:**

30 **(1) changes primary state of residence by moving between two**

31 **(2) party states; and**

32 **(2) obtains a license from the new home state;**

33 **the license from the former home state is no longer valid.**

34 **(b) If a nurse:**

35 **(1) changes primary state of residence by moving from a**
 36 **nonparty state to a party state; and**

37 **(2) obtains a license from the new home state;**

38 **the individual state license issued by the nonparty state is not**
 39 **affected and remains in force if provided by the laws of the**
 40 **nonparty state.**

41 **(c) If a nurse changes primary state of residence by moving**
 42 **from a party state to a nonparty state, the license issued by the**
 43 **prior home state converts to an individual state license, valid only**
 44 **in the former home state, without multistate licensure privilege to**
 45 **practice in other party states.**

46 **Chapter 5. Adverse Actions**

47 **Sec. 1. The licensing board of a remote state shall promptly**
 48 **report to the administrator of the coordinated licensure**
 49 **information system any disciplinary actions taken by the licensing**
 50 **entity or complaints filed by the attorney general, including the**
 51 **factual and legal basis for such actions, if known. The licensing**

1 board of a remote state shall promptly report any disciplinary
 2 actions taken by the licensing entity or complaints filed by the
 3 remote state's attorney general. The administrator of the
 4 coordinated licensure information system shall promptly notify the
 5 home state of any such reports.

6 **Sec. 2.** The licensing board of a party state has authority to
 7 complete any pending investigation for a nurse who changes
 8 primary state of residence during the course of the investigation.
 9 The licensing board also has authority to take appropriate action
 10 and shall promptly report the conclusions of such investigations to
 11 the administrator of the coordinated licensure information system.
 12 The administrator of the coordinated licensure information system
 13 shall promptly notify the new home state of any such actions.

14 **Sec. 3.** A remote state may take adverse action affecting the
 15 multistate licensure privilege to practice within the remote state.
 16 However, only the home state has authority to impose adverse
 17 action against the license issued by the home state.

18 **Sec. 4.** For purposes of imposing adverse action, the licensing
 19 board of the home state shall give the same priority and effect to
 20 reported conduct received from a remote state as it would if such
 21 conduct had occurred within the home state. In so doing, it shall
 22 apply its own state laws to determine appropriate action.

23 **Sec. 5.** The home state may take adverse action based on the
 24 factual findings of a remote state, so long as each state follows its
 25 own procedures for imposing such adverse action.

26 **Sec. 6.** This compact does not override a party state's decision
 27 that participation in an alternative program may be used instead
 28 of licensure action and that such participation shall remain
 29 nonpublic if required by the party state's laws. Party states must
 30 require nurses who enter any alternative programs to agree not to
 31 practice in any other party state during the term of the alternative
 32 program without prior authorization from the other party state.

33 **Chapter 6. Additional Authority Invested in Party State Nurse**
 34 **Licensing Boards**

35 **Sec. 1.** Notwithstanding any other powers, a party state nurse
 36 licensing board may do the following:

37 (1) If otherwise permitted by state law, recover from a nurse
 38 the costs of investigations and disposition of cases resulting
 39 from any adverse action taken against the nurse.

40 (2) Issue subpoenas for both hearings and investigations that
 41 require the attendance and testimony of witnesses and the
 42 production of evidence. Subpoenas issued by a nurse licensing
 43 board in a party state for the attendance and testimony of
 44 witnesses and the production of evidence from another party
 45 state shall be enforced in the latter state by a court with
 46 jurisdiction, according to the practice and procedure of that
 47 court applicable to subpoenas issued in proceedings pending
 48 before it. The issuing authority shall pay any witness fees,
 49 travel expenses, mileage, and other fees required by the
 50 service statutes of the state where the witnesses and evidence
 51 are located.

1 (3) Issue cease and desist orders to limit or revoke a nurse's
2 authority to practice in the state.

3 (4) Adopt uniform rules as provided for in IC 25-23.3-8-3.

