LC01565/SUB A

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2006

AN ACT

RELATING TO CRIMINAL OFFENSES

Introduced By: Representatives Handy, Gallison, and Ehrhardt

Date Introduced: February 28, 2006

Referred To: House Health, Education & Welfare

It is enacted by the General Assembly as follows:

SECTION 1. Section 11-34-10 of the General Laws in Chapter 11-34 entitled
"Prostitution and Lewdness" is hereby amended to read as follows:

<u>11-34-10. Human Immunodeficiency Virus (HIV). --</u> (a) Any person convicted of a violation of any provisions of this chapter shall be required to be tested for Human Immunodeficiency Virus (HIV). No consent for the testing shall be required.

(b) The department of health shall be responsible for reasonable costs associated with performing and reporting the results of the HIV tests, including the costs of pretest and post test counseling. The department of health shall maintain sites for providing both anonymous and confidential HIV testing, and HIV counseling and referral. Each site, funded by the department of health, shall offer free testing, counseling and referral for indigent parties and other individuals without health insurance, offer a sliding scale for payment for all other individuals and, in the case of confidential testing, screen for ability to pay through a third-party insurer.

(c) All persons tested under this section shall be provided pretest pre-test and post-test counseling by individuals trained by the department of health, as an HIV testing counselor, in accordance with regulations adopted promulgated by the department of health; provided, that the counseling shall be in accordance with acceptable medical standards.

(d) All persons who are tested under this section, who are determined to be intravenous drug abusers, injecting drug users, shall be referred to appropriate sources of drug substance abuse treatment by the department of health HIV testing counselor and/or the attending

practitioner as follows:

1

3

2 (1) Those persons who test positive for HIV infection shall be given priority for those

outpatient substance abuse treatment programs which that are sponsored or supported by the

- 4 department of health. appropriate state agency responsible for these services.
- 5 (2) Those persons who <u>are injecting drug users and</u> test negative for HIV infection shall
- 6 be referred, by the HIV testing counselor and/or attending practitioner, to the appropriate division
- 7 <u>state agency responsible for these services</u> in the department of health for earliest possible
- 8 evaluation and treatment.
- 9 SECTION 2. Section 21-28-4.20 of the General Laws in Chapter 21-28 entitled "Uniform
- 10 Controlled Substances Act" is hereby amended to read as follows:
- 21-28-4.20. Human Immunodeficiency Virus (HIV) -- Testing. -- (a) Any person
- 12 convicted of possession of any controlled substance that has been administered with a
- 13 hypodermic instrument associated with intravenous drug use, retractable hypodermic syringe,
- 14 <u>needle, or any similar instrument adapted for the administration of drugs</u> shall be required to be
- 15 tested for human immunodeficiency virus (HIV). No consent for the testing shall be required.
- 16 (b) The department of health shall be responsible for reasonable costs associated with
- 17 performing and reporting the results of the HIV tests, including the costs of pre-test and post-test
- 18 counseling. The department of health shall maintain sites for providing both anonymous and
- 19 <u>confidential HIV testing, and HIV counseling and referral. Each site, funded by the department of</u>
- 20 health, shall offer free testing, counseling and referral for indigent parties and other individuals
- 21 without health insurance, offer a sliding scale for payment for all other individuals and, in the
- 22 case of confidential testing, screen for ability to pay through a third-party insurer.
- 23 (c) All persons tested under this section shall be provided pre-test and post-test
- 24 counseling by individuals trained by the department of health in accordance with regulations
- 25 adopted promulgated by the department of health; provided, that this counseling shall be in
- 26 accordance with acceptable medical standards.
- 27 (d) All persons who are tested under this section, who are determined to be intravenous
- 28 drug abusers, convicted of possession of any controlled substance that has been administered with
- 29 <u>a hypodermic instrument, retractable hypodermic syringe, needle, or any instrument adopted for</u>
- 30 <u>the administration of drugs</u> shall be referred by the HIV testing counselor and/or attending
- 31 <u>practitioner</u> to appropriate sources of drug treatment by the department of health as follows:
- 32 (1) Those persons who test positive for HIV infection shall be given priority for those
- outpatient treatment programs which are sponsored or supported by the department of health a
- 34 <u>state agency</u>;

