

SENATE BILL No. 225

DIGEST OF INTRODUCED BILL

Citations Affected: IC 4-6-2-13; IC 16-18-2; IC 16-21; IC 32-28-16.

Synopsis: Hospital matters. Amends the definition of "ambulatory outpatient surgical center" to remove the requirement that a surgical procedure is permitted to be performed only by a physician, dentist, or podiatrist who has certain hospital privileges. Prohibits a hospital, debt collector, or other third party from pursuing medical debt collection if the hospital is noncompliant with specified statutes. Requires the Indiana department of health (state department) to determine on a semiannual basis whether a hospital is in compliance with the statutes and notify a hospital concerning the state department's compliance determination. Requires a hospital to provide notice to patients concerning medical debt collection and establishes a deceptive act for failure to do so. Authorizes the attorney general to suspend the authority of a hospital to pursue medical debt collection when the state department has determined that the hospital is noncompliant and allows the attorney general to bring any action against a hospital for a deceptive act of pursuing medical debt while there is a noncompliance determination. Creates an affirmative defense for a debtor if the collection attempt occurred while the hospital was noncompliant. Requires a hospital to provide the state department with 120 days written notice if the hospital plans to: (1) close and permanently terminate hospital operations; or (2) eliminate or reduce a service line for longer than 90 days. Requires notice of the closure or reduction to be provided to certain state agencies and local units.

Effective: July 1, 2026.

Busch

January 8, 2026, read first time and referred to Committee on Health and Provider Services.



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. 225

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 4-6-2-13 IS ADDED TO THE INDIANA CODE
2 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
3 1, 2026]: Sec. 13. (a) **The attorney general may:**

4 (1) **suspend the authority of a hospital, or a debt collector or**
5 **other third party on behalf of a hospital, to pursue medical**
6 **debt collection as described in IC 16-21-16-4; and**
7 (2) **terminate the suspension upon the hospital's compliance**
8 **with IC 16-21-16, as determined by the Indiana department**
9 **of health.**

10 (b) **The attorney general shall enforce IC 16-21-16 and may**
11 **bring any action under IC 24-5-0.5-4(c) concerning a deceptive**
12 **practice described in IC 16-21-16-7(b).**

13 SECTION 2. IC 16-18-2-14, AS AMENDED BY P.L.213-2025,
14 SECTION 146, IS AMENDED TO READ AS FOLLOWS
15 [EFFECTIVE JULY 1, 2026]: Sec. 14. (a) "Ambulatory outpatient
16 surgical center", for purposes of IC 16-19, IC 16-21, IC 16-32-5, and
17 IC 16-38-2, means a public or private institution that meets the



1 following conditions:

2 (1) Is established, equipped, and operated primarily for the
3 purpose of performing surgical procedures and services.
4 (2) Is operated under the supervision of at least one (1) licensed
5 physician or under the supervision of the governing board of the
6 hospital if the center is affiliated with a hospital.
7 (3) Permits a surgical procedure to be performed only by a
8 physician, dentist, or podiatrist who meets the following
9 conditions:
10 (A) Is qualified by education and training to perform the
11 surgical procedure.
12 (B) Is legally authorized to perform the procedure.
13 (C) Is privileged to perform surgical procedures in at least one
14 (1) hospital within the county or an Indiana county adjacent to
15 the county in which the ambulatory outpatient surgical center
16 is located.
17 (D) (C) Is admitted to the open staff of the ambulatory
18 outpatient surgical center.
19 (4) Requires that a licensed physician with specialized training or
20 experience in the administration of an anesthetic supervise the
21 administration of the anesthetic to a patient and remain present in
22 the facility during the surgical procedure, except when only a
23 local infiltration anesthetic is administered.
24 (5) Provides at least one (1) operating room and, if anesthetics
25 other than local infiltration anesthetics are administered, at least
26 one (1) postanesthesia recovery room.
27 (6) Is equipped to perform diagnostic x-ray and laboratory
28 examinations required in connection with any surgery performed.
29 (7) Does not provide accommodations for patient stays of longer
30 than twenty-four (24) hours.
31 (8) Provides full-time services of registered and licensed nurses
32 for the professional care of the patients in the postanesthesia
33 recovery room.
34 (9) Has available the necessary equipment and trained personnel
35 to handle foreseeable emergencies such as a defibrillator for
36 cardiac arrest, a tracheotomy set for airway obstructions, and a
37 blood bank or other blood supply.
38 (10) Maintains a written agreement with at least one (1) hospital
39 for immediate acceptance of patients who develop complications
40 or require postoperative confinement.
41 (11) Provides for the periodic review of the center and the center's
42 operations by a committee of at least three (3) licensed physicians



1 having no financial connections with the center.
 2 (12) Maintains adequate medical records for each patient.
 3 (13) Meets all additional minimum requirements as established by
 4 the state department for building and equipment requirements.
 5 (14) Meets the rules and other requirements established by the
 6 state department for the health, safety, and welfare of the patients.
 7 (b) The term does not include a birthing center.
 8 (c) "Ambulatory outpatient surgical center", for purposes of
 9 IC 16-34, refers to an institution described in subsection (a) and that
 10 has a majority ownership by a hospital licensed under IC 16-21.