4 **Chapter 7. Coordinated Licensure Information System**

5 **Sec. 1. All party states shall participate in a cooperative effort**
6 **to create a coordinated data base of all licensed registered nurses**
7 **and licensed practical/vocational nurses. This system must include**
8 **information on the licensure and disciplinary history of each nurse,**
9 **as contributed by party states, to assist in the coordination of nurse**
10 **licensure and enforcement efforts.**

11 **Sec. 2. All party states' licensing boards shall promptly report**
12 **actions against multistate licensure privileges, disciplinary actions**
13 **taken by the licensing entity or complaints filed by the remote**
14 **state's attorney general, denials of applications, and the reasons for**
15 **such denials to the coordinated licensure information system.**

16 **Sec. 3. All party states' licensing boards contributing**
17 **information to the coordinated licensure information system may**
18 **designate information that may not be shared with nonparty states**
19 **or disclosed to other entities or individuals without the express**
20 **permission of the contributing state.**

21 **Sec. 4. Any personally identifiable information obtained by a**
22 **party state's licensing board from the coordinated licensure**
23 **information system may not be shared with nonparty states or**
24 **disclosed to other entities or individuals except to the extent**
25 **permitted by the laws of the party state contributing the**
26 **information.**

27 **Sec. 5. Any information contributed to the coordinated licensure**
28 **information system that is subsequently required to be expunged**
29 **by the laws of the party state contributing that information shall**
30 **also be expunged from the coordinated licensure information**
31 **system.**

32 **Sec. 6. The compact administrators, acting jointly and in**
33 **consultation with the administrator of the coordinated licensure**
34 **information system, shall formulate necessary and proper**
35 **procedures for the identification, collection, and exchange of**
36 **information under this compact.**

37 **Chapter 8. Compact Administration and Interchange of**
38 **Information**

39 **Sec. 1. The head of the nurse licensing board of each party state,**
40 **or that person's designee, shall be the administrator of this**
41 **compact for that person's state. For purposes of this article, the**
42 **executive director of the Indiana professional licensing agency or**
43 **the executive director's designee shall be the administrator of this**
44 **compact.**

45 **Sec. 2. The compact administrator of each party state shall**
46 **furnish to the compact administrator of each other party state any**
47 **information and documents, including, but not limited to, a**
48 **uniform data set of investigations, identifying information,**
49 **licensure data, and disclosable alternative program participation**
50 **information, to facilitate the administration of this compact.**

51 **Sec. 3. Compact administrators may develop uniform rules to**

1 facilitate and coordinate implementation of this compact. These
2 uniform rules shall be adopted by a board under IC 25-23.3-6-1.

3 **Chapter 9. Immunity**

4 **Sec. 1.** Neither a party state nor an officer, employee, or agent
5 of a party state's nurse licensing board who acts in accordance
6 with this compact is liable on account of any act or omission in
7 good faith while engaged in the performance of duties under this
8 compact. Good faith in this article does not include willful
9 misconduct, gross negligence, or recklessness.

10 **Chapter 10. Entry Into Force, Withdrawal, and Amendment**

11 **Sec. 1.** This compact becomes effective as to any state when it
12 has been enacted into the laws of that state. Any party state may
13 withdraw from this compact.

14 **Sec. 2.** No withdrawal affects the validity or applicability by the
15 licensing boards of states remaining party to the compact of any
16 report of adverse action occurring before the withdrawal.

17 **Sec. 3.** This compact shall not be construed to invalidate or
18 prevent any nurse licensure agreement or other cooperative
19 arrangement between a party state and a nonparty state that is
20 made in accordance with this compact.

21 **Sec. 4.** This compact may be amended by the party states. No
22 amendment to this compact becomes effective and binding upon
23 the party states unless and until it is enacted into the laws of all
24 party states.

25 **Chapter 11. Construction and Severability**

26 **Sec. 1.** This compact shall be liberally construed to effectuate its
27 purposes. The provisions of this compact are severable and if any
28 phrase, clause, sentence, or provision of this compact is declared to
29 be contrary to the constitution of any party state or of the United
30 States or if the applicability of this compact to any government,
31 agency, person, or circumstance is held invalid, the validity of the
32 remainder of this compact and the applicability of this compact to
33 any government, agency, person, or circumstance are not affected
34 thereby. If this compact is held contrary to the constitution of any
35 party state, this compact remains in full force and effect as to the
36 remaining party states and in full force and effect as to the party
37 state affected as to a severable matter.

38 **Sec. 2.** If party states find a need for settling disputes arising
39 under this compact:

40 (1) the party states may submit the issues in dispute to an
41 arbitration panel comprised of an individual appointed by the
42 compact administrator in the home state, an individual
43 appointed by the compact administrator in each remote state
44 involved, and an individual mutually agreed upon by the
45 compact administrators of all the party states involved in the
46 dispute; and

47 (2) the decision of a majority of the arbitrators is final and
48 binding.

