
SENATE BILL No. 180

AM018004 has been incorporated into introduced printing.

Synopsis: Various health care matters.

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2026

IN 180—LS 6885/DI 147



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Introduced

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. 180

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 16-27.5-5-5, AS ADDED BY P.L.143-2025,
2 SECTION 24, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 SEPTEMBER 1, 2025 (RETROACTIVE)]: Sec. 5. (a) A home health
4 aide competency evaluation program must:
5 (1) operate in accordance with 42 CFR 484.80; and
6 (2) address each topic described in section 4(a) of this chapter.
7 (b) **Beginning July 1, 2026**, a home health aide competency
8 evaluation program must include at least seventy-five (75) hours of
9 training. At least sixteen (16) hours of classroom training must occur
10 before supervised practical training.
11 SECTION 2. IC 16-41-14-17 IS REPEALED [EFFECTIVE JULY
12 1, 2026]. Sec. 17. (a) ~~This section does not apply to a person who~~
13 ~~transfers for research purposes semen that contains antibodies for the~~
14 ~~human immunodeficiency virus (HIV).~~
15 (b) ~~A person who, for the purpose of artificial insemination,~~

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recklessly, knowingly, or intentionally donates, sells, or transfers semen that contains antibodies for the human immunodeficiency virus (HIV) commits transferring contaminated semen, a Level 5 felony. The offense is a Level 4 felony if the offense results in the transmission of the virus to another person.

SECTION 3. IC 25-13-1-4, AS AMENDED BY P.L.103-2011, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 4. (a) Any person desiring to practice dental hygiene in Indiana must procure from the board a license to practice dental hygiene. To procure a license, the applicant must submit to the board proof of graduation from an institution for educating dental hygienists that is approved by the board described in section 6(2) of this chapter and other credentials required by this chapter, together with an application on forms prescribed and furnished by the board. Each applicant must pay to the board an application fee set by the board under section 5 of this chapter at the time the application is made and must pass an examination administered by an entity approved by the board. The board may establish under section 5 of this chapter additional requirements as a prerequisite to taking an examination for any applicant who has failed the examination two (2) or more times. Application fees are not refundable.

(b) An applicant described under subsection (a) shall, at the request of the board, make an appearance before the board.

SECTION 4. IC 25-13-1-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 5. (a) The board shall enforce this chapter.

(b) The board may adopt rules consistent with this chapter and with IC 25-14-1 necessary for the proper enforcement of this chapter, the examination of dental hygienists, **the educational requirements described in section 6(2) of this chapter**, and for the conduct of the practice of dental hygiene.

(c) The board may utilize a dental hygienist education program's accreditation by the Commission on Dental Accreditation of the American Dental Association as evidence that the program has met all or part of the standards for dental hygienist education programs established by the board.

SECTION 5. IC 25-13-1-6, AS AMENDED BY P.L.264-2013, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 6. An applicant:

(1) must not have been convicted of a crime that has a direct bearing on the applicant's ability to practice competently;



(2) must be a graduate of a:

(A) school for dental hygienists that:

~~(A)~~ (i) is accredited by the Commission on Dental Accreditation of the American Dental Association;

~~(B)~~ (ii) is recognized by the board; and

~~(C)~~ (iii) requires a formal course of training of not less than two (2) years of eight (8) months each; **or**

(B) dental college in a foreign country with a degree that is substantially similar to a doctorate of:

(i) dental surgery; or

(ii) dental medicine;

determined and approved by the board;

(3) must pass an examination administered by an entity approved by the board; ~~and~~

(4) may not take the examination described in subdivision (3) more than three (3) times; **and**

(5) if the applicant is a graduate of a dental college described in subdivision (2), must submit the applicant's academic transcripts for review by the board.