11 SECTION 3. IC 16-18-2-223.2 IS ADDED TO THE INDIANA
 12 CODE AS A NEW SECTION TO READ AS FOLLOWS
 13 [EFFECTIVE JULY 1, 2026]: **Sec. 223.2. "Medical debt", for**
 14 **purposes of IC 16-21-16, has the meaning set forth in**
 15 **IC 16-21-16-2.**

16 SECTION 4. IC 16-18-2-292.8 IS ADDED TO THE INDIANA
 17 CODE AS A NEW SECTION TO READ AS FOLLOWS
 18 [EFFECTIVE JULY 1, 2026]: **Sec. 292.8. "Primary residence", for**
 19 **purposes of IC 16-21-16, has the meaning set forth in**
 20 **IC 16-21-16-3.**

21 SECTION 5. IC 16-18-2-328.8 IS ADDED TO THE INDIANA CODE
 22 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE
 23 JULY 1, 2026]: **Sec. 328.8. "Service line", for**
 24 **purposes of IC 16-21-17.1, has the meaning set forth in**
 25 **IC 16-21-17.1-1.**

26 SECTION 6. IC 16-21-16 IS ADDED TO THE INDIANA CODE
 27 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
 28 JULY 1, 2026]:

29 **Chapter 16. Medical Debt Collection Restrictions**

30 **Sec. 1. This chapter applies to medical debt incurred after June**
 31 **30, 2026.**

32 **Sec. 2. As used in this chapter, "medical debt" means any**
 33 **amount owed for health care services, products, or devices**
 34 **provided to an individual by or in a hospital.**

35 **Sec. 3. As used in this chapter, "primary residence" means real**
 36 **or personal property that:**

- 37 **(1) is located in Indiana;**
- 38 **(2) the consumer:**
 - 39 **(A) owns; or**
 - 40 **(B) is buying under contract;**
 - 41 **whether solely or jointly with another person; and**
 - 42 **(3) constitutes the principal place of residence of:**



- (A) the consumer; or
- (B) a dependent of the consumer.

Sec. 4. (a) A hospital, or a debt collector or other third party on behalf of a hospital, may not pursue collection of a medical debt unless the hospital is in compliance with the following statutes, if applicable to the hospital:

- (1) IC 16-21-6.
- (2) IC 16-21-9.
- (3) IC 16-21-17.1.
- (4) IC 16-21-18.
- (5) IC 16-21-19.

(b) The state department shall determine on a semiannual basis whether a hospital is in compliance with the statutes specified in subsection (a) and notify a hospital, in writing, of the state department's determination concerning the hospital's compliance. A determination under this subsection is subject to review under IC 4-21.5.

(c) The state department shall notify the office of the attorney general of any hospital that the state department determines to be noncompliant with the statutes described in subsection (a).

(d) The office of the attorney general may suspend the noncompliant hospital's authority to pursue medical debt collection while the noncompliance remains uncured.

(e) The state department shall notify the office of the attorney general of the following under this chapter:

- (1) A final determination that a hospital is noncompliant.
- (2) A determination that a hospital that was noncompliant has remedied the noncompliance and is now compliant with the statutes.

Upon receiving a notice under subdivision (2), the office of the attorney general shall terminate a suspension described in subsection (d).

(f) An individual may raise a hospital's noncompliance with a statute set forth in subsection (a) as an affirmative defense in any medical debt collection action.

(g) A hospital may pursue collection of a medical debt previously incurred by an individual when the hospital was noncompliant under subsection (a) if the state department subsequently makes a determination, in writing, that the noncompliance has been remedied and the hospital is designated by the state department as compliant under this chapter.

Sec. 5. (a) The state department shall post and update a list of



the noncompliant hospitals on the state department's website.

(b) The state department shall adopt procedures for the following:

(1) The state department's review of a hospital's compliance under this chapter, including a schedule for reviewing and issuing determinations concerning compliance.

(2) A noncompliant hospital's subsequent compliance status review to determine if the noncompliance has been remedied.

Sec. 6. (a) For purposes of this section, a patient includes the parent or guardian of a patient if the patient is a child or a dependent.

(b) A hospital, or a debt collector or other third party on behalf of a hospital, may not file or maintain a lien on a patient's primary residence to recover medical debt if the patient is acting in good faith to make payments on the medical debt.

(c) A patient is considered to be acting in good faith under subsection (b) if the patient does any of the following concerning the medical debt:

(1) Enters into a reasonable payment plan with the hospital.