49 **Sec. 3. (a)** Notwithstanding any other law, this article does not
50 take effect until July 1, 2009.

51 **(b)** This article expires July 1, 2012.

1 SECTION 35. IC 25-23.5-3-1.5, AS ADDED BY P.L.197-2007,
 2 SECTION 66, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 3 JULY 1, 2008]: Sec. 1.5. (a) Except as provided in subsection (b), an
 4 occupational therapist may not provide occupational therapy services
 5 to a person until the person has been referred to the occupational
 6 therapist by **one (1) of the following:**

- 7 (1) A physician licensed under IC 25-22.5.
- 8 (2) A podiatrist licensed under IC 25-29.
- 9 (3) An advanced practice nurse licensed under IC 25-23.
- 10 (4) A psychologist licensed under IC 25-33. ~~or~~
- 11 (5) A chiropractor licensed under IC 25-10.
- 12 (6) **An optometrist licensed under IC 25-24.**

13 (b) An occupational therapist may provide the following services
 14 without a referral from a physician licensed under IC 25-22.5, a
 15 podiatrist licensed under IC 25-29, an advanced practice nurse licensed
 16 under IC 25-23, a psychologist licensed under IC 25-33, ~~or~~ a
 17 chiropractor licensed under IC 25-10, **or an optometrist licensed**
 18 **under IC 25-24:**

- 19 (1) Ergonomic or home assessment.
- 20 (2) Injury or illness prevention education and wellness services.
- 21 (3) Occupational therapy activities provided in an educational
 22 setting.
- 23 (4) Occupational therapy activities that the board determines,
 24 after reviewing the recommendations of the committee, are
 25 appropriate to be conducted in a community based environment.

26 SECTION 36. IC 25-23.6-3-1 IS AMENDED TO READ AS
 27 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. (a) An individual
 28 may not:

- 29 (1) profess to be a licensed marriage and family therapist;
- 30 (2) use the title:
 - 31 (A) "licensed marriage and family therapist";
 - 32 (B) "marriage and family therapist"; or
 - 33 (C) "family therapist";
- 34 (3) use any other words, letters, abbreviations, or insignia
 35 indicating or implying that the individual is a licensed marriage
 36 and family therapist; or
- 37 (4) practice marriage and family therapy for compensation;

38 unless the individual is licensed under ~~this article~~, IC 25-22.5,
 39 **IC 25-23.6-8-1**, or IC 25-33.

40 (b) **An individual may not:**

- 41 (1) **profess to be a licensed marriage and family therapist**
 42 **associate;**
- 43 (2) **use the title:**
 - 44 (A) **"licensed marriage and family therapist associate";**
 - 45 (B) **"marriage and family therapist associate"; or**
 - 46 (C) **"family therapist associate";**
- 47 (3) **use any other words, letters, abbreviations, or insignia**
 48 **indicating or implying that the individual is a licensed**
 49 **marriage and family therapist associate; or**
- 50 (4) **practice marriage and family therapy for compensation;**

51 **unless the individual is licensed under IC 25-22.5, IC 25-23.6-8-1.5,**

1 **or IC 25-33.**

2 **(c) Subsections (a)(4) and (b)(4) do not apply to a person who is**
 3 **described in section 2(a) of this chapter.**

4 SECTION 37. IC 25-23.6-3-2, AS AMENDED BY P.L.2-2007,
 5 SECTION 330, IS AMENDED TO READ AS FOLLOWS
 6 [EFFECTIVE JULY 1, 2008]: Sec. 2. (a) This article may not be
 7 construed to limit the marriage and family therapy services performed
 8 by a person who does not use a title specified in this article and who is
 9 one (1) of the following:

10 (1) A licensed or certified health care professional acting within
 11 the scope of the person's license or certificate.

12 (2) A student, an intern, or a trainee pursuing a course of study in
 13 medicine or psychology or a course of study to gain licensure
 14 under this article in an accredited eligible postsecondary
 15 educational institution or training institution ~~or is a graduate~~
 16 ~~accumulating experience required for licensure~~ if:

17 (A) the activities are performed under qualified supervision
 18 and constitute a part of the person's supervised course of study
 19 or other level of supervision; and

20 (B) the student ~~or graduate~~ uses a title that contains the term
 21 "intern" or "trainee".

