



January 6, 2026

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## HOUSE BILL No. 1031

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DIGEST OF HB 1031 (Updated January 6, 2026 9:25 am - DI 116)

**Citations Affected:** IC 4-23; IC 35-52; IC 36-2.

**Synopsis:** County coroners. Makes changes to the blood or tissue retention protocols at a hospital for purposes of conducting a death investigation. Makes changes to the training course requirements for coroners and deputy coroners. Provides that a coroner or deputy coroner who conducts a death investigation or signs a death certificate without completing certain training commits a Class B misdemeanor. Provides that, if a coroner or deputy coroner fails to complete the required training course within the time required, the county shall reimburse the coroners training board for the cost of the training. Provides that the county may recover from an individual the amount the county reimbursed the coroners training board. Makes technical corrections.

**Effective:** January 1, 2026 (retroactive); July 1, 2026.

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**Engleman, Abbott**

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December 1, 2025, read first time and referred to Committee on Local Government.  
January 6, 2026, amended, reported — Do Pass.

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HB 1031—LS 6321/DI 116





January 6, 2026

Second Regular Session of the 124th General Assembly (2026)

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 2025 Regular Session of the General Assembly.

## HOUSE BILL No. 1031

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

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

- 1 SECTION 1. IC 4-23-6.5-10, AS AMENDED BY P.L.3-2008,  
2 SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
3 JULY 1, 2026]: Sec. 10. The board shall consult with the Indiana law  
4 enforcement academy under IC 36-2-14-22.3 concerning criminal  
5 investigations in the creation of:  
6 (1) the training course for coroners and deputy coroners under  
7 IC 36-2-14-22.3(a); and  
8 (2) the annual training course for coroners and deputy coroners  
9 under ~~IC 36-2-14-22.3(b)~~. **IC 36-2-14-22.3(c)**.  
10 SECTION 2. IC 35-52-36-13.3 IS ADDED TO THE INDIANA  
11 CODE AS A **NEW** SECTION TO READ AS FOLLOWS  
12 [EFFECTIVE JULY 1, 2026]: **Sec. 13.3. IC 36-2-14-23 defines a**  
13 **crime concerning coroners and deputy coroners.**  
14 SECTION 3. IC 36-2-14-22.1, AS AMENDED BY THE  
15 TECHNICAL CORRECTIONS BILL OF THE 2026 GENERAL  
16 ASSEMBLY, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
17 JANUARY 1, 2026 (RETROACTIVE)]: Sec. 22.1. (a) As used in this

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section, "hospital" refers to a hospital that is licensed under IC 16-21-2.

(b) Upon the request of a coroner who is conducting or will conduct a death investigation on an individual who is admitted or was admitted to a hospital, the hospital shall provide a sample of the individual's blood or tissue to the coroner.

(c) A hospital shall have a blood retention protocol for the preservation of the first sample of blood drawn for an individual seeking treatment of emergency care services at an emergency department of the hospital regardless of whether the individual is ultimately admitted to the hospital: who is:

**(1) treated for an injury that is suspicious, violent, accidental, or from an overdose;**

**(2) determined by a provider to be critically injured or mortally wounded at the time the patient seeks emergency care services at the emergency department; and**

**(3) admitted as an inpatient to the hospital.**

**The requirements set forth in this subsection may be waived in any case where a first sample of blood cannot be drawn in the best interest of the clinical care of the patient or the first sample of blood is adulterated.**

**(d)** The protocol under subsection (c) shall include a plan for:

(1) when a patient is transferred to another hospital; and

(2) notifying the laboratory for a requisition or order for whole blood sample analysis for the patient identified under subsection (c). to indicate when a patient is:

~~(A) treated for an injury that is suspicious, violent, accidental, or from an overdose; and~~

~~(B) determined by a provider to be critically injured or mortally wounded at the time the patient seeks emergency care services at the emergency department.~~

~~(d)~~ **(e)** A laboratory that receives an order for whole blood sample analysis and the notification under subsection ~~(c)(2)~~ **(d)(2)** shall do the following:

(1) The laboratory shall hold the blood sample in storage until the earlier of the following:

(A) The expiration of the twenty-one (21) day period beginning on the date that the sample of the patient's blood is drawn.

