

Insights

Party Like It's July 1, 2024

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The beginning of July always brings fireworks, cookouts, patriotic festivities, *and* a laundry list of new laws with a July 1 effective date. This year is no different, as several new laws applicable to health care providers were enacted by the Indiana General Assembly during the 2024 legislative session and are scheduled to go into effect on July 1, 2024.

See below for bite-size summaries of several new health care laws with a July 1 effective date. If you think a new law may be applicable to your organization or practice, or if you'd like to learn more, reach out to Grant M. Achenbach or Brandon W. Shirley.

- **SEA 9, Notice of Health Care Mergers and Acquisitions:** Requires health care entities to provide 90 days' notice of any merger or acquisition to the Indiana Office of the Attorney General. See this article by Brian Heaton and Maria Vladimirova Geltz of Krieg DeVault for more information.
- **HEA 1426, Long Acting Reversible Contraceptives (LARCs):** Requires hospitals that operate maternity units to ensure that women who give birth in the hospital and are eligible for or receive Medicaid assistance are provided the option to receive a subdermal LARC (if not medically contraindicated). The requirement will not apply to hospitals that notify the Indiana Department of Health in writing that the hospital has a faith-based objection to the requirement.
- **HEA 1332, Insurance Matters:** For contracts between health care providers and payers entered into on or renewed after June 30, 2024, requires either party to provide a minimum of 90-days notice before termination.
- **HEA 1259, Health Care Matters:** On July 1, this omnibus legislation:
 - Reinstates the ability of the Indiana Department of Health to grant extensions to hospitals related to the filing of annual fiscal reports;
 - Repeals the requirement that clinical nurse preceptors have 18 months of experience as a registered nurse; and
 - Allows respiratory therapist students with student permits to care for pediatric patients, if appropriately supervised.
- **SEA 132, Professions and Professional Services:** Another omnibus health care bill, this legislation does the following on July 1:

- Repeals the requirement that a practitioner outside of Indiana treating a patient located in Indiana file a telehealth certification with the Professional Licensing Agency.
 - Updates English proficiency requirements for nursing applicants; and
 - Requires the Indiana Board of Nursing to issue nursing licenses to foreign educated nurse applicants either by endorsement or examination (current law only allows licensure by endorsement).
- **SEA 273, Biomarker Testing Coverage:** Requires health plans (both commercial and Medicaid) to cover biomarker testing that is supported by medical and scientific evidence.
 - **HEA 1216, Medicaid Reimbursement for Certain Detainees:** Requires Medicaid and managed care entities to reimburse for services provided to Medicaid recipients subject to Emergency Detention Orders (EDO), and allows an attestation signed by a clinician regarding probable cause related to the issuance of an EDO to be based on information given to the clinician.
 - **HEA 1058, Breast Cancer Screening and Services:** Requires facilities that perform mammography examinations to provide notices to patients and their referring providers of assessments regarding breast tissue density.
 - **HEA 1070, Mental Health Grants:** Allows the Division of Mental Health and Addiction to award mental health grants to for-profit community mental health organizations if a nonprofit organization does not qualify for the grant.
 - **HEA 1138, Professional Licensing Matters:** (1) Allows 100% of supervised experience hours for behavioral health professionals to occur through virtual supervision; and (2) provides flexibility for behavioral health professionals to take their licensing examinations early.
 - **HEA 1205, Mental Health Standards and Reporting:** Requires Community Mental Health Centers (CMHCs) to include certain demographic and clinical data in their annual reports.

Health care providers should also be aware that Indiana is transitioning all Medicaid long term services and supports to a managed care model, known as Pathways for Aging, on July 1, 2024, which will significantly impact providers who care for Medicaid recipients over age 60. Look for more information on what to expect from this rollout soon. If you have questions regarding information in this alert, please contact Grant M. Achenbach or Brandon W. Shirley.

Disclaimer. The summaries above are intended to highlight key provisions applicable to health care providers and are not intended to be comprehensive summaries of each listed piece of legislation. The contents of this article should not be construed as legal advice or a legal opinion on any specific facts or circumstances. The contents are intended for general informational purposes only, and you are urged to consult with counsel concerning your situation and specific legal questions you may have.