22 (3) Not a resident of Indiana if the person performed services in
 23 Indiana for not more than five (5) days in any one (1) month and
 24 not more than fifteen (15) days in any one (1) calendar year and
 25 the person is authorized to perform such services under the laws
 26 of the state or country in which the person resides.

27 (4) A rabbi, priest, Christian Science practitioner, minister, or
 28 other member of the clergy.

29 (5) An employee of or a volunteer for a nonprofit corporation or
 30 an organization performing charitable, religious, or educational
 31 functions, providing pastoral counseling or other assistance.

32 (6) A person who provides school counseling or a person who is
 33 certified by a state or national organization that is recognized by
 34 the Indiana division of mental health and addiction and who
 35 provides counseling in the areas of alcohol or drug abuse
 36 addictions.

37 (b) Nothing in this section prohibits a person referred to in
 38 subsection (a) from qualifying for licensure under this article.

39 SECTION 38. IC 25-23.6-3-4 IS AMENDED TO READ AS
 40 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 4. **(a)** An individual
 41 who is licensed as a marriage and family therapist **under**
 42 **IC 25-23.6-8-1** shall:

43 (1) display the license or a clear copy of the license at each
 44 location where the marriage and family therapist regularly
 45 practices; and

46 (2) include the words "licensed marriage and family therapist" or
 47 the letters "LMFT" on all promotional materials, including
 48 business cards, brochures, stationery, advertisements, and signs
 49 that name the individual.

50 **(b) An individual who is licensed as a marriage and family**
 51 **therapist associate under IC 25-23.6-8-1.5 shall:**

1 **(1) display the license or a clear copy of the license at each**
 2 **location where the marriage and family therapist associate**
 3 **regularly practices; and**

4 **(2) include the words "licensed marriage and family therapist**
 5 **associate" or the letters "LMFTA" on all promotional**
 6 **materials, including business cards, brochures, stationery,**
 7 **advertisements, and signs that name the individual.**

8 SECTION 39. IC 25-23.6-8-1, AS AMENDED BY P.L.2-2007,
 9 SECTION 337, IS AMENDED TO READ AS FOLLOWS
 10 [EFFECTIVE JULY 1, 2008]: Sec. 1. An individual who applies for a
 11 license as a marriage and family therapist must meet the following
 12 requirements:

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

15 (A) received a master's or doctor's degree in marriage and
 16 family therapy, or in a related area as determined by the board
 17 from an eligible postsecondary educational institution that
 18 meets the requirements under section 2.1(a)(1) of this chapter
 19 or from a foreign school that has a program of study that meets
 20 the requirements under section 2.1(a)(2) or (2.1)(a)(3) of this
 21 chapter; and

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

24 **(2) Furnish satisfactory evidence to the board that the**
 25 **individual has met the clinical experience requirements under**
 26 **section 2.7 of this chapter.**

27 **(3) Furnish satisfactory evidence to the board that the**
 28 **individual:**

29 **(A) holds a marriage and family therapist associate license,**
 30 **in good standing, issued under section 5 of this chapter; or**

31 **(B) is licensed or certified to practice as a marriage and**
 32 **family therapist in another state and is otherwise qualified**
 33 **under this chapter.**

34 ~~(2)~~ **(4) Furnish satisfactory evidence to the board that the**
 35 **individual does not have a conviction for a crime that has a direct**
 36 **bearing on the individual's ability to practice competently.**

37 ~~(3)~~ **(5) Furnish satisfactory evidence to the board that the**
 38 **individual has not been the subject of a disciplinary action by a**
 39 **licensing or certification agency of another state or jurisdiction on**
 40 **the grounds that the individual was not able to practice as a**
 41 **marriage and family therapist without endangering the public.**

42 ~~(4)~~ **Pass an examination provided by the board:**

43 ~~(5)~~ **(6) Pay the fee established by the board.**

44 SECTION 40. IC 25-23.6-8-1.5 IS ADDED TO THE INDIANA
 45 CODE AS A NEW SECTION TO READ AS FOLLOWS
 46 [EFFECTIVE JULY 1, 2008]: **Sec. 1.5. An individual who applies for**
 47 **a license as a marriage and family therapist associate must meet**
 48 **the following requirements:**

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

51 **(A) received a master's or doctor's degree in marriage and**

1 **family therapy, or in a related area as determined by the**
 2 **board from an institution of higher education that meets**
 3 **the requirements under section 2.1(a)(1) of this chapter or**
 4 **from a foreign school that has a program of study that**
 5 **meets the requirements under section 2.1(a)(2) or 2.1(a)(3)**
 6 **of this chapter; and**