1	(2) Those persons who test negative for HIV infection shall be referred to the appropriate
2	division in the department of health for earliest possible evaluation and treatment.
3	SECTION 3. Sections 23-6-11, 23-6-12, 23-6-14, 23-6-17, 23-6-18, 23-6-20, 23-6-25 and
4	23-6-26 of the General Laws in Chapter 23-6 entitled "Prevention and Suppression of Contagious
5	Diseases" are hereby amended to read as follows:
6	23-6-11. Definitions As used in sections 23-6-10 23-6-24:
7	(1) "AIDS" means the medical condition known as acquired immune deficiency
8	syndrome, caused by infection of an individual by the human immunodeficiency virus (HIV).
9	(2) (i) "Exposure evaluation group" means three (3) impartial health care providers
10	designated to determine if a health care provider has been involved in a significant exposure. No
11	member of the group shall be directly involved in the exposure.
12	(ii) For inpatient services in a licensed health care facility hospital setting the group shall
13	consist of the patient's attending physician or designee, the chief of service or designee and a staff
14	nurse. For other non-inpatient exposures in a licensed health care facility, the third member of the
15	exposure evaluation group shall be a representative from the employee health office. If the
16	exposure involves the attending physician, another physician shall be designated by the chief of
17	service.
18	-(iii) In any other licensed health care facility or in a private office of a physician the
19	group shall consist of three (3) physicians.
20	(3) (2) "HIV" means the human immunodeficiency virus, the pathogenic organism
21	responsible for the acquired immunodeficiency syndrome (AIDS).
22	(4) (3) "HIV informed "Informed consent form" means a standardized form provided by
23	the Rhode Island department of health to those individuals offered HIV testing. The form shall be
24	developed by the department and shall contain the following information:
25	(i) The public health rationale for HIV testing and information describing the nature of
26	the HIV disease;
27	(ii) The availability and cost of HIV testing and counseling;
28	(iii) That test results are confidential with certain exceptions;
29	(iv) A list of exceptions to confidentiality of test results;
30	(v) That the test is voluntary and that an informed consent form must be signed before
31	testing;
32	(vi) That by signing this form the person is only acknowledging that the AIDS HIV test
33	and counseling have been offered and/or that he or she has declined (opt-out) the offer to be
34	tested-; and

1	(vii) Notwithstanding the provisions of subsections (v) and (vi) above, in the event an
2	individual consents to anonymous testing, the HIV testing counselor and/or attending practitioner
3	ordering the test shall receive only verbal confirmation from the client that the client understands
4	all applicable information contained within the informed consent form.
5	(5) (4) "HIV test" means any currently medically accepted diagnostic test for
6	determining infection of an individual by HIV.
7	(6) (5) "Person" means any individual, firm, partnership, corporation, company,
8	association, or joint stock association, state or political subdivision or instrumentality of a state.
9	(7) (6) "Physician" means a person licensed to practice allopathic or osteopathic
10	medicine pursuant to the provisions of chapter 37 of title 5.
11	(8) (7) "Services" means health care and social support services.
12	(8) "Occupational health representative" is an individual, within a health care facility,
13	trained to respond to occupational, particularly blood borne, exposures.
14	23-6-12. Testing. – (a) Recommendations regarding HIV testing shall reference the most
15	current guidelines issued by the Centers for Disease Control and Prevention (CDC) pertaining to
16	HIV Counseling, Testing and Referral of Adults, Adolescents and Pregnant Women; provided,
17	however, those guidelines shall be interpreted by the department of health so as to best serve the
18	clients and patients seeking HIV testing, and shall in no event be interpreted in a manner
19	inconsistent with the minimum informed consent standards of this Title or other protections of
20	state law. The recommendations shall emphasize that: (1) HIV screening is recommended in all
21	health care settings, after the patient is informed, in accordance with this chapter's informed
22	consent standards, that HIV testing will be done unless the patient declines; (2) persons at high-
23	risk for HIV infection should be screened for HIV at least annually, in accordance with this
24	chapter's informed consent standards; and (3) only verbal informed consent is required for
25	anonymous testing.
26	(b) Unless otherwise excepted by the provisions of this chapter, no person may be tested
27	for the presence of HIV where the test result can be identified with a specific individual, unless he
28	or she has given his or her informed consent by his or her signature or that of a parent, guardian,
29	or agent on a written informed consent form specifically relating to the test after discussion of
30	implications of the test with a qualified professional. A physician or health care provider
31	attending to any person who may be at risk for HIV infection shall routinely offer the HIV test to
32	patients. All testing pursuant to this section shall be performed in accordance with sections 23-6-
33	17 (confidentiality) and 23-6-18 (protection of the medical record) and this chapter's informed
34	consent standards.

