HOUSE BILL No. 1462

AM146204 has been incorporated into introduced printing.

Synopsis: Emergency department substance use plans.



IN 1462—LS 7300/DI 77

Introduced

First Regular Session of the 123rd General Assembly (2023)

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 2022 Regular Session of the General Assembly.



HOUSE BILL No. 1462

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 16-21-2-18 IS ADDED TO THE INDIANA
2	CODE AS A NEW SECTION TO READ AS FOLLOWS
3	[EFFECTIVE JULY 1, 2023]: Sec. 18. (a) This section applies to an
4	emergency department that is owned or operated by hospital
5	licensed under IC 16-21.
6	(b) As used in this section, "substance use disorder" includes:

- (b) As used in this section, "substance use disorder" includes:
- (1) opioid use disorder;
 - (2) alcohol use disorder; and
 - (3) any other substance use disorder determined by the state department.
- (c) Before December 31 of each year, an emergency department must submit a substance use disorder treatment plan with the state department for the subsequent year to initiate interventions with patients who have a substance use related emergency department visit. The plan must include the following:

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1	(1) A detailed protocol to connect patients with substance use	
2	disorders to treatment, prevention, recovery, peer support	
3	services, and harm reduction services upon discharge from	
4	the emergency department.	
5	(2) An incorporation of the screening, brief intervention, and	
6	referral to treatment screening tool.	
7	(3) A procedure to initiate or connect substance use patients	
8	to medication assisted treatment for addiction disorders,	
9	including:	
10	(A) treatment for opioid use disorder and alcohol use	
11	disorder; and	
12	(B) providing immediate access to:	
13	(i) naloxone;	
14	(ii) an opioid antagonist that can reverse opioid	
15	overdoses; and	
16	(iii) all federal Food and Drug Administration	
17	approved medications for the treatment of opioid	
18	use disorder and alcohol use disorder.	
19	(4) An analysis of the emergency department's ability to and	
20	a plan to:	
21	(A) begin initiation of medication before discharge; and	
22	(B) coordinate outpatient medication referrals upon	
23	discharge.	
24	(d) The services provided to a patient under a substance use	
25	disorder treatment plan provided to the state department under	
26	this section are considered to be medically necessary.	
27	(e) This subsection applies after December 31, 2023. The office	
28	of the secretary of family and social services shall require managed	
29	care organizations to consider services provided to an individual	
30	under a substance use disorder treatment plan that is provided to	
31	the state department as medically necessary.	
32	(f) After December 31, 2023, an emergency department must	
33	implement a continuing education and training program to	
34	emergency department personnel on:	
35	(1) substance use disorder; and	
36	(2) best practices for emergency medical care delivery for	
37	patients who are most at risk of dying after emergency room	
38	discharge.	
39	(g) The state department may adopt rules under IC 4-22-2 to	
40	implement this chapter.	

