

Overview

The 2018 short session of the Indiana General Assembly concluded on March 15, shortly after midnight. The last day of the session ended in a chaotic manner with bills covering hot topics such as school funding and safety, taxes, gun licensing, federal compliance, and autonomous vehicles not receiving a vote before the midnight deadline.

Significant legislation was passed addressing Governor Holcomb's State of the State goals for increasing workforce training, requiring computer classes in K-12, providing expanded resources for the opioid crisis and incentives for the tech sector of the economy. In addition legislators enacted a law designating the Say's Firefly as the official State Insect.

The Governor has called a special session, which will likely be May 14 or 15 to address 5 specific items that need immediate attention: Increase funding for the Indiana Secured School fund by \$5 million now and in FY19; allow school corporations to obtain funding advances for school security equipment and capital purchase; provide Muncie Community School Corporation with one-time \$12 million loan from Common School Fund; conform with federal tax reform changes by updating state's conformity date to February 11, 2018 and comply with IRS rules to product federal taxpayer information and assure access to federal tax data.

IAFP had a successful session accomplishing several initiatives and modifying or defeating onerous legislation. While a number of bills died during the session only the key bills are outlined below. Those that passed were all signed by the Governor.

Key Legislation Advanced by IAFP

Telephone referrals: Legislation on referrals to other providers passed last session had the unintended consequence of inhibiting telephone referrals due to written notification requires. IAFP led the effort to modify the statute to permit a simple verbal referral to patients when made by telephone and the language was passed in both SEA 223 and HB 1244.

Legalization of CBD oil: While multiple bills were introduced and a wide range of provisions discussed ultimately SEA 52 became law. The bill legalizes CBD oil that made from hemp and is lab tested to ensure only trace amounts of THC.

Marian College Family Practice Scholarships: Makes the following changes concerning the primary care shortage area scholarship: amends the practice requirements to receive a scholarship and the repayment requirements for noncompliance with a primary care practice agreement and provides that, if the commission and a recipient of a scholarship enter into a new written agreement that complies with the primary care shortage area scholarship provisions, the commission and the recipient may terminate an agreement entered into or renewed before July 1, 2018.

Key Legislation IAFP Successfully Modified

Prior authorization by insurers: The key provisions of SEA 1143 requires insurers to post all CPT codes on their website which requires prior authorization, requires electronic submission of all prior authorization requests by 1/1/20 unless plan agrees to accept paper submission, and after 12/31/19 if a prior authorization is provided the plan may not deny the claim if the services were rendered in accordance with the prior authorization.

Physician Order for Scope of Treatment (POST): SEA 1119 updated Indiana's current POST statute adding licensed dentists, home health aides, and physician assistants to the definition of "health care provider" for purposes of a POST form; establishes a priority order for who may provide consent if an adult is incapable of providing consent to health care and provides certain exceptions to the priority order. If the individuals at the same priority level disagree as to the health care decisions on behalf of the patient, a majority of the available individuals at the same priority level is controlling. Allows a treating physician, advanced practice nurse, or physician assistant to execute and exercise certain responsibilities concerning a POST form. Allows a POST document that was executed in another state and that meets certain conditions to be honored in Indiana.

INSPECT: SEA 221 requires practitioners to obtain information about a patient from the INSPECT data base before prescribing an opioid or benzodiazepine to the patient. The bill provides exemptions for: (1) the information from the data base that integrated into the patient's electronic health records; (2) beginning January 1, 2019, a practitioner who provides services to the patient in the emergency department of a hospital or a pain management clinic; (3) beginning January 1, 2020, a practitioner who provides services to the patient in a hospital; and (4) beginning January 1, 2021, all practitioners. Provides that a practitioner is not required to obtain information about a patient who is subject to a pain management contract from the INSPECT data base more than once every 90 days and establishes a process for obtaining a waiver if the practitioner does not have internet access.

CME to included two hours on controlled substances: SB 225 establishes 2 hours of continuing for licensed health care practitioners who apply for a controlled substances registration.

Chiropractic expansion of scope of practice: HEA 1384 updated the chiropractic scope of practice to reflect current teaching and practices, including dry needling. Chiropractors may now order imaging and other tests to determine a diagnosis and to treat injuries, conditions and disorders through spinal adjustment or manipulation.

Key Legislation Successfully Defeated by IAFP

Office Based Opioid Treatment (OBOT): SB 398 would have imposed extensive and onerous regulations on OBOT programs and practitioners in an effort to curb diversion of opioid agonist

medications to prisons and other illicit activity. This topic may be assigned to an interim study committee for further discussion and development of legislation for 2019.

Advance Practice Nurse Independent Practice: IAFP was a key player in bottling up HB 1302 which would have provided for and independent practice by advance nurse practitioners with virtually no oversight by a physician. We fully expect this bill to return again next year.

Bills Supported by IAFP but did not advance

Limitation on access to cigarettes and increased tobacco taxes: Citing the unknown impact of the loss of revenue in a non-budgetary year, House Republicans did not advance any tobacco legislation.

Maintenance of Certification: SB 208 which would have prohibited hospital from using a failure to maintain certification as a basis for employment discriminating. In addition, insurers would have been prohibited from refusing to contract with a physician solely on a lack of maintenance of certification. The bill failed to be heard in the House.

Prohibition of Physician Non-Compete Clauses: HB 1235 failed to advance out of the House Employment and Labor Committee.

Legislation IAFP opposed and was passed

Abortion: Over the objections of IAFP and numerous other entities and individuals, SEA 340 was signed into law. The bill makes various changes to the abortion law impacting abortion clinic license applications, abortion clinic inspections, abortion inducing drugs and the provision of information to a woman seeking an abortion. Requires providers to report abortion complications to the state department of health; ISDH will collect and maintain the data. Provided clarification and expansion of the safe haven law and newborn safety devices.