1	(c) In the event an individual consents to anonymous testing and tests positive for HIV,
2	the HIV testing counselor shall discuss with the client options regarding referrals and reporting of
3	this positive screening, including the necessity of accessing a physician.
4	23-6-14. Exceptions Notwithstanding the provisions of sections 23 6 12 and 23 6 13
5	a A physician or other health care provider acting within the scope of his/her practice may draw
6	blood and secure a test sample for the presence of HIV without informed consent under the
7	following conditions:
8	(1) When the person to be tested is under one year of age;
9	(2) When the person to be tested is between one and thirteen (13) years of age and
10	appears to be symptomatic for HIV;
11	(3) When the person to be tested is a minor under the care and authority of the
12	department of children, youth, and families, and the director of that department certifies that an
13	HIV test is necessary to secure health or human services for that person;
14	(4) When a person (the complainant) can document significant exposure to blood or
15	other bodily fluids of another person (the individual to be tested), during the performance of the
16	complainant's occupation, providing:
17	(i) The complainant completes an incident report within forty-eight (48) hours of the
18	exposure, identifying the parties to the exposure, witnesses, time, place, and nature of the event;
19	(ii) The complainant submits to a baseline HIV test and is negative on that test for the
20	presence of HIV, within seventy-two (72) hours of the exposure; and
21	(iii) There has been a significant percutaneous or mucus membrane exposure, i.e.,
22	needlestick, bite, splash over open wound, broken skin, or mucus membrane, by blood or bodily
23	fluids of the person to be tested of a type and in sufficient concentration to permit transmission of
24	HIV if present in those fluids-; and
25	(iv) If a sample of the patient's blood is not otherwise available and the patient refuses to
26	grant informed consent, then the health care provider may petition the superior court for a court
27	order mandating that the test be performed.
28	(5) (i) In a licensed health care facility or in the private office of a physician in the event
29	that an occupational health representative or physician, registered nurse practitioner, physician
30	assistant, or nurse-midwife not directly involved in the exposure evaluation group, as defined in
31	section 23-6-11(2), determines that a health care provider, other than one in a supervisory
32	position to the person making the determination had has a significant exposure to the blood
33	and/or body fluids of a patient and the patient or the patient's guardian refuses to grant informed
34	consent for an HIV test to determine whether the patient has HIV, then, if a sample of the

patient's blood is available, that blood shall be tested for HIV.

- (ii) If a sample of the patient's blood is not otherwise available and the patient refuses to grant informed consent, then the health care worker may petition the superior court for a court order mandating that the test be performed.
- (iii) Before a patient or a sample of the patient's blood is required to undergo an HIV test, the health care provider must submit to a baseline HIV test within seventy-two (72) hours of the exposure.
- (iv) No member of the exposure evaluation group person who determines that a health care worker has sustained a significant exposure and authorizes the HIV testing of a patient, nor any person or health care facility who relies acts in good faith on the group's determination and recommends performs the test be performed, shall have any liability as a result of their actions carried out under this chapter, unless those persons are proven to have act acted in bad faith.
- (6) In an emergency, where due to a grave medical or psychiatric condition, it is impossible to obtain consent from the patient or the patient's parent, guardian, or agent.
- 15 (7) As permitted under sections 23-18.6-12 (organ transplant), 23-1-38 (sperm donation)
 16 and 23-8-1.1 (person under eighteen (18) years may give consent for testing for communicable
 17 diseases).
 - (8) Mandatory testing for human immunodeficiency virus (HIV) conducted pursuant to sections 42-56-37 (testing at ACI), 11-34-10 (prostitution), and 21-28-4.20 (IDU and needles).
 - 23-6-17. Confidentiality. -- It is unlawful for any person to disclose to a third party the results of an individual's HIV test without the prior written consent of that individual, or in the case of a minor, the minor's parent, guardian, or agent, on a form that specifically states that HIV test results may be released, except:
 - (1) A licensed laboratory or other health care facility which performs HIV tests shall report test results to a patient's licensed physician or other medical personnel who requested the test, and to the director of the department of health, pursuant to rules and regulations adopted for that purpose.
 - (2) A physician:
 - (i) May enter HIV test results in the medical record, as would be the case with any other diagnostic test;
- 31 (ii) May notify other health professionals directly involved in the care of the individual 32 testing positive on the HIV test, or to whom that individual is referred for treatment;
- 33 (iii) May notify persons exposed to blood or other body fluids of an individual who tests 34 positive for HIV, pursuant to section 23-6-14(4) through (8) (exceptions) and section 23-17-31

