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SENATE BILL No. 275

Proposed Changes to January 29, 2026 printing by AM027520

DIGEST OF PROPOSED AMENDMENT

FSSA fiscal matters. Deletes provisions reducing the income levels as a percentage of the federal poverty level for purposes of the Medicaid eligibility of certain Medicare beneficiaries. Requires the office of the secretary of family and social services to collaborate with certain entities to develop a new reimbursement methodology for home health services. Requires a provider of services under a home and community based services waiver to provide certain information to an individual receiving services.

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

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

1 SECTION 1. IC 12-11-2.1-3, AS AMENDED BY P.L.99-2007,
2 SECTION 78, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2026]: Sec. 3. (a) All services provided to an individual must
4 be provided under the individual service plan of the individual with a
5 disability. To the extent that services described in IC 12-11-1.1-1(e) are
6 available and meet the individual's needs, services provided to an
7 individual shall be provided in the least restrictive environment
8 possible.

9 (b) Pursuant to the applicable home and community based
10 services waiver, a request to increase service units on an
11 individual's approved service plan must be submitted to the bureau
12 for review and approval or denial not later than forty-five (45)
13 calendar days from the first day of the qualifying event, as
14 prescribed by the bureau.

15 SECTION 2. ~~IC 12-15-2-3.5,~~ [IC 12-15-11-11 IS ADDED TO
16 THE INDIANA CODE] AS ~~AMENDED BY P.L.210-2015,~~ [A

SB 275—LS 7045/DI 129



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1 ~~NEW~~ SECTION ~~<45, IS AMENDED>~~ TO READ AS FOLLOWS
 2 [EFFECTIVE JULY 1, 202~~<7>~~ [6]]: ~~[~~Sec. ~~<3.5. An individual:~~

3 ~~— (1) who is:~~

4 ~~— (A) at least sixty-five (65) years of age; or~~

5 ~~— (B) disabled, as determined by the Supplemental
 6 Security Income program; and~~

7 ~~— (2) whose income and resources do not exceed those levels
 8 established by the Supplemental Security Income program;
 9 is eligible to receive Medicaid assistance, if the individual's family
 10 income does not exceed one hundred percent (100%) of the federal
 11 income poverty level for the same size family, using income
 12 counting standards and criteria established by the federal Social
 13 Security Administration.~~

14 ~~— SECTION 3. IC 12-15-2-26, AS ADDED BY P.L.278-2013,
 15 SECTION 8, IS AMENDED TO READ AS FOLLOWS
 16 [EFFECTIVE JULY 1, 2027]: Sec. 26. (a) This section applies
 17 beginning the later of [11. A provider of services under a home
 18 and community based services waiver (as defined in IC 12-8-1.6-2)
 19 shall do] the following:~~

20 ~~(1) <The date that the office is informed that the United
 21 States Department of Health and Human Services has
 22 approved Indiana's conversion to 1634 status within the
 23 Medicaid program.~~

24 ~~— (2) January 1, 2014.~~

25 ~~— (b) As used in this section, "qualified Medicare beneficiary"
 26 means an individual defined in 42 U.S.C. 1396d(p)(1).~~

27 ~~— (c) As used in this section, "qualifying individual"
 28 refers [Upon request by an individual receiving services under the
 29 waiver or the individual's legal guardian, but not more than once
 30 per calendar quarter, provide to the individual or the individual's
 31 legal guardian the provider's accounting records of service
 32 delivery for the recipient.~~

33 ~~(2) Upon request, but not more than twice per calendar year,
 34 provide] to an individual ~~<described in 42 U.S.C.
 35 1396a(a)(10)(E)(iv):~~~~

36 ~~— (d) As used in this section, "specified low-income Medicare
 37 beneficiary" refers to an individual described in 42 U.S.C.
 38 1396a(a)(10)(E)(iii).~~

39 ~~— (e) The following individuals are eligible for the specified
 40 coverage under this section:~~

41 ~~— (1) A qualified Medicare beneficiary whose:~~

42 ~~— (A) income does not exceed one hundred fifty percent~~

SB 275—LS 7045/DI 129



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1 ~~(150%)(100%) of the federal income poverty level; and~~
2 ~~(B) resources do not exceed the resource limits~~
3 ~~established by the office;~~
4 ~~is eligible for Medicare Part A and Medicare Part B~~
5 ~~premiums, coinsurance, and deductibles;~~
6 ~~(2) A specified low-income Medicare beneficiary whose:~~
7 ~~(A) income does not exceed one hundred seventy twenty~~
8 ~~percent (170%) (120%) of the federal income poverty~~
9 ~~level; and~~
10 ~~(B) resources do not exceed the resource limits set by the~~
11 ~~office;~~
12 ~~is eligible for coverage of Medicare Part B premiums;~~
13 ~~(3) A qualifying individual whose:~~
14 ~~(A) income does not exceed one hundred eighty-five~~
15 ~~thirty-five percent (185%) (135%) of the federal income~~
16 ~~poverty level; and~~
17 ~~(B) resources do not exceed the resource limits set by the~~
18 ~~office;~~
19 ~~is eligible for coverage of Medicare Part B premiums;~~
20 ~~(f) The office may adopt rules under IC 4-22-2 to implement~~
21 ~~this section.~~
22 SECTION 4 [receiving services under the waiver an itemized
23 statement of the services billed by the provider for the recipient.
24 The statement must be in plain language.
25 SECTION 3]. IC 12-15-14-8, AS AMENDED BY P.L.241-2023,
26 SECTION 15, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
27 UPON PASSAGE]: Sec. 8. (a) The office may implement an end of
28 therapy reclassification methodology in the RUG-IV, 48-Group model
29 or its successor for payment of nursing facility services.
30 (b) Before the office changes a health facility service
31 reimbursement that results in a reduction in reimbursement, the office
32 shall provide public notice of at least one (1) year: **six (6) months.** The
33 public notice under this subsection:
34 (1) is not a rulemaking action or part of the administrative
35 rulemaking process under IC 4-22; and
36 (2) must include the fiscal impact of the proposed
37 reimbursement change.
38 [SECTION 4. IC 12-15-34-14.5, AS ADDED BY P.L.217-2017,
39 SECTION 79, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
40 JULY 1, 2026]: Sec. 14.5. (a) This section is effective beginning July
41 1, 2017.
42 (b) The office of the secretary may not reduce reimbursement for

