



Reprinted  
January 27, 2026

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## SENATE BILL No. 91

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DIGEST OF SB 91 (Updated January 26, 2026 3:27 pm - DI 147)

**Citations Affected:** IC 16-41.

**Synopsis:** Syringe exchange program. Allows the legislative body of the municipality or the executive body of the county to impose a syringe exchange ratio requirement on a syringe exchange program (program) that operates within the jurisdiction of the municipality or county. Amends the duties of a qualified entity that operates a program. Prohibits a qualified entity that operates a program from providing chemical reagents or precursors. Extends the expiration of the program to July 1, 2036.

**Effective:** Upon passage.

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**Crider, Charbonneau, Clark, Yoder,  
Walker K, Bohacek, Jackson L,  
Randolph Lonnie M**

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December 9, 2025, read first time and referred to Committee on Health and Provider Services.  
January 8, 2026, reported favorably — Do Pass.  
January 26, 2026, read second time, amended, ordered engrossed.

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SB 91—LS 6345/DI 147





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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.

## SENATE BILL No. 91

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 16-41-7.5-5.5 IS ADDED TO THE INDIANA  
2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS  
3 [EFFECTIVE UPON PASSAGE]: **Sec. 5.5. The legislative body of**  
4 **the municipality or the executive body of the county may impose a**  
5 **syringe exchange ratio requirement, as determined by the**  
6 **municipality or county, on a program that operates within the**  
7 **jurisdiction of the municipality or county, including a requirement**  
8 **that the program provide only one (1) sterile syringe and needle in**  
9 **exchange for each used sterile syringe and needle.**

10       SECTION 2. IC 16-41-7.5-6, AS AMENDED BY P.L.112-2020,  
11 SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
12 UPON PASSAGE]: Sec. 6. A qualified entity that operates a program  
13 under this chapter must do the following:

- 14           (1) Annually register the program in a manner prescribed by the  
15           state department with the:  
16               (A) state department; and  
17               (B) local health department in the county or municipality

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- 1 where services will be provided by the qualified entity if the  
 2 qualified entity is not the local health department.
- 3 (2) Have one (1) of the following licensed in Indiana provide  
 4 oversight to the qualified entity's programs:
- 5 (A) A physician.  
 6 (B) A registered nurse.  
 7 (C) A physician assistant.
- 8 (3) Store and dispose of all syringes and needles collected in a  
 9 safe and legal manner.
- 10 (4) Provide education and training on drug overdose response and  
 11 treatment, including the administration of an overdose  
 12 intervention drug.
- 13 (5) Provide drug addiction treatment information and referrals to  
 14 drug treatment programs, including programs in the local area and  
 15 programs that offer medication assisted treatment that includes a  
 16 federal Food and Drug Administration approved long acting,  
 17 nonaddictive medication for the treatment of opioid or alcohol  
 18 dependence.
- 19 (6) Provide syringe and needle distribution and collection:
- 20 (A) without collecting or recording personally identifiable  
 21 information; **and**  
 22 **(B) if applicable, in accordance with a syringe exchange**  
 23 **ratio required under section 5.5 of this chapter.**
- 24 **(7) Accept a syringe from an individual, regardless of the**  
 25 **individual's participation in the program, for proper disposal.**
- 26 **(8) Provide a safe syringe disposal container to a program**  
 27 **participant and, upon request, to any other individual.**
- 28 ~~(7)~~ (9) Operate in a manner consistent with public health and  
 29 safety.
- 30 ~~(8)~~ **(10)** Ensure the program is medically appropriate and part of  
 31 a comprehensive public health response.
- 32 ~~(9)~~ **(11)** Keep sufficient quantities of an overdose intervention  
 33 drug (as defined in IC 16-18-2-263.9) in stock and to administer  
 34 in accordance with IC 16-42-27.
- 35 ~~(10)~~ **(12)** Provide testing for communicable diseases, and if an  
 36 individual tests positive for a communicable disease, provide  
 37 health care services or a referral to a health care provider for the  
 38 services.
- 39 ~~(11)~~ **(13)** Establish a referral process for program participants in  
 40 need of:
- 41 (A) information or education concerning communicable  
 42 diseases; or



(B) health care.

