HS\$ 180 **HUMAN RESOURCES** SF Low-HOUSE FILE (PROPOSED COMMITTEE ON HUMAN BY RESOURCES BILL BY CHAIRPERSON BODDICKER)

TLSB 2694HC 78

pf/cf/24

Passed	House,	Date	Passed	Senate,	Date	_
Vote:	Ayes	Nays	Vote:	Ayes	Nays	
	A	pproved			_	

A BILL FOR

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An Act relating to acquired immune deficiency syndrome, providing
 penalties, and providing for a repeal.
 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:



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1 Section Code 2 1999, is amended to read as follows:

3 d. To collect and classify, and keep at all times 4 available, complete information useful for the detection of 5 crime, and the identification and apprehension of criminals. 6 Such information shall be available for all peace officers 7 within the state, under such regulations as the commissioner 8 may prescribe. The provisions of chapter 141 141A do not 9 apply to the entry of human immunodeficiency virus-related 10 information by criminal or juvenile justice agencies, as 11 defined in section 692.1, into the Iowa criminal justice 12 information system or the national crime information center 13 system. The provisions of chapter 141 141A also do not apply 14 to the transmission of the same information from either or 15 both information systems to criminal or juvenile justice 16 agencies. The provisions of chapter 141 141A also do not 17 apply to the transmission of the same information from either 18 or both information systems to employees of state correctional 19 institutions subject to the jurisdiction of the department of 20 corrections, employees of secure facilities for juveniles 21 subject to the jurisdiction of the department of human 22 services, and employees of city and county jails, if those 23 employees have direct physical supervision over inmates of 24 those facilities or institutions. Human immunodeficiency 25 virus-related information shall not be transmitted over the 26 police radio broadcasting system under chapter 693 or any 27 other radio-based communications system. An employee of an 28 agency receiving human immunodeficiency virus-related 29 information under this section who communicates the 30 information to another employee who does not have direct 31 physical supervision over inmates, other than to a supervisor 32 of an employee who has direct physical supervision over 33 inmates for the purpose of conveying the information to such 34 an employee, or who communicates the information to any person 35 not employed by the agency or uses the information outside the

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1 agency is guilty of a class "D" felony. The commissioner 2 shall adopt rules regarding the transmission of human 3 immunodeficiency virus-related information including 4 provisions for maintaining confidentiality of the information. 5 The rules shall include a requirement that persons receiving 6 information from the Iowa criminal justice information system 7 or the national crime information center system receive 8 training regarding confidentiality standards applicable to the 9 information received from the system. The commissioner shall 10 develop and establish, in cooperation with the department of 11 corrections and the Iowa department of public health, training 12 programs and program criteria for persons receiving human 13 immunodeficiency virus-related information through the Iowa 14 criminal justice information system.

16 Sec. 2. Section 139B.1, subsection 1, paragraph a, Code 17 1999, is amended to read as follows:

18 a. "Contagious or infectious disease" means hepatitis in 19 any form, meningococcal disease, tuberculosis, and any other 20 disease with the exception of AIDS or HIV infection as defined 21 in section 141.21 141A.1, determined to be life-threatening to 22 a person exposed to the disease as established by rules 23 adopted by the department based upon a determination by the 24 state epidemiologist and in accordance with guidelines of the 25 centers for disease prevention and control of the United 26 States department of health and human services.

27 Sec. 3. Section 139C.1, subsection 6, Code 1999, is 28 amended to read as follows:

29 6. "HIV" means HIV as defined in section 141-21 141A.1.
30 Sec. 4. Section 139C.2, subsection 7, Code 1999, is
31 amended to read as follows:

32 7. Information relating to the HIV status of a health care 33 provider is confidential and subject to the provisions of 34 section ±4±-23 141A.9. A person who intentionally or 35 recklessly makes an unauthorized disclosure of such

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1 information is subject to a civil penalty of one thousand 2 dollars. The attorney general or the attorney general's 3 designee may maintain a civil action to enforce this section. 4 Proceedings maintained under this section shall provide for 5 the anonymity of the individual and all documentation shall be 6 maintained in a confidential manner. Information relating to 7 the HIV status of a health care provider is confidential and 8 shall not be accessible to the public. Information regulated 9 by this section, however, may be disclosed to members of the 10 expert review panel established by the department or a panel 11 established by hospital protocol under this section. The 12 information may also be disclosed to the appropriate examining 13 board by filing a report as required by this section. The 14 examining board shall consider the report a complaint subject 15 to the confidentiality provisions of section 272C.6. Α 16 licensee, upon the filing of a formal charge or notice of 17 hearing by the examining board based on such a complaint, may 18 seek a protective order from the board.

