

SENATE BILL No. 189

DIGEST OF INTRODUCED BILL

Citations Affected: IC 27-1-37-11.

Synopsis: Nonparticipating providers. Prohibits a health carrier from assessing a health provider facility or a provider an administrative fee related to the provision of care to an individual that involves an out of network provider. Provides that if a health carrier assesses a health provider facility or a provider an administrative fee related to the provision of care to an individual that involves an out of network provider, the insurance commissioner shall impose on the health carrier a civil penalty that is equal to double the amount of the administrative fee assessed by the health carrier.

Effective: July 1, 2026.

Baldwin

January 6, 2026, read first time and referred to Committee on Insurance and Financial Institutions.



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.

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

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

1 SECTION 1. IC 27-1-37-11, AS ADDED BY P.L.215-2025,
2 SECTION 52, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2026]: Sec. 11. **(a)** The department shall do the following:

4 (1) Require health carriers to meet network adequacy standards
5 that are no less stringent than the network adequacy standards
6 established by the Centers for Medicare and Medicaid Services.

7 (2) When assessing whether a health carrier has met the network
8 adequacy standards, consider the availability and variety of
9 independent specialty providers that provide services within in
10 network provider facilities in the health carrier's network.

11 **(b) A health carrier may not assess a health provider facility or**
12 **a provider an administrative fee related to the provision of care to**
13 **an individual that involves an out of network provider.**

14 **(c) If a health carrier assesses an administrative fee under**
15 **subsection (b), the commissioner shall impose on the health carrier**
16 **a civil penalty that is equal to double the amount of the**
17 **administrative fee assessed by the health carrier.**



1 (d) The commissioner shall deposit a civil penalty collected
2 under subsection (c) in the department of insurance fund
3 established by IC 27-1-3-28.