7 **(B) completed the educational requirements under section**
 8 **2.5 of this chapter.**

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

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

19 **(4) Pay the fee established by the board.**

20 **(5) Pass an examination provided by the board.**

21 SECTION 41. IC 25-23.6-8-2.1, AS AMENDED BY P.L.2-2007,
 22 SECTION 338, IS AMENDED TO READ AS FOLLOWS
 23 [EFFECTIVE JULY 1, 2008]: Sec. 2.1. (a) An applicant **for a license**
 24 **as a marriage and family therapist** under section 1 of this chapter **or**
 25 **an applicant for a license as a marriage and family therapist**
 26 **associate under section 1.5 of this chapter** must have received a
 27 master's or doctor's degree in marriage and family therapy, or in a
 28 related area as determined by the board, from an eligible postsecondary
 29 educational institution that meets the following requirements:

30 (1) If the institution was located in the United States or a territory
 31 of the United States, at the time of the applicant's graduation the
 32 institution was accredited by a regional accrediting body
 33 recognized by the Commission on Recognition of Postsecondary
 34 Accreditation.

35 (2) If the institution was located in Canada, at the time of the
 36 applicant's graduation the institution was a member in good
 37 standing with the Association of Universities and Colleges of
 38 Canada.

39 (3) If the institution was located in a foreign country other than
 40 Canada, at the time of the applicant's graduation the institution:

41 (A) was recognized by the government of the country where
 42 the school was located as a program to train in the practice of
 43 marriage and family therapy or psychotherapy; and

44 (B) maintained a standard of training substantially equivalent
 45 to the standards of institutions accredited by a regional
 46 accrediting body recognized by the Commission on
 47 Recognition of Postsecondary Accreditation.

48 (b) An applicant **for a license as a marriage and family therapist**
 49 **under section 1 of this chapter or an applicant for a license as a**
 50 **marriage and family therapist associate under section 1.5 of this**
 51 **chapter** who has a master's or doctoral degree from a program that did

1 not emphasize marriage and family therapy may complete the course
2 work requirement from an institution that is:

- 3 (1) accredited by the Commission on Accreditation for Marriage
4 and Family Therapy Education; and
- 5 (2) recognized by the United States Department of Education.

6 SECTION 42. IC 25-23.6-8-2.5, AS AMENDED BY P.L.2-2007,
7 SECTION 339, IS AMENDED TO READ AS FOLLOWS
8 [EFFECTIVE JULY 1, 2008]: Sec. 2.5. (a) An applicant **for a license**
9 **as a marriage and family therapist** under section 1 of this chapter **or**
10 **an applicant for a license as a marriage and family therapist**
11 **associate under section 1.5 of this chapter** must complete the
12 following educational requirements:

- 13 (1) Except as provided in subsection (b), complete twenty-seven
14 (27) semester hours or forty-one (41) quarter hours of graduate
15 course work that must include graduate level course credits with
16 material in at least the following content areas:
 - 17 (A) Theoretical foundations of marriage and family therapy.
 - 18 (B) Major models of marriage and family therapy.
 - 19 (C) Individual development.
 - 20 (D) Family development and family relationships.
 - 21 (E) Clinical problems.
 - 22 (F) Collaboration with other disciplines.
 - 23 (G) Sexuality.
 - 24 (H) Gender and sexual orientation.
 - 25 (I) Issues of ethnicity, race, socioeconomic status, and culture.
 - 26 (J) Therapy techniques.
 - 27 (K) Behavioral research that focuses on the interpretation and
28 application of research data as it applies to clinical practice.

29 The content areas may be combined into any one (1) graduate
30 level course, if the applicant can prove that the course work was
31 devoted to each content area.

- 32 (2) Not less than one (1) graduate level course of two (2) semester
33 hours or three (3) quarter hours in the following areas:

- 34 (A) Legal, ethical, and professional standards issues in the
35 practice of marriage and family therapy or an equivalent
36 course approved by the board.
- 37 (B) Appraisal and assessment for individual or interpersonal
38 disorder or dysfunction.

