



February 16, 2010

**ENGROSSED
SENATE BILL No. 387**

DIGEST OF SB 387 (Updated February 15, 2010 12:04 pm - DI 77)

Citations Affected: IC 16-18; IC 16-19; IC 16-46.

Synopsis: Office of minority health. Establishes the office of minority health within the state department of health.

Effective: July 1, 2010.

**Breaux, Miller, Lawson C, Lanane,
Errington, Sipes, Taylor, Randolph**
(HOUSE SPONSORS — BROWN C, BARTLETT)

January 12, 2010, read first time and referred to Committee on Health and Provider Services.

January 28, 2010, amended, reported favorably — Do Pass.

February 1, 2010, read second time, ordered engrossed.

February 2, 2010, engrossed. Read third time, passed. Yeas 48, nays 2.

HOUSE ACTION

February 9, 2010, read first time and referred to Committee on Public Health.

February 15, 2010, reported — Do Pass.

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February 16, 2010

Second Regular Session 116th General Assembly (2010)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2009 Regular and Special Sessions of the General Assembly.

ENGROSSED SENATE BILL No. 387



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

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

1 SECTION 1. IC 16-18-2-96, AS AMENDED BY P.L.22-2005,
 2 SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 3 JULY 1, 2010]: Sec. 96. (a) "Director", for purposes of IC 16-19-13,
 4 refers to the director of the office of women's health established by
 5 ~~IC 16-19-13.~~ **IC 16-19-13-2.**

6 **(b) "Director", for purposes of IC 16-19-14, refers to the**
 7 **director of the office of minority health established by**
 8 **IC 16-19-14-4.**

9 ~~(b)~~ (c) "Director", for purposes of IC 16-27, means the individual
 10 acting under the authority of and assigned the responsibility by the state
 11 health commissioner to implement IC 16-27.

12 ~~(c)~~ (d) "Director", for purposes of IC 16-28, IC 16-29, and IC 16-30,
 13 means the individual acting under the authority of and assigned the
 14 responsibility by the state health commissioner to implement IC 16-28,
 15 IC 16-29, and IC 16-30.

16 ~~(d)~~ (e) "Director", for purposes of IC 16-31, refers to the executive
 17 director of the department of homeland security established by

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ES 387—LS 6747/DI 77+



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IC 10-19-2-1.

(~~e~~) (f) "Director", for purposes of IC 16-35-2, refers to the director of the program for children with special health care needs.

SECTION 2. IC 16-18-2-236 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2010]: Sec. 236. (a) "Minority", for purposes of IC 16-19-14, has the meaning set forth in IC 16-19-14-2.

(b) "Minority", for purposes of IC 16-46-6, has the meaning set forth in IC 16-46-6-2.

SECTION 3. IC 16-18-2-254.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2010]: Sec. 254.5. (a) "Office", for purposes of IC 16-19-13, refers to the office of women's health established by ~~IC 16-19-13~~: IC 16-19-13-2.

(b) "Office", for purposes of IC 16-19-14, refers to the office of minority health established by IC 16-19-14-4.

SECTION 4. IC 16-19-14 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2010]:

Chapter 14. Office of Minority Health

Sec. 1. As used in this chapter, "director" refers to the director of the office.

Sec. 2. As used in this chapter, "minority" means an individual identified as any of the following:

- (1) Black or African-American.
- (2) Hispanic or Latino.
- (3) Asian.
- (4) American Indian.
- (5) Alaska Native.
- (6) Native Hawaiian and other Pacific Islander.

Sec. 3. As used in this chapter, "office" refers to the office of minority health established by this chapter.

Sec. 4. The office of minority health is established within the state department.

Sec. 5. The office shall perform the minority health initiative duties set forth in IC 16-46-11.

Sec. 6. (a) The state health commissioner shall appoint individuals to staff the office, including:

- (1) the director of the office; and
- (2) any other employees that the state health commissioner determines are necessary.

(b) The employees appointed under subsection (a)(2) shall report to the director. The director shall report to at least an

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appointed assistant commissioner.

(c) The director shall supervise the employees assigned to the office.

(d) The director shall oversee the administrative functions of the office.

Sec. 7. This chapter expires July 1, 2014.

SECTION 5. IC 16-46-11-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2010]: Sec. 1. The **office of minority health and the** state department of health, in partnership with the Indiana Minority Health Coalition, Inc., shall do the following:

- (1) Staff, coordinate, and assist in the implementation of the comprehensive health plan developed by the interagency state council on black and minority health established under IC 16-46-6.
- (2) Expand, develop, and implement a community based state structure that is conducive to addressing the health disparities of the minority populations in Indiana.
- (3) Monitor minority health progress.
- (4) Establish policy.
- (5) Fund minority health programs, research, and other initiatives.
- (6) Provide the following through interdepartmental coordination:
 - (A) The data and technical assistance needs of the local minority health coalitions.
 - (B) Measurable minority health objectives to local minority health coalitions for the development of health intervention programs.
- (7) Provide through the state health data center established by IC 16-19-10-3 minority health research and resource information addressing the following:
 - (A) Research within minority populations.
 - (B) A resource database that can be disseminated to local organizations interested in minority health.
 - (C) Racial and ethnic specific databases including morbidity, diagnostic groups, social/economic, education, and population.
 - (D) Attitude, knowledge, and belief information.
- (8) Staff a minority health hotline that establishes linkages with other health and social service hotlines and local coalitions.
- (9) Develop and implement an aggressive recruitment and retention program to increase the number of minorities in the health and social services professions.
- (10) Develop and implement an awareness program that will increase the knowledge of health and social service providers to