(B) The date of the patient's discharge from the hospital. For purposes of this clause, the transfer of the patient to another hospital does not constitute a discharge.

(C) The date of the patient's death.



(2) This subdivision applies if:

(A) the patient is transferred to another hospital; and

(B) at the time of the transfer, the ~~transferring hospital~~  
**laboratory** is still holding the first blood sample in storage in  
accordance with subdivision (1)(A).

The transferring hospital laboratory shall hold the first blood  
sample in storage in accordance with subdivision (1)(A), unless  
the transferring hospital laboratory receives information from the  
receiving hospital that the patient has been discharged from the  
receiving hospital or has died.

The requirements set forth in this subsection may be waived in any  
case where the sample is tested and cannot be retained for reasons of  
medical necessity in the clinical care of the patient.

~~(e)~~ (f) A coroner does not need to obtain a warrant to request a  
blood or tissue sample under this section.

SECTION 4. IC 36-2-14-22.3, AS ADDED BY P.L.3-2008,  
SECTION 258, IS AMENDED TO READ AS FOLLOWS  
[EFFECTIVE JULY 1, 2026]: Sec. 22.3. (a) The coroners training  
board established by IC 4-23-6.5-3, in consultation with the Indiana  
law enforcement academy, shall create and offer a training course for  
coroners and deputy coroners. **The training course must include, at  
a minimum, forty (40) hours of instruction. The training course  
must require each coroner and deputy coroner to attend, complete,  
and successfully pass a certification program that consists of  
in-person classroom lectures and instruction, as well as a  
supervised externship.**

**(b) The training course described in subsection (a) must include  
instruction regarding:**

~~(1)~~ at least forty ~~(40)~~ hours of instruction; and

~~(2)~~ instruction regarding:

~~(A)~~ (1) death investigation;

~~(B)~~ (2) crime scenes; and

~~(C)~~ (3) preservation of evidence at a crime scene for police and  
crime lab technicians.

~~(b)~~ (c) The coroners training board, in consultation with the Indiana  
law enforcement academy, shall create and offer an annual training  
course for coroners and deputy coroners. The annual training course  
must **include at a minimum eight (8) hours of instruction and cover  
recent developments in:**

~~(1)~~ include at least eight ~~(8)~~ hours of instruction; and

~~(2)~~ cover recent developments in:

~~(A)~~ (1) death investigation;



~~(B)~~ (2) crime scenes; and

~~(C)~~ (3) preservation of evidence at a crime scene for police and crime lab technicians.

~~(c)~~ (d) In creating the courses under **this section** ~~subsections (a) and (b)~~; the coroners training board shall consult with a pathologist certified by the American Board of Pathology regarding medical issues that are a part of the training courses.

~~(d)~~ (e) All training in the courses offered under **this section** ~~subsections (a) and (b)~~ that involves medical issues must be approved by a pathologist certified by the American Board of Pathology.

~~(e)~~ (f) All training in the courses offered under **this section** ~~subsections (a) and (b)~~ that involves crime scenes and evidence preservation must be approved by a law enforcement officer.

~~(f)~~ (g) The coroners training board shall issue a coroner or deputy coroner a certificate upon successful completion of the courses described in ~~subsections (a) and (b)~~; **this section**.

SECTION 5. IC 36-2-14-23, AS AMENDED BY P.L.3-2008, SECTION 260, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 23. (a) Each coroner shall successfully complete the training course offered under section 22.3(a) of this chapter within six (6) months after taking office.

(b) Each deputy coroner shall successfully complete the training course offered under section 22.3(a) of this chapter within one (1) year after beginning employment with a coroner's office.

(c) Each coroner and each deputy coroner shall successfully complete the annual training course offered under section ~~22.3(b)~~ **22.3(c)** of this chapter each year after the year in which the coroner or deputy coroner received the training required by section 22.3(a) of this chapter.