- 39 (3) At least one (1) supervised clinical practicum, internship, or
40 field experience in a marriage and family counseling setting that
41 meets the following requirements:

- 42 (A) The applicant provided five hundred (500) face to face
43 client contact hours of marriage and family therapy services
44 under the supervision of a licensed marriage and family
45 therapist who has at least five (5) years of experience or a
46 qualified supervisor approved by the board.
- 47 (B) The applicant received one hundred (100) hours of
48 supervision from a licensed marriage and family therapist who
49 has at least five (5) years experience as a qualified supervisor.

50 The requirements under ~~subdivisions~~ **clauses** (A) and (B) may be
51 met by a supervised practice experience that took place away

1 from an institution of higher education but that is certified by an
 2 official of the eligible postsecondary educational institution as
 3 being equivalent to a graduate level practicum or internship
 4 program at an institution accredited by an accrediting agency
 5 approved by the United States Department of Education
 6 Commission on Recognition of Postsecondary Education, the
 7 Association of Universities and Colleges of Canada, or the
 8 Commission on Accreditation for Marriage and Family Therapy
 9 Education.

10 (b) The following graduate work may not be used to satisfy the
 11 content area requirements under subsection (a):

12 (1) Thesis or dissertation work.

13 (2) Practicums, internships, or fieldwork.

14 SECTION 43. IC 25-23.6-8-2.7, AS AMENDED BY P.L.197-2007,
 15 SECTION 85, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 16 JULY 1, 2008]: Sec. 2.7. (a) An applicant **for a license as a marriage
 17 and family therapist** under section 1 of this chapter must have at least
 18 two (2) years of clinical experience, during which at least fifty percent
 19 (50%) of the applicant's clients were receiving marriage and family
 20 therapy services. The applicant's clinical experience must include one
 21 thousand (1,000) hours of post degree clinical experience and two
 22 hundred (200) hours of post degree clinical supervision, of which one
 23 hundred (100) hours must be individual supervision, under the
 24 supervision of a licensed marriage and family therapist who has at least
 25 five (5) years of experience or an equivalent supervisor, as determined
 26 by the board.

27 (b) **Within the two (2) years Before an individual obtains any post
 28 degree clinical experience, the individual must be licensed as a
 29 marriage and family therapist associate under this chapter. When
 30 obtaining the clinical experience** required under subsection (a), the
 31 applicant must provide direct individual, group, and family therapy and
 32 counseling to the following categories of cases:

33 (1) Unmarried couples.

34 (2) Married couples.

35 (3) Separating or divorcing couples.

36 (4) Family groups, including children.

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

39 (d) Except as provided in subsection (e), the experience requirement
 40 may be met by work performed at or away from the premises of the
 41 supervising marriage and family therapist.

42 (e) The work requirement may not be performed away from the
 43 supervising marriage and family therapist's premises if:

44 (1) the work is the independent private practice of marriage and
 45 family therapy; and

46 (2) the work is not performed at a place that has the supervision
 47 of a licensed marriage and family therapist or an equivalent
 48 supervisor, as determined by the board.

49 SECTION 44. IC 25-23.6-8-3 IS AMENDED TO READ AS
 50 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. An individual who
 51 satisfies the requirements of ~~sections 1 and 2~~ **section 1.5(1) through**