**(14) Maintain data concerning the following:**

**(A) HIV and hepatitis C testing and treatment referrals.**

**(B) Drug treatment referrals made under subdivision (5).**

SECTION 3. IC 16-41-7.5-6.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 6.5. A qualified entity that operates a program under this chapter may not provide chemical reagents or precursors (as defined in IC 35-48-4-14.5).**

SECTION 4. IC 16-41-7.5-14, AS AMENDED BY P.L.130-2021, SECTION 15, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 14. This chapter expires July 1, ~~2026~~: **2036**.

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



## COMMITTEE REPORT

Mr. President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 91, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS.

(Reference is to SB 91 as introduced.)

CHARBONNEAU, Chairperson

Committee Vote: Yeas 10, Nays 2

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 SENATE MOTION

Mr. President: I move that Senate Bill 91 be amended to read as follows:

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

"SECTION 1. IC 16-41-7.5-5.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 5.5. The legislative body of the municipality or the executive body of the county may impose a syringe exchange ratio requirement, as determined by the municipality or county, on a program that operates within the jurisdiction of the municipality or county, including a requirement that the program provide only one (1) sterile syringe and needle in exchange for each used sterile syringe and needle.**

SECTION 2. IC 16-41-7.5-6, AS AMENDED BY P.L.112-2020, SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: **Sec. 6. A qualified entity that operates a program under this chapter must do the following:**

- (1) Annually register the program in a manner prescribed by the state department with the:
  - (A) state department; and
  - (B) local health department in the county or municipality where services will be provided by the qualified entity if the qualified entity is not the local health department.
- (2) Have one (1) of the following licensed in Indiana provide oversight to the qualified entity's programs:
  - (A) A physician.
  - (B) A registered nurse.

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- (C) A physician assistant.
- (3) Store and dispose of all syringes and needles collected in a safe and legal manner.
- (4) Provide education and training on drug overdose response and treatment, including the administration of an overdose intervention drug.
- (5) Provide drug addiction treatment information and referrals to drug treatment programs, including programs in the local area and programs that offer medication assisted treatment that includes a federal Food and Drug Administration approved long acting, nonaddictive medication for the treatment of opioid or alcohol dependence.
- (6) Provide syringe and needle distribution and collection:
  - (A) without collecting or recording personally identifiable information; **and**
  - (B) **if applicable, in accordance with a syringe exchange ratio required under section 5.5 of this chapter.**
- (7) Accept a syringe from an individual, regardless of the individual's participation in the program, for proper disposal.**
- (8) Provide a safe syringe disposal container to a program participant and, upon request, to any other individual.**
- ~~(7)~~ **(9)** Operate in a manner consistent with public health and safety.
- ~~(8)~~ **(10)** Ensure the program is medically appropriate and part of a comprehensive public health response.
- ~~(9)~~ **(11)** Keep sufficient quantities of an overdose intervention drug (as defined in IC 16-18-2-263.9) in stock and to administer in accordance with IC 16-42-27.
- ~~(10)~~ **(12)** Provide testing for communicable diseases, and if an individual tests positive for a communicable disease, provide health care services or a referral to a health care provider for the services.
- ~~(11)~~ **(13)** Establish a referral process for program participants in need of:
  - (A) information or education concerning communicable diseases; or
  - (B) health care.
- (14) Maintain data concerning the following:**
  - (A) HIV and hepatitis C testing and treatment referrals.**
  - (B) Drug treatment referrals made under subdivision (5).**

SECTION 3. IC 16-41-7.5-6.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS

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[EFFECTIVE UPON PASSAGE]: **Sec. 6.5. A qualified entity that operates a program under this chapter may not provide chemical reagents or precursors (as defined in IC 35-48-4-14.5)."**

Renumber all SECTIONS consecutively.

(Reference is to SB 91 as printed January 9, 2026.)

CRIDER