(d) After a coroner or deputy coroner has:

(1) successfully completed the training course as required under subsection (a) or (b); and

(2) successfully completed the annual training course as required under subsection (c);

the coroner or deputy coroner shall present a certificate or other evidence to the county executive, or in the case of a county that contains a consolidated city, the city-county council, that the coroner or deputy coroner has successfully completed the training required under subsection (a), (b), or (c).

(e) If a coroner or deputy coroner does not present a certificate or other evidence to the county executive, or in the case of a county that contains a consolidated city, the city-county council, that the coroner



1 or deputy coroner has successfully completed the training required  
 2 under subsection (a), (b), or (c), the county executive or city-county  
 3 council shall order the auditor to withhold the paycheck of the coroner  
 4 or deputy coroner until the coroner or deputy coroner satisfies the  
 5 respective training requirements under subsections (a), (b), and (c),  
 6 unless the county executive or city-county council adopts a resolution  
 7 finding that:

8 (1) the failure of the coroner or deputy coroner to complete the  
 9 respective training requirements under subsections (a), (b), and  
 10 (c) is the result of unusual circumstances;

11 (2) the coroner or deputy coroner is making reasonable progress,  
 12 under the circumstances, toward completing the respective  
 13 training requirements under subsections (a), (b), and (c); and

14 (3) in light of the unusual circumstances described in subdivision  
 15 (1), withholding the paycheck of the coroner or deputy coroner  
 16 would be unjust.

17 (f) If the county executive or city-county council orders an auditor  
 18 to withhold a paycheck under subsection (e) and a coroner or deputy  
 19 coroner later presents a certificate or other evidence to the county  
 20 executive or city-county council that the coroner or deputy coroner has  
 21 successfully completed training required under subsection (a), (b), or  
 22 (c), the county executive or city-county council shall order the auditor  
 23 to release all of the coroner's or deputy coroner's paychecks that were  
 24 withheld from the coroner or deputy coroner.

25 **(g) A coroner or deputy coroner who has not successfully**  
 26 **completed the training required under subsection (a) or (b) may**  
 27 **not conduct a death investigation or sign a death certificate. A**  
 28 **coroner or deputy coroner who violates this subsection commits a**  
 29 **Class B misdemeanor.**

30 **(h) If a coroner or deputy coroner begins a training course**  
 31 **required under subsection (a) or (b) but fails to complete the**  
 32 **course within the time required by this section, the county shall**  
 33 **reimburse the coroners training board for the cost of the training.**  
 34 **The county may recover from the individual the amount the county**  
 35 **reimbursed the coroners training board under this subsection.**

36 SECTION 6. An emergency is declared for this act.



## COMMITTEE REPORT

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1031, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 4-23-6.5-10, AS AMENDED BY P.L.3-2008, SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 10. The board shall consult with the Indiana law enforcement academy under IC 36-2-14-22.3 concerning criminal investigations in the creation of:

- (1) the training course for coroners and deputy coroners under IC 36-2-14-22.3(a); and
- (2) the annual training course for coroners and deputy coroners under ~~IC 36-2-14-22.3(b)~~: **IC 36-2-14-22.3(c)**."

Page 1, delete lines 5 through 17, begin a new paragraph and insert:

"SECTION 2. IC 36-2-14-22.1, AS AMENDED BY THE TECHNICAL CORRECTIONS BILL OF THE 2026 GENERAL ASSEMBLY, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2026 (RETROACTIVE)]: Sec. 22.1. (a) As used in this section, "hospital" refers to a hospital that is licensed under IC 16-21-2.

(b) Upon the request of a coroner who is conducting or will conduct a death investigation on an individual who is admitted or was admitted to a hospital, the hospital shall provide a sample of the individual's blood or tissue to the coroner.