(2) Applies for financial assistance offered by the hospital.

(3) Makes partial payments toward the balance of the medical debt.

(d) Any lien asserted, claimed, or entered on a primary residence in violation of this section is null and void and must be released at no cost to the patient.

(e) Nothing in this section may be construed to discharge or otherwise release the underlying medical debt.

Sec. 7. (a) A hospital shall include the following information in bold type in at least 14 point font on any statement, payment plan, or medical debt collection communication issued by the hospital, or a debt collector or other third party on behalf of the hospital:

"Medical debt may not result in a lien on your home if you act in good faith to make payments on the medical debt.".

(b) Failure to include the notice described in subsection (a) constitutes a deceptive act under IC 24-5-0.5 that is actionable by the attorney general and is subject to the remedies and penalties under IC 24-5-0.5.

Sec. 8. (a) The attorney general shall enforce this chapter and may do any of the following:

(1) Investigate alleged violations.

(2) Impose civil penalties of not more than ten thousand dollars (\$10,000) per violation.



Sec. 9. (a) An individual injured by a violation of this chapter may bring a civil action to recover in an appropriate court any of

Sec. 9. (a) An individual injured by a violation of this chapter may bring a civil action to recover in an appropriate court any of the following:

- (1) Actual damages.
- (2) Statutory damages not to exceed one thousand dollars (\$1,000).
- (3) Injunctive relief.

(b) A prevailing plaintiff is entitled to recover court costs and reasonable attorney's fees.

SECTION 7. IC 16-21-17.1 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]:

Chapter 17.1. Notice of Closure or Reduction of Services

Sec. 1. As used in this chapter, "service line" means a category of hospital based clinical services offered to patients, including the following:

- (1) Emergency.**
- (2) Obstetrics.**
- (3) Neonatal.**
- (4) Trauma.**
- (5) Behavioral health services.**

Sec. 2. (a) Except as provided in section 4 of this chapter, a hospital shall provide written notice to the state department at least one hundred twenty (120) days before the hospital does any of the following:

- (1) Closes and permanently terminates hospital operations.**
- (2) Eliminates or reduces a service line for longer than ninety (90) days.**

(b) The notice under subsection (a) must include the following:

- (1) The proposed date of closure, elimination, or reduction.
- (2) A description of the affected services and capacity.
- (3) The hospital's plan for patient continuity of care.

(4) The reason for the closure, elimination, or reduction.
Sec. 3. Except as provided in section 4 of this chapter, not later than ten (10) days after the notice is issued under section 2 of this chapter, the following must occur:



- (1) The state department shall post a summary of the proposed closure, elimination, or reduction on the state department's website.
- (2) The state department shall notify the office of the secretary of family and social services and any other affected state agency of the closure, elimination, or reduction.
- (3) The hospital shall provide the notice described in section 2 of this chapter to the following:
 - (A) The local health department.
 - (B) The chief elected official of the local unit in which the hospital is located.

Sec. 4. (a) The state department may waive the requirements in sections 2 and 3 of this chapter upon written request by the hospital only if:

- (1) the closure, elimination, or reduction described in section 2 of this chapter is necessary due to a natural disaster, catastrophic facility failure, or other emergency event beyond the hospital's control; and
- (2) the state department determines that the waiver is necessary to protect the public's health and safety.

(b) The state department shall in a reasonable time period post on the state department's website any waiver granted under this section and the justification for the waiver.

Sec. 5. A hospital that violates this chapter may be subject to any of the following:

- (1) A civil penalty not to exceed ten thousand dollars (\$10,000) per violation.**
- (2) Any other reasonable administrative action determined by the state department.**

SECTION 8. IC 32-28-16 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]:

Chapter 16. Prohibition Against Lien on Principal Residence of a Consumer for Medical Debt

Sec. 1. As used in this chapter, "hospital" refers to an entity licensed under IC 16-21. The term includes an affiliate, officer, agent, or employee of the entity.

Sec. 2. As used in this chapter, "medical debt" means any amount owed for health care services, products, or devices provided to an individual by or in a hospital.

Sec. 3. As used in this chapter, "primary residence" means real or personal property that:



1 **(1) is located in Indiana;**
2 **(2) the consumer:**
3 **(A) owns; or**
4 **(B) is buying under contract;**
5 **whether solely or jointly with another person; and**
6 **(3) constitutes the principal place of residence of:**
7 **(A) the consumer; or**
8 **(B) a dependent of the consumer.**

9 **Sec. 4. A hospital having an ownership or other interest in**
10 **medical debt owed by an individual may not assert, claim, enter,**
11 **maintain, or enforce a lien against the individual's primary**
12 **residence as long as the individual is acting in good faith to make**
13 **payments on the medical debt as set forth in IC 16-21-16-6.**