(testing of hospitalized patients)
(iv) May notify the dir

1

- (iv) May notify the director of the department of children, youth, and families, pursuant
- 3 to section 23-6-14(3) (testing of a minor to secure services); and
- 4 (v) May inform third parties with whom an HIV-infected patient is in close and
- 5 continuous exposure related contact, including but not limited to a spouse and/or partner, if the
- 6 nature of the contact, in the physician's opinion, poses a clear and present danger of HIV
- 7 transmission to the third party, and if the physician has reason to believe that the patient, despite
- 8 the physician's strong encouragement, has not and will not warn inform the third party that they
- 9 may have been exposed to HIV; the procedure to be followed by the physician shall be
- 10 established by the director of the department of health;
- 11 (3) As permitted in subsections (b)(1), (2), (5), (6), (8), (9), (10), (11), (12), (13), (14),
- and (15) of section 5-37.3-4 (confidentiality of health care information) and section 40.1-5-26
- 13 (disclosure of confidential information under mental health law), or as otherwise required by law.
- 14 (4) By a health care provider <u>acting within the scope of his/her practice</u> to appropriate
- 15 persons entitled to receive notification of persons with infectious or communicable diseases
- pursuant to sections 23-5-9 (report of infectious disease upon death) and 23-28.36-3 (notification
- to EMT, firefighter, police officer of infectious disease).
- 18 <u>23-6-18. Protection of records. (a)</u> Providers of health care, public health officials, and
- 19 any other person who maintains records containing information on HIV test results of individuals
- are responsible for maintaining full confidentiality of these data, as provided in section 23-6-17,
- 21 and shall take appropriate steps for their protection, including:
- 22 (1) Keeping records secure at all times and establishing adequate confidentiality
- 23 safeguards for any records electronically stored;
- 24 (2) Establishing and enforcing reasonable rules limiting access to these records; and
- 25 (3) Training persons who handle records in security objectives and technique.
- 26 (b) The department shall evaluate reports of HIV/AIDS for completeness and potential
- 27 referrals for service. All case reports shall be kept in a confidential and secure setting. An
- 28 HIV/AIDS policy and protocol for security shall be developed and implemented by the
- department for this purpose.
- 30 (1) The department shall evaluate its procedures for HIV/AIDS reporting on a
- 31 continuous basis for timeliness, completeness of reporting, and security of confidential
- 32 <u>information.</u>
- 33 (2) The department's protocol shall be in accordance with the recommendations of the
- 34 December 10, 1999 Morbidity and Mortality Weekly Report Recommendations and Reports,

1	"CDC Guidelines for National Human Immunodeficiency Virus Case Surveillance, including
2	monitoring for Human Immunodeficiency Virus infection and Acquired Immunodeficiency
3	Syndrome" document, or its successor document, that pertains to patient records and
4	confidentiality; provided, however, that in no event shall the protocol be less protective than that
5	required by state law.
6	(3) All reports and notifications made pursuant to this section shall be confidential and
7	protected from release except under the provisions of this law. Any person aggrieved by a
8	violation of this section shall have a right of action in the superior court and may recover for each
9	violation:
10	(i) Against any person who negligently violates a provision of this section, damages of
11	one thousand dollars (\$1,000) or actual damages, whichever is greater.
12	(ii) Against any person who intentionally or recklessly violates a provision of this section,
13	damages of five thousand dollars (\$5,000) or actual damages, whichever is greater.
14	(iii) Reasonable attorneys' fees;
15	(iv) Such other relief, including an injunction, as the court may deem appropriate; and
16	(v) Any action under this section is barred unless the action is commenced within three
17	(3) years after the cause of action accrues. A cause of action shall accrue when the injured party
18	becomes aware of an unauthorized disclosure.
19	23-6-20. Notification of disclosure In all cases when an individual's HIV test results
20	are disclosed to a third party, other than a person involved in the care and treatment of the
21	individual, and except as permitted $\frac{1}{100}$ subsections (1), (2)(i), (2)(ii), (2)(iv), $\frac{1}{100}$ or (4) of
22	section 23-6-17 (permitted disclosures re: confidentiality), and in accordance with the federal
23	health insurance portability and accountability act of 1996 (Public law 104-191) enacted on
24	August 21, 1996, the person so disclosing shall make reasonable efforts to inform that individual
25	in advance of:
26	(1) The nature and purpose of the disclosure;
27	(2) The date of disclosure;
28	(3) The recipient of the disclosed information.
29	23-6-25. Alternative test sites The department of health shall maintain alternative
30	sites for providing free, voluntary, anonymous HIV testing, counseling, and referral on a
31	continuing basis and at sites that, may be designated by the director of the department of health.
32	The department of health shall maintain sites for providing both anonymous and confidential HIV
33	testing, and HIV counseling and referral. Each site, funded by the department of health, shall
34	offer free testing counseling and referral for indigent parties and other individuals without health