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- 1 the special needs of minorities.
- 2 (11) Develop and implement culturally and linguistically
- 3 appropriate health promotion and disease prevention programs
- 4 that would emphasize avoiding the health risk factors for
- 5 conditions affecting minorities and incorporate an accessible,
- 6 affordable, and acceptable early detection and intervention
- 7 component.
- 8 (12) Provide the state support necessary to ensure the continued
- 9 development of the existing minority health coalitions and to
- 10 develop coalitions in other areas targeted for minority health
- 11 intervention.
- 12 (13) Coordinate each of the counties with existing local minority
- 13 health coalitions to:
- 14 (A) provide community planning and needs assessment
- 15 assistance to the local minority health coalitions; and
- 16 (B) assist the local minority health coalitions in the
- 17 development of local minority health intervention plans. The
- 18 plans shall be developed to coincide with the state fiscal year.
- 19 (14) Establish a liaison between the department and the Indiana
- 20 Minority Health Coalition, Inc., to:
- 21 (A) coordinate the state department of health resources needed
- 22 for the development of local coalitions;
- 23 (B) provide assistance to and monitor the local coordinators in
- 24 the development of local intervention plans;
- 25 (C) serve as the barometer to the state department of health on
- 26 the minority health concerns of local coalitions;
- 27 (D) assist in coordinating the minority community input on
- 28 state policies and programs;
- 29 (E) serve as the linkage with the state department of health and
- 30 the local minority health coordinators; and
- 31 (F) monitor the progress of the fulfilling of their
- 32 responsibilities.
- 33 (15) Provide funding, within the limits of appropriations, to
- 34 support preventive health, education, and treatment programs in
- 35 the minority communities that are developed, planned, and
- 36 evaluated by approved organizations.
- 37 (16) Provide assistance to local communities to obtain funding for
- 38 the development of a health care delivery system to meet the
- 39 needs, gaps, and barriers identified in the local plans.

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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 387, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 2, line 34, delete "is established for the following purposes:" and insert "**shall perform the minority health initiative duties set forth in IC 16-46-11.**"

Page 2, delete lines 35 through 42.

Delete page 3.

Page 4, delete lines 1 through 30.

Page 4, line 37, delete "the state health" and insert "**at least an appointed assistant commissioner.**"

Page 4, delete line 38.

Page 4, after line 42, begin a new paragraph and insert:

"Sec. 7. This chapter expires July 1, 2014.

SECTION 5. IC 16-46-11-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2010]: Sec. 1. The **office of minority health and the** state department of health, in partnership with the Indiana Minority Health Coalition, Inc., shall do the following:

- (1) Staff, coordinate, and assist in the implementation of the comprehensive health plan developed by the interagency state council on black and minority health established under IC 16-46-6.
- (2) Expand, develop, and implement a community based state structure that is conducive to addressing the health disparities of the minority populations in Indiana.
- (3) Monitor minority health progress.
- (4) Establish policy.
- (5) Fund minority health programs, research, and other initiatives.
- (6) Provide the following through interdepartmental coordination:
 - (A) The data and technical assistance needs of the local minority health coalitions.
 - (B) Measurable minority health objectives to local minority health coalitions for the development of health intervention programs.
- (7) Provide through the state health data center established by IC 16-19-10-3 minority health research and resource information addressing the following:
 - (A) Research within minority populations.
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organizations interested in minority health.

(C) Racial and ethnic specific databases including morbidity, diagnostic groups, social/economic, education, and population.

(D) Attitude, knowledge, and belief information.

(8) Staff a minority health hotline that establishes linkages with other health and social service hotlines and local coalitions.

(9) Develop and implement an aggressive recruitment and retention program to increase the number of minorities in the health and social services professions.

(10) Develop and implement an awareness program that will increase the knowledge of health and social service providers to the special needs of minorities.

(11) Develop and implement culturally and linguistically appropriate health promotion and disease prevention programs that would emphasize avoiding the health risk factors for conditions affecting minorities and incorporate an accessible, affordable, and acceptable early detection and intervention component.

(12) Provide the state support necessary to ensure the continued development of the existing minority health coalitions and to develop coalitions in other areas targeted for minority health intervention.

(13) Coordinate each of the counties with existing local minority health coalitions to:

(A) provide community planning and needs assessment assistance to the local minority health coalitions; and

(B) assist the local minority health coalitions in the development of local minority health intervention plans. The plans shall be developed to coincide with the state fiscal year.

(14) Establish a liaison between the department and the Indiana Minority Health Coalition, Inc., to:

(A) coordinate the state department of health resources needed for the development of local coalitions;

(B) provide assistance to and monitor the local coordinators in the development of local intervention plans;

(C) serve as the barometer to the state department of health on the minority health concerns of local coalitions;

(D) assist in coordinating the minority community input on state policies and programs;

(E) serve as the linkage with the state department of health and the local minority health coordinators; and

(F) monitor the progress of the fulfilling of their

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responsibilities.

(15) Provide funding, within the limits of appropriations, to support preventive health, education, and treatment programs in the minority communities that are developed, planned, and evaluated by approved organizations.

(16) Provide assistance to local communities to obtain funding for the development of a health care delivery system to meet the needs, gaps, and barriers identified in the local plans."

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 387 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 10, Nays 0.

COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 387, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

BROWN C, Chair

Committee Vote: yeas 11, nays 0.

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