- 1 **1.5(4)** of this chapter may take the examination provided by the board.
 2 SECTION 45. IC 25-23.6-8-5 IS AMENDED TO READ AS
 3 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 5. The board shall issue
 4 a **marriage and family therapist license or marriage and family**
 5 **therapist associate** license, **as appropriate**, to an individual who:
 6 (1) achieves a passing score, as determined by the board, on the
 7 examination provided under this chapter; and
 8 (2) is otherwise qualified under this article.
- 9 SECTION 46. IC 25-23.6-8-8 IS AMENDED TO READ AS
 10 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 8. (a) A **marriage and**
 11 **family therapist** license issued by the board is valid for the remainder
 12 of the renewal period in effect on the date the license was issued.
 13 (b) An individual may renew a **marriage and family therapist**
 14 license by:
 15 (1) paying a renewal fee on or before the expiration date of the
 16 license; and
 17 (2) completing not less than fifteen (15) hours of continuing
 18 education each licensure year.
 19 (c) If an individual fails to pay a renewal on or before the expiration
 20 date of a license, the license becomes invalid.
- 21 SECTION 47. IC 25-23.6-8-8.5 IS ADDED TO THE INDIANA
 22 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 23 [EFFECTIVE JULY 1, 2008]: **Sec. 8.5. (a) A marriage and family**
 24 **therapist associate license issued by the board is valid for the**
 25 **remainder of the renewal period in effect on the date the license**
 26 **was issued.**
 27 (b) An individual may renew a **marriage and family therapist**
 28 **associate license two (2) times** by:
 29 (1) **paying a renewal fee on or before the expiration date of**
 30 **the license; and**
 31 (2) **completing at least fifteen (15) hours of continuing**
 32 **education each licensure year.**
 33 (c) **The board may renew a marriage and family therapist**
 34 **associate license for additional periods based on circumstances**
 35 **determined by the board.**
 36 (d) **If an individual fails to pay a renewal fee on or before the**
 37 **expiration date of a license, the license becomes invalid.**
- 38 SECTION 48. IC 25-23.6-8-9 IS AMENDED TO READ AS
 39 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 9. (a) The board may
 40 reinstate an invalid **marriage and family therapist** license **issued**
 41 **under section 5 of this chapter** up to three (3) years after the
 42 expiration date of the license if the individual holding the invalid
 43 license meets the requirements under IC 25-1-8-6.
 44 (b) If more than three (3) years have elapsed since the date a
 45 **marriage and family therapist** license expired, the individual holding
 46 the license may renew the license by satisfying the requirements for
 47 renewal established by the board and meeting the requirements under
 48 IC 25-1-8-6.
 49 (c) **The board may reinstate an invalid marriage and family**
 50 **therapist associate license issued under section 5 of this chapter up**
 51 **to one (1) year after the expiration date of the license if the**

1 **individual holding the invalid license meets the requirements under**
 2 **IC 25-1-8-6. An associate license that has been expired for more**
 3 **than one (1) year may not be reinstated under IC 25-1-8-6.**

4 SECTION 49. IC 25-23.6-8-11 IS AMENDED TO READ AS
 5 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 11. (a) An individual
 6 who is licensed **as a marriage and family therapist** under this ~~article~~
 7 **chapter** shall notify the board in writing when the individual retires
 8 from practice.

9 (b) Upon receipt of the notice, the board shall:

10 (1) record the fact the individual is retired; and

11 (2) release the individual from further payment of renewal fees
 12 and continuing education requirements.

13 SECTION 50. IC 25-23.6-8-13 IS AMENDED TO READ AS
 14 FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 13. (a) An individual
 15 who applies for a **marriage and family therapist** license under
 16 **section 1 of this ~~article~~ chapter** may be exempted by the board from
 17 the examination requirement under this chapter if the individual:

18 **(1) complies with subsection (b); and**

19 ~~(1)~~ **(2)** is licensed or certified to practice as a marriage and family
 20 therapist in another state or ~~(2)~~ has engaged in the practice of
 21 marriage and family therapy for at least three (3) of the previous
 22 five (5) years.

23 **(b) An individual may be exempted under subsection (a) if the**
 24 **individual:**

25 ~~(1)~~ **(1)** has passed a licensing examination substantially
 26 equivalent to the licensing examination required under this
 27 article;

28 ~~(2)~~ **(2)** has passed an examination pertaining to the marriage and
 29 family therapy laws and rules of this state; and

30 ~~(3)~~ **(3)** has not committed any act or is not under investigation for
 31 any act that constitutes a violation of this article;

32 and is otherwise qualified under ~~sections~~ **section 1 and 2** of this chapter
 33 and pays an additional fee.

34 SECTION 51. IC 34-30-2-99.5 IS ADDED TO THE INDIANA
 35 CODE AS A **NEW SECTION** TO READ AS FOLLOWS
 36 [EFFECTIVE JULY 1, 2008]: **Sec. 99.5. IC 25-23.3-9-1 (Concerning**
 37 **acts and omissions under the interstate nurse licensure compact).**

38 SECTION 52. IC 25-23-1-28 IS REPEALED [EFFECTIVE JULY
 39 1, 2008].

40 SECTION 53. [EFFECTIVE JULY 1, 2008] (a) **As used in this**
 41 **SECTION, "commission" refers to the health finance commission**
 42 **established by IC 2-5-23-3.**

43 **(b) During the 2008 interim, the commission shall:**

44 **(1) study domestic violence programs administered by the**
 45 **state; and**

46 **(2) recommend the most appropriate state agency to**
 47 **administer domestic violence programs.**