<u></u>	nfidential testing, screen for ability to pay through a third-party insurer.
	23-6-26. Laboratory analysis for HIV (a) HIV/AIDS is regarded to cause significant
	orbidity and mortality, can be screened, diagnosed and treated, and is of major public health
	ncern, such that surveillance of the disease occurrence is in the public interest, and therefore
<u>sh</u>	all be designated as notifiable and reportable by name.
	(b) Under this provision the following shall be reported:
	(1) A diagnosis of HIV, according to the U.S. Centers for Disease Control and Prevention
<u>ca</u>	se definition of HIV.
	(2) A diagnosis of AIDS, according to the U.S. Centers for Disease Control and
<u>Pr</u>	evention case definition of AIDS.
	(3) A positive ELIZA result of any HIV test and/or other FDA approved test indicative of
the	e presence of HIV.
	(4) All CD4 T-lymphocyte (percent) test results and all viral load detection test results</td
<u>(d</u>	etectable and undetectable).
	(5) A perinatal exposure of a newborn to HIV indicated by two positive PCR tests; <18
m	onths; and/or other U.S. Food and Drug Administration approved tests that indicate the
pr	esence of HIV in pediatric cases.
	(6) Other U.S. Food and Drug Administration approved tests indicative of the presence of
H	V/AIDS, as approved by the department.
	(a) (c) All biological samples or specimens taken from Rhode Island residents for the
pu	rpose of performing laboratory analysis for the detection of antibody to human
im	munodeficiency virus (HIV), by or under the direction or order of any physician licensed to
pr	actice medicine in this state, or on order of any duly licensed health care provider acting within
the	e scope of his/her practice shall be sent to the Rhode Island department of health laboratory for
an	alysis. Specimens analyzed for the sole purpose of assuring the safety of the blood supply or
fo	r strictly research purposes may be tested for HIV antibody in other licensed laboratories. This
pr	ovision shall not apply to those HIV tests performed in a hospital laboratory. Hospitals shall
fo	rward all positive HIV test results to the department of health. The department of health
	poratory shall conduct all confirmatory testing for HIV/AIDS; exceptions, for alternative testing
	ethods, may be granted through written approval by the department of health.
	(b) (d) No Except in the case of anonymous testing, a physician or laboratory or duly
lic	ensed health care provider acting within the scope of his/her practice providing samples or
	ecimens for HIV-testing, or results of HIV tests to the department, shall include the name of the

insurance, offer a sliding scale for payment for all other individuals and, in the case of

1	patientor any other information which would identify the person tested.
2	(e) In the event the federal government requests retrospective analysis of HIV cases that
3	were previously reported by code, the department shall promulgate policies and procedures to
4	insure that any participation by patients or clients in such an analysis is voluntary and that explicit
5	informed patient consent after such a request has been made has been obtained by the department.
6	SECTION 4. Chapter 23-6 of the General Laws entitled "Prevention and Suppression of
7	Contagious Diseases" is hereby amended by adding thereto the following section:
8	23-6-27. Reporting of HIV/AIDS and perinatal exposure of newborns (a) The
9	following persons shall report information required by this section to the department's HIV/AIDS
10	surveillance team:
11	(1) a physician/health care provider who diagnoses or treats HIV/AIDS;
12	(2) The administrator of a health care facility as defined in Rhode Island general laws
13	chapter 23-17 who diagnoses or treats HIV/AIDS; or
14	(3) the administrator of a prison in which there is an HIV/AIDS infected person or
15	perinatal exposure to HIV/AIDS.
16	Reports provided under this section shall specify the infected person's name, as well as all
17	information required on the official department HIV Case Report Form.
18	(b) Any high managerial agent who is responsible for the administration of a clinical or
19	hospital laboratory, blood bank, mobile unit, or other facility in which a laboratory examination
20	of any specimen derived from a human body yields serological, or other evidence of HIV/AIDS,
21	including perinatal exposure to HIV/AIDS shall notify the department in a timely manner as
22	stipulated in the rules promulgated by the department. Reports provided under this section shall
23	specify the name as well as all information indicated on the official department HIV Case Report
24	Form.
25	(c) Reports as required by this section shall only be made if confirmed with a Western
26	Blot or other FDA approved confirmatory test.
27	(1) All facilities obtaining blood from human donors for the purpose of transfusion or
28	manufacture of blood products shall report HIV/AIDS consistent with this section.
29	(2) Any laboratory that processes specimens shall permit the department to examine the
30	records of said laboratory, facility, or office in order to evaluate compliance with this section.
31	(d) Perinatal HIV/AIDS exposure reporting shall be made to the department regardless of
32	confirmatory testing.
33	(e) Reports required by this section shall be mailed within forty-eight (48)_ hours of
34	diagnosis or treatment, to the department using a designated envelope that shall be provided by