(c) A hospital shall have a blood retention protocol for the preservation of the first sample of blood drawn for an individual seeking ~~treatment of~~ emergency care services at an emergency department of the hospital ~~regardless of whether the individual is ultimately admitted to the hospital: who is:~~

- (1) treated for an injury that is suspicious, violent, accidental, or from an overdose;**
- (2) determined by a provider to be critically injured or mortally wounded at the time the patient seeks emergency care services at the emergency department; and**
- (3) admitted as an inpatient to the hospital.**

**The requirements set forth in this subsection may be waived in any case where a first sample of blood cannot be drawn in the best interest of the clinical care of the patient or the first sample of blood is adulterated.**

**(d) The protocol under subsection (c) shall include a plan for:**

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- (1) when a patient is transferred to another hospital; and
- (2) notifying the laboratory for a requisition or order for whole blood sample analysis **for the patient identified under subsection (c).** to indicate when a patient is:

- (A) treated for an injury that is suspicious; violent; accidental; or from an overdose; and

- (B) determined by a provider to be critically injured or mortally wounded at the time the patient seeks emergency care services at the emergency department.

~~(d)~~ (e) A laboratory that receives an order for whole blood sample analysis and the notification under subsection ~~(c)(2)~~ (d)(2) shall do the following:

- (1) The laboratory shall hold the blood sample in storage until the earlier of the following:

- (A) The expiration of the twenty-one (21) day period beginning on the date that the sample of the patient's blood is drawn.

- (B) The date of the patient's discharge from the hospital. For purposes of this clause, the transfer of the patient to another hospital does not constitute a discharge.

- (C) The date of the patient's death.

- (2) This subdivision applies if:

- (A) the patient is transferred to another hospital; and

- (B) at the time of the transfer, the ~~transferring hospital~~ **laboratory** is still holding the first blood sample in storage in accordance with subdivision (1)(A).

The transferring hospital laboratory shall hold the first blood sample in storage in accordance with subdivision (1)(A), unless the transferring hospital laboratory receives information from the receiving hospital that the patient has been discharged from the receiving hospital or has died.

The requirements set forth in this subsection may be waived in any case where the sample is tested and cannot be retained for reasons of medical necessity in the clinical care of the patient.

~~(e)~~ (f) A coroner does not need to obtain a warrant to request a blood or tissue sample under this section.

SECTION 3. IC 36-2-14-22.3, AS ADDED BY P.L.3-2008, SECTION 258, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 22.3. (a) The coroners training board established by IC 4-23-6.5-3, in consultation with the Indiana law enforcement academy, shall create and offer a training course for coroners and deputy coroners. **The training course must include, at**



a minimum, forty (40) hours of instruction. The training course must require each coroner and deputy coroner to attend, complete, and successfully pass a certification program that consists of in-person classroom lectures and instruction, as well as a supervised externship.

(b) The training course described in subsection (a) must include instruction regarding:

- (1) at least forty (40) hours of instruction; and
- (2) instruction regarding:
  - (A) (1) death investigation;
  - (B) (2) crime scenes; and
  - (C) (3) preservation of evidence at a crime scene for police and crime lab technicians.

(b) (c) The coroners training board, in consultation with the Indiana law enforcement academy, shall create and offer an annual training course for coroners and deputy coroners. The annual training course must include at a minimum eight (8) hours of instruction and cover recent developments in:

- (1) include at least eight (8) hours of instruction; and
- (2) cover recent developments in:
  - (A) (1) death investigation;
  - (B) (2) crime scenes; and
  - (C) (3) preservation of evidence at a crime scene for police and crime lab technicians.

(c) (d) In creating the courses under this section subsections (a) and (b), the coroners training board shall consult with a pathologist certified by the American Board of Pathology regarding medical issues that are a part of the training courses.

(d) (e) All training in the courses offered under this section subsections (a) and (b) that involves medical issues must be approved by a pathologist certified by the American Board of Pathology.

(e) (f) All training in the courses offered under this section subsections (a) and (b) that involves crime scenes and evidence preservation must be approved by a law enforcement officer.

(f) (g) The coroners training board shall issue a coroner or deputy coroner a certificate upon successful completion of the courses described in subsections (a) and (b): **this section.**".

Page 2, delete lines 1 through 23.

Page 2, line 33, strike "22.3(b)" and insert "22.3(c)".

Page 3, after line 42, begin a new paragraph and insert:

"SECTION 5. An emergency is declared for this act."



Renumber all SECTIONS consecutively.  
and when so amended that said bill do pass.

(Reference is to HB 1031 as introduced.)

MAY

Committee Vote: yeas 10, nays 0.