SECTION 6. IC 25-13-1-10.7, AS ADDED BY P.L.35-2020, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 10.7. (a) A dental hygienist or dental assistant (as defined in IC 25-14-1-1.5(4)) may administer nitrous oxide under the direct supervision of a licensed dentist if the dental hygienist or dental assistant has:

(1) **either:**

(A) been employed in a dental practice for at least one (1) year; or

(B) ~~has~~ graduated from a program:

(i) accredited by the Commission on Dental Accreditation of the American Dental Association; **or**

(ii) **approved by the board;**

(2) satisfactorily completed a three (3) hour didactic nitrous oxide administration course **that:**

(A) ~~containing~~ **contains** curriculum on pharmacology, biochemistry, anatomy of nitrous oxide administration, emergency procedures, and the mechanics of operating a nitrous unit; **and**

(B) **is** accredited by the Commission on Dental Accreditation of the American Dental Association **or approved by the board;** and



(3) demonstrated clinical competency on at least five (5) patients under the direct supervision of a licensed Indiana dentist whose license is in good standing.

(b) The licensed Indiana dentist supervising the clinical competency under subsection (a)(3) shall provide to the dental hygienist or dental assistant a signed affidavit certifying the competency.

(c) Upon receipt of the affidavit provided to a dental hygienist or dental assistant under subsection (b), the provider of an educational program or curriculum described in subsection (a)(2) shall issue a certificate of completion to the dental hygienist or dental assistant. The certificate of completion must be publicly displayed in the dental office of the dental hygienist or dental assistant.

(d) Before permitting a dental hygienist or dental assistant to administer nitrous oxide, the supervising dentist shall:

(1) verify that the dental hygienist or dental assistant has completed the requirements of subsection (a);

(2) determine the maximum percent-dosage of nitrous oxide to be administered to the patient; and

(3) ensure that any administration or monitoring of nitrous oxide by dental hygienists or dental assistants is done in accordance with relevant guidelines and standards developed by the American Dental Association or the American Academy of Pediatric Dentistry.

SECTION 7. IC 25-14-1-3, AS AMENDED BY P.L.264-2013, SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 3. (a) A person desiring to begin the practice of dentistry in Indiana shall procure from the board a license to practice dentistry in Indiana. Except as provided in section 4.5 of this chapter, to procure the license, the applicant must submit to the board proof of graduation from a dental college recognized by the board. The board may recognize dental schools accredited by the Commission on Dental Accreditation of the American Dental Association, if the board is satisfied that the recognition is consistent with the board's requirements. Every applicant must pass an examination administered by an entity approved by the board and, **except as provided in subsection (b)**, may not take the examination more than three (3) times.

(b) The board may establish additional requirements for an applicant who has failed the examination at least three (3) times. The applicant must complete the additional requirements before

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1 **the applicant may take the examination again.**

2 ~~(b)~~ (c) A fee paid under this article may not be refunded.

3 SECTION 8. IC 35-52-16-58 IS REPEALED [EFFECTIVE JULY
4 1, 2026]. ~~Sec. 58. IC 16-41-14-17 defines a crime concerning~~
5 ~~communicable diseases.~~

6 SECTION 9. IC 36-8-4-5, AS AMENDED BY P.L.66-2020,
7 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
8 JULY 1, 2026]: Sec. 5. (a) **The following definitions apply**
9 **throughout this section:**

10 (1) **"Firefighter" means a current or former firefighter.**

11 (2) **"Police officer" means a current or former police officer.**

12 ~~(a)~~ (b) A city shall pay for the care of a police officer or firefighter
13 who suffers an injury while performing the person's duty or while the
14 person is on duty or who contracts illness caused by the performance
15 of the person's duty, including an injury or illness that results in a
16 disability or death presumed incurred in the line of duty under
17 IC 5-10-13. This care includes:

18 (1) medical and surgical care;

19 (2) medicines and laboratory, curative, and palliative agents and
20 means;

21 (3) X-ray, diagnostic, and therapeutic service, including during
22 the recovery period; and

23 (4) hospital and special nursing care if the physician or surgeon
24 in charge considers it necessary for proper recovery.

25 ~~(b)~~ (c) Expenditures required by subsection ~~(a)~~ (b) shall be paid
26 from the general fund of the city.

27 ~~(c)~~ (d) A city that has paid for the care of a police officer or
28 firefighter under subsection ~~(a)~~ (b) has a cause of action for
29 reimbursement of the amount paid under subsection ~~(a)~~ (b) against any
30 third party against whom the police officer or firefighter has a cause of
31 action for an injury sustained because of or an illness caused by the
32 third party. The city's cause of action under this subsection is in
33 addition to, and not in lieu of, the cause of action of the police officer
34 or firefighter against the third party.