Sec. 5. <u>NEW SECTION</u>. 141A.1 DEFINITIONS.
 As used in this chapter, unless the context otherwise

21 requires:

22 1. "AIDS" means acquired immune deficiency syndrome as
 23 defined by the centers for disease control and prevention of
 24 the United States department of health and human services.

2. "AIDS-related conditions" means the human
26 immunodeficiency virus, or any other condition resulting from
27 the human immunodeficiency virus infection.

3. "Blinded epidemiological studies" means studies in which specimens which were collected for other purposes are selected according to established criteria, are permanently stripped of personal identifiers, and are then tested.

4. "Blood bank" means a facility for the collection,
33 processing, or storage of human blood or blood derivatives,
34 including blood plasma, or from which or by means of which
35 human blood or blood derivatives are distributed or otherwise

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1 made available.

2 5. "Care provider" means any emergency care provider,
3 health care provider, or any other person providing health
4 care services of any kind.

5 6. "Department" means the Iowa department of public6 health.

7 7. "Emergency care provider" means a person who is trained 8 and authorized by federal or state law to provide emergency 9 medical assistance or treatment, for compensation or in a 10 voluntary capacity, including but not limited to all of the 11 following:

12 (1) An emergency medical care provider as defined in 13 section 147A.1.

14 (2) A health care provider.

15 (3) A fire fighter.

16 (4) A peace officer.

17 "Emergency care provider" also includes a person who 18 renders emergency aid without compensation.

19 8. "Good faith" means objectively reasonable and not in 20 violation of clearly established statutory rights or other 21 rights of a person which a reasonable person would know or 22 should have known.

9. "Health care provider" means a person licensed or certified under chapter 148, 148C, 150, 150A, 152, or 153 to provide professional health care service to a person during the person's medical care, treatment, or confinement.

10. "Health facility" means a hospital, health care
28 facility, clinic, blood bank, blood center, sperm bank,
29 laboratory organ transplant center and procurement agency, or
30 other health care institution.

31 11. "HIV" means the human immunodeficiency virus
32 identified as the causative agent of AIDS.

33 12. "HIV-related test" means a diagnostic test conducted
34 by a laboratory approved pursuant to the federal Clinical
35 Laboratory Improvements Act for determining the presence of

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1 HIV.

2 13. "Infectious bodily fluids" means bodily fluids capable 3 of transmitting HIV infection as determined by the centers for 4 disease control and prevention of the United States department 5 of health and human services and adopted by rule of the 6 department.

7 14. "Legal guardian" means a person appointed by a court 8 pursuant to chapter 633 or an attorney in fact as defined in 9 section 144B.1. In the case of a minor, "legal guardian" also 10 means a parent or other person responsible for the care of the 11 minor.

12 15. "Nonblinded epidemiological studies" means studies in 13 which specimens are collected for the express purpose of 14 testing for the HIV infection and persons included in the 15 nonblinded study are selected according to established 16 criteria.

17 16. "Release of test results" means a written 18 authorization for disclosure of HIV-related test results which 19 is signed and dated, and which specifies to whom disclosure is 20 authorized and the time period during which the release is to 21 be effective.

22 17. "Sample" means a human specimen obtained for the 23 purpose of conducting an HIV-related test.

18. "Significant exposure" means the risk of contracting HIV infection by means of exposure to a person's infectious bodily fluids in a manner capable of transmitting HIV rinfection as determined by the centers for disease control and prevention of the United States department of health and human services and adopted by rule of the department.

30 Sec. 6. <u>NEW SECTION</u>. 141A.2 LEAD AGENCY.

The department is designated as the lead agency in the
 coordination and implementation of the state comprehensive
 AIDS-related conditions prevention and intervention plan.
 The department shall adopt rules pursuant to chapter
 17A to implement and enforce this chapter. The rules may

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1 include procedures for taking appropriate action with regard 2 to health facilities or health care providers which violate 3 this chapter or the rules adopted pursuant to this chapter. 4 3. The department shall adopt rules pursuant to chapter 5 17A which require that if a health care provider attending a 6 person prior to the person's death determines that the person 7 suffered from or was suspected of suffering from a contagious 8 or infectious disease, the health care provider shall place 9 with the remains written notification of the condition for the 10 information of any person handling the body of the deceased 11 person subsequent to the person's death. For purposes of this 12 subsection, "contagious or infectious disease" means hepatitis 13 in any form, meningococcal disease, tuberculosis, and any 14 other disease including AIDS or HIV infection, determined to 15 be life-threatening to a person exposed to the disease as 16 established by rules adopted by the department based upon a 17 determination by the state epidemiologist and in accordance 18 with guidelines of the centers for disease prevention and 19 control of the United States department of health and human 20 services.