the department's HIV/AIDS Surveillance Team within forty-eight (48) hours of diagnosis or 1 2 treatment. Any other reporting method shall be approved in advance by the department. 3 (f) Nothing in this section shall preclude the performance of anonymous HIV/AIDS 4 testing. 5 SECTION 5. Sections 23-11-17 and 23-11-19 of the General Laws in Chapter 23-11 6 entitled "Sexually Transmitted Diseases" are hereby amended to read as follows: 7 23-11-17. Human immunodeficiency virus (HIV) testing. -- (a) The physician or health 8 care provider attending any person for a suspected sexually transmitted disease shall offer testing 9 for human immunodeficiency virus (HIV). All testing pursuant to this section shall be performed 10 in accordance with sections 23-6-17 (confidentiality) and 23-6-18 (protection of the medical 11 record) and the informed consent standards contained in chapter 6 of title 23. The identity of the 12 individuals tested under this section shall be maintained only at the site where the sample is 13 drawn, and shall not be released except as otherwise provided by statute. 14 (b) Each person who is offered elects to be a test tested and counseling counseled shall 15 first be provided with an "informed consent form" as provided by subsection 23-6-11(3), and 16 shall specifically be given the opportunity to decline or opt-out of testing, which he or she shall 17 sign and date in acknowledgment of his/her election to be tested. the offer. The department of 18 health is responsible for costs associated with performing and reporting the results of the HIV 19 tests, including the reasonable costs of pretest and post test counseling. Those reasonable costs 20 shall be negotiated and specified by contract. 21 (b) In the event an individual consents to anonymous testing and tests positive for HIV, 22 the HIV testing counselor shall provide the client an informed consent form as provided by subsection 23-6-11(3). If an individual is tested anonymously and is found positive on the initial 23 24 screening test or during a post-test consultation, the counselor shall discuss, with the client, 25 options regarding referrals and reporting of this positive screening including the necessity of 26 accessing a physician. The department of health shall be responsible for reasonable costs 27 associated with performing and reporting the results of the HIV tests, including the cost of pre-28 test and post-test counseling, for indigent parties and other individuals without health insurance 29 coverage. 30 (c) All persons tested under this section shall be provided pretest and post test 31 counseling counseled and tested in accordance with regulations adopted promulgated by the 32 department of health; provided, however, that the counseling shall be in accordance with

acceptable medical standards., and no test results shall be given by any means (e.g. phone, mail,

33

34

e-mail, fax, etc.) other than in person.

23-11-19. Exchange of hypodermic needles and syringes. -- (a) The director of the department of health shall maintain a program offering the free exchange of new hypodermic needles and syringes for used hypodermic needles and syringes as a means to prevent the transmission of human immunodeficiency virus (HIV) or viral hepatitis among intravenous injecting drug users eighteen (18) years of age or older. Any site used in the program shall be approved by the director of health and shall make available educational materials, HIV counseling and testing, and referral services targeted to the education of HIV/AIDS and viral hepatitis transmission as well as information and referrals pertaining to and drug substance abuse prevention and treatment. Any individual(s) who either administers or participates in the program shall be immune from criminal prosecution for violating the provisions of section 21-28.5-1(a)(11) [deleted] unless the individual(s) is found to have in his or her possession hypodermic needles and syringes that are not a part of the exchange program.

(b) Any program of needle and syringe exchange must be implemented pursuant to the provisions of this section and shall incorporate an on-going evaluation plan to determine the impact of the needle exchange program on the participants and the community in the efforts to lower the HIV rate among injecting users including successful referrals to substance abuse treatment.

SECTION 6. Section 23-13-19 of the General Laws in Chapter 23-13 entitled "Maternal and Child Health Services for Children with Special Health Care Needs" is hereby amended to read as follows:

23-13-19. Human immunodeficiency virus (HIV) testing. -- (a) Every physician or health care provider attending any person for prenatal care or family planning services shall offer testing for human immunodeficiency virus (HIV) unless deemed inappropriate by the physician. All testing pursuant to this section shall be performed in accordance with sections 23-6-12 and 23-6-13. The identity of the individuals tested under this section shall be maintained only at the site where the sample is drawn and shall not be released except as otherwise provided by statute. Each person who is offered a human immunodeficiency virus (HIV) test and counseling shall be provided with an "informed consent form" which he or she shall sign and date in acknowledgment of that offer. The department of health is responsible for reasonable costs associated with performing and reporting the results of the HIV tests including the reasonable costs of pretest and post test counseling. Those reasonable costs shall be negotiated and specified by contract.