48 **(c) This SECTION expires December 31, 2008.**

49 SECTION 54. [EFFECTIVE JULY 1, 2008] (a) **Notwithstanding**
 50 **IC 25-23.3, as added by this act, IC 25-23.3 may not be**
 51 **implemented until July 1, 2009.**

1 **(b) The Indiana state board of nursing shall, not later than June**
 2 **30, 2009, adopt rules under IC 4-22-2 to administer IC 25-23.3, as**
 3 **added by this act.**

4 **(c) This SECTION expires July 1, 2009.**

5 SECTION 55. [EFFECTIVE UPON PASSAGE] **(a) As used in this**
 6 **SECTION, "office" refers to the office of Medicaid policy and**
 7 **planning established by IC 12-8-6-1.**

8 **(b) Before July 1, 2008, the office shall apply to the United**
 9 **States Department of Health and Human Services for an**
 10 **amendment to the state Medicaid plan to provide coverage for**
 11 **adults and children for medically necessary umbilical cord**
 12 **transplants and other related procedures under the state Medicaid**
 13 **program (IC 12-15) if the Medicaid recipient's provider receives**
 14 **prior approval for the procedure from the office.**

15 **(c) The office may not implement the plan amendment until the**
 16 **office files an affidavit with the governor attesting that the plan**
 17 **amendment applied for under this SECTION is in effect. The office**
 18 **shall file the affidavit under this subsection not later than five (5)**
 19 **days after the office is notified that the plan amendment is**
 20 **approved.**

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

26 **(e) The office may adopt rules under IC 4-22-2 necessary to**
 27 **implement this SECTION.**

28 **(f) This SECTION expires December 31, 2013.**

29 SECTION 56. [EFFECTIVE JULY 1, 2008] **(a) The office of the**
 30 **secretary of family and social services shall adopt the rules**
 31 **required by IC 12-31-1-3(b), as added by this act, in the manner**
 32 **provided in IC 4-22-2-37.1. The office shall immediately begin the**
 33 **adoption of the rules and shall adopt the final rules before March**
 34 **1, 2009.**

35 **(b) This SECTION expires July 1, 2009.**

36 SECTION 57. [EFFECTIVE JULY 1, 2008] **(a) As used in this**
 37 **SECTION, "commission" refers to the health finance commission**
 38 **established by IC 2-5-23-3.**

39 **(b) Not later than October 1, 2008, the state police department**
 40 **shall report to the commission and legislative council in an**
 41 **electronic format under IC 5-14-6 concerning any changes the**
 42 **federal government has made in criminal background check**
 43 **procedures.**

44 **(c) This SECTION expires December 31, 2008.**

45 SECTION 58. [EFFECTIVE JULY 1, 2008] **(a) This SECTION**
 46 **applies beginning July 1, 2008, and ending June 30, 2009.**

47 **(b) Notwithstanding any other law and except as provided in**
 48 **subsection (c), a person who operates a home health agency under**
 49 **IC 16-27-1 or a personal services agency under IC 16-27-4 shall**
 50 **apply, not more than three (3) business days after the date that an**
 51 **employee begins to provide services in a patient's temporary or**

1 permanent residence, for a copy of the employee's limited criminal
2 history under IC 10-13-3.

3 (c) If a home health agency or personal services agency
4 determines that an employee lived outside Indiana at any time
5 during the two (2) years immediately before the date the individual
6 was hired by the agency, the home health agency or personal
7 services agency shall apply, not more than three (3) business days
8 after the date that the employee begins to provide services in a
9 patient's temporary or permanent residence, for the employee's
10 national criminal history background check from the Indiana
11 central repository for criminal history information under
12 IC 10-13-3-39.

13 (d) This SECTION expires June 30, 2009.

14 SECTION 59. [EFFECTIVE UPON PASSAGE] (a) The social
15 worker, marriage and family therapist, and mental health
16 counselor board established by IC 25-23.6-2-1 shall adopt
17 emergency rules under IC 4-22-2-37.1 to implement the provisions
18 of the marriage and family therapist associate license provisions
19 added to IC 25-23.6 by this act.

20 (b) This SECTION expires July 1, 2009.

21 SECTION 60. An emergency is declared for this act.

22 Renumber all SECTIONS consecutively.

(Reference is to EHB 1172 as reprinted February 27, 2008.)

Conference Committee Report
on
Engrossed House Bill 1172

Signed by:

Representative Welch
Chairperson

Senator Mishler

Representative Brown T

Senator Broden

House Conferees

Senate Conferees