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1 home health services.

2 (c) 405 IAC 1-4.2-4(l) and any successor rule concerning reducing
 3 home health services reimbursement are void and may not be renewed
 4 or otherwise implemented.

5 (d) This section expires June 30, 2027.

6] SECTION 5. IC 12-15-34-14. <5> [6] IS <REPEALED> [ADDED
 7 TO THE INDIANA CODE AS A NEW SECTION TO READ AS
 8 FOLLOWS] [EFFECTIVE UPON PASSAGE] <—> [:] Sec.

9 <14.> <5> [6]. <(a) This section is effective beginning July 1, 2017.

10 — (b) The office of the secretary may not reduce reimbursement
 11 for home health services:

12 — (c) 405 IAC 1-4.2-4(l) and any successor rule concerning
 13 reducing home health services reimbursement are void and may
 14 not be renewed or otherwise implemented.> [(a) The office of the

15 secretary shall, in partnership and collaboration with a home
 16 health services association and providers of home health services,
 17 develop a new reimbursement methodology for home health
 18 services and, not later than November 30, 2026, submit the new
 19 reimbursement methodology for home health services to the
 20 legislative council in an electronic format under IC 5-14-6.

21 (b) This section expires December 31, 2027.]

22 SECTION 6. IC 29-1-14-1, AS AMENDED BY P.L.99-2024,
 23 SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 24 JULY 1, 2026]: Sec. 1. (a) Except as provided in IC 29-1-7-7, all
 25 claims against a decedent's estate, other than expenses of
 26 administration and claims of the United States, the state, or a
 27 subdivision of the state, whether due or to become due, absolute or
 28 contingent, liquidated or unliquidated, founded on contract or
 29 otherwise, shall be forever barred against the estate, the personal
 30 representative, the heirs, devisees, and legatees of the decedent, unless
 31 filed with the court in which such estate is being administered within:

32 (1) three (3) months after the date of the first published notice to
 33 creditors; or

34 (2) three (3) months after the court has revoked probate of a will,
 35 in accordance with IC 29-1-7-21, if the claimant was named as
 36 a beneficiary in that revoked will;

37 whichever is later.

38 (b) No claim shall be allowed which was barred by any statute of
 39 limitations at the time of decedent's death.

40 (c) No claim shall be barred by the statute of limitations which was
 41 not barred at the time of the decedent's death, if the claim shall be filed
 42 within:

SB 275—LS 7045/DI 129



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1 (1) three (3) months after the date of the first published notice to
 2 creditors; or
 3 (2) three (3) months after the court has revoked probate of a will,
 4 in accordance with IC 29-1-7-21, if the claimant was named as
 5 a beneficiary in that revoked will;
 6 whichever is later.
 7 (d) All claims barrable under subsection (a) shall be barred if not
 8 filed within nine (9) months after the death of the decedent.
 9 (e) Nothing in this section shall affect or prevent any action or
 10 proceeding to enforce any mortgage, pledge, or other lien upon
 11 property of the estate.
 12 (f) Nothing in this section shall affect or prevent the enforcement
 13 of a claim for injury to person or damage to property arising out of
 14 negligence against the estate of a deceased tortfeasor within the period
 15 of the statute of limitations provided for the tort action. A tort claim
 16 against the estate of the tortfeasor may be opened or reopened and suit
 17 filed against the special representative of the estate within the period
 18 of the statute of limitations of the tort. Any recovery against the tort
 19 feisor's estate shall not affect any interest in the assets of the estate
 20 unless the suit was filed within the time allowed for filing claims
 21 against the estate. The rules of pleading and procedure in such cases
 22 shall be the same as apply in ordinary civil actions.
 23 (g) A claim by the unit against a decedent's estate is forever barred
 24 unless:
 25 (1) the unit files a claim in the court in which the decedent's
 26 estate is being administered; or
 27 (2) the unit opens an estate for the decedent and files a claim
 28 against the decedent in the estate;
 29 not later than ~~one hundred twenty~~ **three hundred sixty-five**
 30 **(365)** days after the date of death of the decedent.
 31 **SECTION 7. An emergency is declared for this act.**

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SB 275—LS 7045/DI 129



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