35 (e) **The medical benefits under this section are independent**
36 **and distinct from any medical benefits that are available under**
37 **IC 22-3. A police officer or firefighter may recover medical**
38 **benefits under this section without first pursuing a claim for**
39 **medical benefits under IC 22-3. If a police officer or firefighter**
40 **pursues a claim for medical benefits under IC 22-3 and the claim**
41 **is withdrawn or denied, the police officer or firefighter is not**

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precluded from recovering medical benefits under this section.

SECTION 10. IC 36-8-4.3-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 2. **(a) The following definitions apply throughout this section:**

(1) "Firefighter" means a current or former full-time, paid firefighter.

(2) "Police officer" means a current or former full-time, paid police officer.

~~(a)~~ **(b)** A special service district shall pay for the care of:

(1) a ~~full-time, paid~~ police officer who:

(A) suffers an injury; or

(B) contracts an illness;

during the performance of the **police** officer's duty; or

(2) a ~~full-time, paid~~ firefighter who:

(A) suffers an injury; or

(B) contracts an illness;

during the performance of the firefighter's duty.

~~(b)~~ **(c)** The special service district shall pay for the following expenses incurred by a police officer or firefighter described in subsection ~~(a)~~ **(b)**:

(1) Medical and surgical care.

(2) Medicines and laboratory, curative, and palliative agents and means.

(3) X-ray, diagnostic, and therapeutic service, including during the recovery period.

(4) Hospital and special nursing care if the physician or surgeon in charge considers it necessary for proper recovery.

~~(c)~~ **(d)** Expenditures required by subsection ~~(a)~~ **(b) or (c)** shall be paid from the general fund of the special service district.

~~(d)~~ **(e)** A special service district that has paid for the care of a police officer or firefighter under subsection ~~(a)~~ **(b) or (c)** has a cause of action for reimbursement of the amount paid under subsection ~~(a)~~ **(b) or (c)** against any third party against whom the police officer or firefighter has a cause of action for an injury sustained because of, or an illness caused by, the third party. The special service district's cause of action under this subsection is in addition to, and not in lieu of, the cause of action of the police officer or firefighter against the third party.

(f) The medical benefits under this section are independent and distinct from any medical benefits that are available under IC 22-3. A police officer or firefighter may recover medical benefits under



1 this section without first pursuing a claim for medical benefits
 2 under IC 22-3. If the police officer or firefighter pursues a claim
 3 for medical benefits under IC 22-3 and the claim is withdrawn or
 4 denied, the police officer or firefighter is not precluded from
 5 recovering medical benefits under this section.

6 SECTION 11. IC 36-8-4.5-10 IS ADDED TO THE INDIANA
 7 CODE AS A NEW SECTION TO READ AS FOLLOWS
 8 [EFFECTIVE JULY 1, 2026]: Sec. 10. (a) A town shall pay for the
 9 care of a current or retired full-time paid member of a town fire
 10 department who suffers an injury while performing the person's
 11 duty or while the person is on duty or who contracts illness caused
 12 by the performance of the person's duty, including an injury or
 13 illness that results in a disability or death presumed incurred in the
 14 line of duty under IC 5-10-13. This care includes:

- 15 (1) medical and surgical care;
- 16 (2) medicines and laboratory, curative, and palliative agents
 17 and means;
- 18 (3) X-ray, diagnostic, and therapeutic service, including
 19 during the recovery period; and
- 20 (4) hospital and special nursing care if the physician or
 21 surgeon in charge considers it necessary for proper recovery.

22 (b) Expenditures required by subsection (a) shall be paid from
 23 the general fund of the town.

24 (c) A town that has paid for the care of a member of a town
 25 fire department under subsection (a) has a cause of action for
 26 reimbursement of the amount paid under subsection (a) against
 27 any third party against whom the member of the town fire
 28 department has a cause of action for an injury sustained because
 29 of or an illness caused by the third party. The town's cause of
 30 action under this subsection is in addition to, and not in lieu of, the
 31 cause of action of the member of the town fire department against
 32 the third party.