2 routine panel of prenatal tests for all pregnant women. Repeat testing in the third trimester is 3 recommended if determined by the physician. Each person who is offered testing and counseling 4 shall first be provided with an "informed consent form" as provided by subsection 23-6-11(3), 5 which he/she shall sign and date, and shall specifically be given the opportunity to decline or opt-6 out of the testing. All testing pursuant to this section shall be performed in accordance with 7 sections 23-6-12 and 23-6-13. 8 (b) In the event an individual consents to anonymous testing and tests positive for HIV, 9 the HIV testing counselor shall discuss with the client options regarding referrals and reporting of 10 this positive screening, including the necessity of accessing a physician. The department of health 11 shall maintain sites for providing both anonymous and confidential HIV testing, and HIV 12 counseling and referral. Each site, funded by the department of health, shall offer free testing, 13 counseling and referral for indigent parties and other individuals without health insurance, offer a 14 sliding scale for payment for all other individuals and, in the case of confidential testing, screen 15 for ability to pay through a third-party insurer. 16 (b) (c) All persons tested under this section shall be counseled and tested provided 17 pretest and post test counseling in accordance with regulations adopted promulgated by the 18 department of health.; provided, however, that the counseling shall be in accordance with 19 acceptable medical standards. 20 SECTION 7. Section 23-17-31.1 of the General Laws in Chapter 23-17 entitled 21 "Licensing of Health Care Facilities" is hereby amended to read as follows: 22 23-17-31.1. Human immunodeficiency virus (HIV) testing -- Facilities for drug 23 abusers. -- (a) Every physician or health care provider attending any person for any service 24 offered at a facility for intravenous injecting drug users, shall offer testing for human 25 immunodeficiency virus (HIV) unless deemed inappropriate by the physician. All testing 26 pursuant to this section shall be performed in accordance with sections 23-6-17 (confidentiality) 27 and 23-6-18 (protection of records), except where federal confidentiality laws may supersede. 28 The identity of the individuals tested under this section shall be maintained only at the site where 29 the sample is drawn, and shall not be released except as otherwise provided by the statute. 30 (b) Each person who is offered a test and counseling shall be provided with an "AIDS 31 testing and notification form" which he or she shall sign and date in acknowledgement of the 32 offer. 33 Each person tested and counseled shall first be provided an "informed consent form" as provided by subsection 23-6-11(3), which he/she shall sign and date, and shall specifically be 34

detection of HIV with unrecognized or no identified risk factors. HIV should be included in the

- given the opportunity to decline or opt-out of the testing.
 (c) In the event an individual consents to anonymous testing and tests positive for HIV,
 the HIV testing counselor shall discuss, with the client, options regarding referrals and reporting
 of this positive screening, including the necessity of accessing a physician.
 - (e) (d) The department of health shall be responsible for reasonable costs associated with performing and reporting the results of the HIV tests, including the costs of pretest and post test counseling. The reasonable costs shall be negotiated and specified by contract. The department of health shall maintain sites for providing both anonymous and confidential HIV testing, and HIV counseling and referral. Each site, funded by the department of health, shall offer free testing, counseling and referral for indigent parties and other individuals without health insurance, offer a sliding scale for payment for all other individuals and, in the case of confidential testing, screen for ability to pay through a third-party insurer.
 - (d) (e) All persons tested under this section shall be provided pretest and post test counseling counseled and tested in accordance with regulations adopted by the department of health. The counseling shall be in accordance with acceptable medical standards.
- SECTION 8. Sections 23-28.36-2 and 23-28.36-3 of the General Laws in Chapter 23-28.36 entitled "Notification of Fire Fighters, Police Officers and Emergency Medical Technicians After Exposure to infectious diseases" are hereby amended to read as follows:
- 19 <u>23-28.36-2. Definitions. --</u> The following terms when used in this chapter shall have the 20 following meanings herein ascribed:
- 21 (1) "Contagious disease" means an infectious disease.

- (2) "Disability" means a condition of physical incapacity to perform any assigned duty or duties in the fire department or emergency medical service.
- 24 (3) "Emergency medical technician" means a person licensed pursuant to chapter 4.1 of 25 this title to provide emergency medical services.
 - (4) "Fire department" means service groups (paid or volunteer) that are organized and trained for the prevention and control of loss of life and property from fire or other emergency.
 - (5) "Fire fighter" means an individual who is assigned to fire fighting activity and is required to respond to alarms and perform emergency action at the location of a fire, hazardous materials, or other emergency incident.
 - (6) "Infectious disease" means interruption, cessation, or disorder of body functions, systems, or organs transmissible by association with the sick or their secretions or excretions, excluding the common cold. Infectious disease includes, but is not limited to, human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV).