33 (d) The medical benefits under this section are independent
 34 and distinct from any medical benefits that are available under
 35 IC 22-3. A current or retired full-time paid member of a town fire
 36 department may recover benefits under this section without first
 37 pursuing a claim for medical benefits under IC 22-3. If a current
 38 or retired full-time paid member of a town fire department
 39 pursues a claim for medical benefits under IC 22-3 and the claim
 40 is withdrawn or denied, the current or retired full-time paid
 41 member of the town fire department is not precluded from
 42 recovering medical benefits under this section.



SECTION 12. IC 36-8-9-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 8. **(a) As used in this section, "police officer" means a current or former full-time, paid police officer.**

~~(a)~~ **(b)** A town shall pay for the care of a ~~full-time, paid~~ police officer who:

- (1) suffers an injury; or
- (2) contracts an illness;

during the performance of the **police** officer's duty.

~~(b)~~ **(c)** The town shall pay for the following expenses incurred by a police officer described in subsection ~~(a)~~: **(b)**:

- (1) Medical and surgical care.
- (2) Medicines and laboratory, curative, and palliative agents and means.
- (3) X-ray, diagnostic, and therapeutic service, including during the recovery period.
- (4) Hospital and special nursing care if the physician or surgeon in charge considers it necessary for proper recovery.

~~(c)~~ **(d)** Expenditures required by subsection ~~(a)~~ **(b) or (c)** shall be paid from the general fund of the town.

~~(d)~~ **(e)** A town that has paid for the care of a police officer under subsection ~~(a)~~ **(b) or (c)** has a cause of action for reimbursement of the amount paid under subsection ~~(a)~~ **(b) or (c)** against any third party against whom the police officer has a cause of action for an injury sustained because of, or an illness caused by, the third party. The town's cause of action under this subsection is in addition to, and not in lieu of, the cause of action of the police officer against the third party.

(f) The medical benefits under this section are independent and distinct from any medical benefits that are available under IC 22-3. A police officer may recover medical benefits under this section without first pursuing a claim for medical benefits under IC 22-3. If the police officer pursues a claim for medical benefits under IC 22-3 and the claim is withdrawn or denied, the police officer is not precluded from recovering medical benefits under this section.

SECTION 13. IC 36-8-11-27 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 27. **(a) As used in this section, "firefighter" means a current or former full-time, paid firefighter.**

~~(a)~~ **(b)** A fire protection district shall pay for the care of a ~~full-time, paid~~ firefighter who: ~~suffers:~~



1 (1) **suffers** an injury; or
 2 (2) contracts an illness;
 3 during the performance of the firefighter's duties.
 4 ~~(b)~~ (c) The fire protection district shall pay for the following
 5 expenses incurred by a firefighter described in subsection ~~(a)~~: **(b)**:
 6 (1) Medical and surgical care.
 7 (2) Medicines and laboratory, curative, and palliative agents and
 8 means.
 9 (3) X-ray, diagnostic, and therapeutic service, including service
 10 provided during the recovery period.
 11 (4) Hospital and special nursing care if the physician or surgeon
 12 in charge considers it necessary for proper recovery.
 13 ~~(c)~~ (d) Expenditures required by subsection ~~(a)~~ **(b) or (c)** shall be
 14 paid from the fund used by the fire protection district for payment of
 15 the costs attributable to providing fire protection services in the fire
 16 protection district.
 17 ~~(d)~~ (e) A fire protection district that has paid for the care of a
 18 firefighter under subsection ~~(a)~~ **(b) or (c)** has a cause of action for
 19 reimbursement of the amount paid under subsection ~~(a)~~ **(b) or (c)**
 20 against any third party against whom the firefighter has a cause of
 21 action for:
 22 (1) an injury sustained because of; or
 23 (2) an illness caused by;
 24 the third party. The fire protection district's cause of action under this
 25 subsection is in addition to, and not instead of, the cause of action of
 26 the firefighter against the third party.
 27 **(f) The medical benefits under this section are independent and**
 28 **distinct from any medical benefits that are available under IC 22-3.**
 29 **A firefighter may recover medical benefits under this section**
 30 **without first pursuing a claim for medical benefits under IC 22-3.**
 31 **If the firefighter pursues a claim for medical benefits under**
 32 **IC 22-3 and the claim is withdrawn or denied, the firefighter is not**
 33 **precluded from recovering medical benefits under this section.**
 34 SECTION 14. IC 36-8-13-9, AS AMENDED BY P.L.236-2023,
 35 SECTION 207, IS AMENDED TO READ AS FOLLOWS
 36 [EFFECTIVE JULY 1, 2026]: Sec. 9. **(a) As used in this section,**
 37 **"firefighter" means a current or former full-time, paid firefighter.**
 38 ~~(a)~~ (b) A township shall pay for the care of a ~~full-time, paid~~
 39 firefighter who: ~~suffers~~:
 40 (1) **suffers** an injury; or
 41 (2) contracts an illness;



during the performance of the firefighter's duty.

~~(b)~~ (c) The township shall pay for the following expenses incurred by a firefighter described in subsection ~~(a)~~: (b):

(1) Medical and surgical care.

(2) Medicines and laboratory, curative, and palliative agents and means.

(3) X-ray, diagnostic, and therapeutic service, including during the recovery period.

(4) Hospital and special nursing care if the physician or surgeon in charge considers it necessary for proper recovery.

~~(c)~~ (d) Expenditures required by subsection ~~(a)~~ (b) or (c) shall be paid from the township firefighting and emergency services fund established by section 4(a)(1) of this chapter or the township firefighting fund established in by section 4(a)(2)(A) of this chapter, as applicable.

~~(d)~~ (e) A township that has paid for the care of a firefighter under subsection ~~(a)~~ (b) or (c) has a cause of action for reimbursement of the amount paid under subsection ~~(a)~~ (b) or (c) against any third party against whom the firefighter has a cause of action for an injury sustained because of, or an illness caused by, the third party. The township's cause of action under this subsection is in addition to, and not in lieu of, the cause of action of the firefighter against the third party.

(f) The medical benefits under this section are independent and distinct from any medical benefits that are available under IC 22-3. A firefighter may recover medical benefits under this section without first pursuing a claim for medical benefits under IC 22-3. If the firefighter pursues a claim for medical benefits under IC 22-3 and the claim is withdrawn or denied, the firefighter is not precluded from recovering medical benefits under this section.

SECTION 15. IC 36-8-19-14 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 14. (a) **As used in this section, "firefighter" means a current or former full-time, paid firefighter.**

~~(a)~~ (b) A provider unit shall pay for the care of a ~~full-time, paid~~ firefighter who:

(1) suffers an injury; or

(2) contracts an illness;

during the performance of the firefighter's duty.

~~(b)~~ (c) The provider unit shall pay for the following expenses incurred by a firefighter described in subsection ~~(a)~~: (b):



(1) Medical and surgical care.

(2) Medicines and laboratory, curative, and palliative agents and means.

(3) X-ray, diagnostic, and therapeutic service, including during the recovery period.

(4) Hospital and special nursing care if the physician or surgeon in charge considers it necessary for proper recovery.

~~(c)~~ (d) Expenditures required by subsection ~~(a)~~ (b) or (c) shall be paid from the fund used by the provider unit for payment of the costs attributable to providing fire protection services in the provider unit.

~~(d)~~ (e) A provider unit that has paid for the care of a firefighter under subsection ~~(a)~~ (b) or (c) has a cause of action for reimbursement of the amount paid under subsection ~~(a)~~ (b) or (c) against any third party against whom the firefighter has a cause of action for an injury sustained because of, or an illness caused by, the third party. The provider unit's cause of action under this subsection is in addition to, and not in lieu of, the cause of action of the firefighter against the third party.

(f) **The medical benefits under this section are independent and distinct from any medical benefits that are available under IC 22-3. A firefighter may recover medical benefits under this section without first pursuing a claim for medical benefits under IC 22-3. If the firefighter pursues a claim for medical benefits under IC 22-3 and the claim is withdrawn or denied, the firefighter is not precluded from recovering medical benefits under this section.**

SECTION 16. [EFFECTIVE UPON PASSAGE] (a) **The legislative council is urged to assign to an appropriate study committee the task of studying fraud in the health care system, including Medicaid and other local or state health programs.**

(b) **This SECTION expires July 1, 2028.**

SECTION 17. **An emergency is declared for this act.**

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