1	(7) "Licensed facility" means a hospital, nursing home, medical clinic, dialysis center,
2	physician's office operatory, or the like, as may be licensed by the province state to provide
3	medical care.

- (8) "Police officer" means any permanently employed city or town police officer, state police officer, committing squad member, or other permanent law enforcement officer as defined in section 12-7-21; provided, however, this shall not include the highest ranking officer of any of the departments.
- 8 (9) "Strike force member" means any member of the statewide strike force of the 9 department of attorney general.
 - 23-28.36-3. Notification of infectious diseases. -- (a) Notwithstanding the provisions of sections 40.1-5-26 (disclosure of confidential information and records under mental health law) and 5-37.3-4 (confidentiality of health care information), if, while treating, investigating, or transporting an ill or injured person to a licensed facility, a fire fighter, police officer, strike force member or emergency medical technician comes into contact with is occupationally exposed (e.g. blood borne exposure) to a person who is subsequently diagnosed as having an infectious disease, and the exposure is sufficient to create the risk of transmission of the disease, the licensed facility receiving that person shall notify the highest ranking officer of the treating, investigating, or transporting individual's department of health of the exposure to that person which officer shall then notify the exposed individual. Further, any city or town police department notified of infectious diseases pursuant to the provisions of this section shall, within forty-eight (48) hours, notify any strike force member who was exposed to the infected person.
 - (b) The notification shall be made within forty-eight (48) hours, or sooner, of confirmation of the patient's diagnosis.
 - (c) The notified employee shall contact the licensed health care facility to determine the infectious disease to which he or she has been exposed, and to receive the appropriate medical direction for dealing with the infectious disease.
 - (d) Notification made pursuant to this section shall be conducted in a manner which will protect the confidentiality of the patient, fire fighter, police officer, or emergency technician.
- SECTION 9. Section 40.1-24-20 of the General Laws in Chapter 40.1-24 entitled
 "Licensing of Facilities and Programs for People who are Mentally Ill and/or Developmentally
 Disabled" is hereby amended to read as follows:
 - <u>40.1-24-20.</u> Human immunodeficiency virus (HIV) testing -- Facilities for drug <u>abusers. --</u> (a) Every physician or health care provider <u>acting within the scope of his/her practice</u> attending any person for any service offered at a facility for intravenous drug users, shall offer

2	or health care provider acting within the scope of his/her practice. All testing pursuant to this
3	section shall be performed in accordance with sections 23-6-17 (confidentiality) and 23-6-18
4	(protection of medical records) and the informed consent standards contained in chapter 6 of title
5	23, except where federal confidentiality laws may supercede. The identity of the individuals
6	tested under this section shall be maintained only at the site where the sample is drawn, and shall
7	not be released except as otherwise provided by statute.
8	(b) Each person who is offered a test and counseling shall be provided with an "informed
9	consent form" which he or she shall sign and date in acknowledgment of the offer.
10	Each person tested and counseled shall first be provided with an "informed consent form"
11	as provided by subsection 23-6-11(3), which he/she shall sign and date, and shall specifically be
12	given the opportunity to decline or opt-out of the testing.
13	(c) In the event an individual consents to anonymous testing and tests positive for HIV,
14	the HIV testing counselor shall discuss with the client options regarding referrals and reporting of
15	this positive screening, including the necessity of accessing a physician.
16	(d) The department of health shall assist providers with performing and reporting the
17	results of the HIV tests.
18	(c) (e) The department of health shall be responsible for reasonable costs associated with
19	performing and reporting the results of the HIV tests, including the costs of pretest and post test
20	counseling. The reasonable costs shall be negotiated and specified by contract.
21	The department of health shall maintain sites for providing both anonymous and
22	confidential HIV testing, and HIV counseling and referral. Each site, funded by the department of
23	health, shall offer free testing, counseling and referral for indigent parties and other individuals
24	without health insurance, offer a sliding scale for payment for all other individuals and, in the
25	case of confidential testing, screen for ability to pay through a third-party insurer.
26	(d) (f) All persons tested under this section shall be provided pretest and post test
27	counseling counseled and tested in accordance with regulations adopted promulgated by the
28	department of health.; provided, however, that the counseling shall be in accordance with
29	acceptable medical standards.
30	SECTION 10. This act shall take effect upon passage.

testing for human immunodeficiency virus (HIV) unless deemed inappropriate by the physician

LC01565/SUB A

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO CRIMINAL OFFENSES

1 This act would amend several sections relating to Human Immunodeficiency Virus (HIV) 2 testing and counseling relating to, but not limited to indigent individuals and other individuals 3 without health insurance coverage. 4 This act would take effect upon passage. LC01565/SUB A