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4. The department, in cooperation with the department of public safety, and persons who represent those who attend dead bodies shall establish for all care providers, including paramedics, ambulance personnel, physicians, nurses, hospital personnel, first responders, peace officers, and fire fighters, who provide care services to a person, and for all persons who attend dead bodies, protocol and procedures for the use of universal precautions to prevent the transmission of contagious and infectious diseases.

30 5. The department shall coordinate efforts with local 31 health officers to investigate sources of HIV infection and 32 use every appropriate means to prevent the spread of the 33 infection.

34 6. The department, with the approval of the state board of 35 health, may conduct epidemiological blinded and nonblinded

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1 studies to determine the incidence and prevalence of the HIV 2 infection. Initiation of any new epidemiological studies 3 shall be contingent upon the receipt of funding sufficient to 4 cover all the costs associated with the studies. The informed 5 consent, reporting, and counseling requirements of this 6 chapter shall not apply to blinded studies.

7 Sec. 7. <u>NEW SECTION</u>. 141A.3 DUTIES OF THE DEPARTMENT. 8 1. All federal and state moneys appropriated to the 9 department for AIDS-related activities shall be allocated in 10 accordance with a prioritized schedule developed by rule of 11 the department, and grants shall be awarded to the maximum 12 extent feasible to community-based organizations.

13 2. The department shall do all of the following:
14 a. Provide consultation to agencies and organizations
15 regarding appropriate policies for testing, education,
16 confidentiality, and infection control.

b. Conduct health information programs for the public
relating to HIV infection, including information about how the
infection is transmitted and how transmittal can be prevented.
The department shall prepare, for free distribution, printed
information relating to HIV infection and prevention.

22 c. Provide educational programs concerning HIV infection23 in the workplace.

d. Develop and implement HIV education risk-reduction
programs for specific populations at high risk for infection.
e. Provide an informational brochure for patients who
provide samples for purposes of performing an HIV test which,

28 at a minimum, shall include a summary of the patient's rights 29 and responsibilities under the law.

30 f. In cooperation with the department of education, 31 develop and update a medically correct AIDS prevention 32 curriculum for use at the discretion of secondary and middle 33 schools.

34 3. The department shall, in cooperation with the35 department of education and other agencies, organizations,

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1 coalitions, and local health departments, develop and 2 implement a program of public and professional AIDS-related 3 education.

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4 4. School districts shall provide to every elementary,
5 middle school, and secondary school student, with parental
6 consent, instruction concerning HIV infection and AIDS and its
7 prevention.

8 Sec. 8. <u>NEW SECTION</u>. 141A.4 TESTING AND COUNSELING.
9 1. HIV testing and counseling shall be offered to the
10 following:

11 a. All persons seeking treatment for a sexually 12 transmitted disease.

b. All persons seeking treatment for intravenous drugabuse or having a history of intravenous drug abuse.

15 c. All persons who consider themselves at risk for the HIV 16 infection.

17 d. Male and female prostitutes.

18 2. Pregnant women shall be provided information about HIV 19 prevention, risk reduction, and treatment opportunities to 20 reduce the possible transmission of HIV to a fetus. Pregnant 21 women who report one or more recognized risk factors for HIV 22 shall be strongly encouraged to undergo HIV-related testing. 23 A pregnant woman who requests testing shall be tested 24 regardless of the absence of risk factors.

25 Sec. 9. <u>NEW SECTION</u>. 141A.5 PARTNER NOTIFICATION PROGRAM 26 -- HIV.

27 1. The department shall maintain a partner notification 28 program for persons known to have tested positive for the HIV 29 infection.

30 2. The department shall initiate the program at
31 alternative testing and counseling sites and at sexually
32 transmitted disease clinics.

33 3. In administering the program, the department shall 34 provide for the following:

35 a. A person who tests positive for the HIV infection shall

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1 receive posttest counseling, during which time the person 2 shall be encouraged to refer for counseling and HIV testing 3 any person with whom the person has had sexual relations or 4 has shared intravenous equipment.

5 b. The physician or other health care provider attending 6 the person may provide to the department any relevant 7 information provided by the person regarding any person with 8 whom the tested person has had sexual relations or has shared 9 intravenous equipment. The department disease prevention 10 staff shall then conduct partner notification in the same 11 manner as that utilized for sexually transmitted diseases 12 consistent with the provisions of this chapter.

13 c. Devise a procedure, as a part of the partner 14 notification program, to provide for the notification of an 15 identifiable third party who is a sexual partner of or who 16 shares intravenous equipment with a person who has tested 17 positive for HIV, by the department or a physician, when all 18 of the following situations exist:

19 (1) A physician for the infected person is of the good 20 faith opinion that the nature of the continuing contact poses 21 an imminent danger of HIV infection transmission to the third 22 party.

(2) When the physician believes in good faith that the
24 infected person, despite strong encouragement, has not and
25 will not warn the third party and will not participate in the
26 voluntary partner notification program.

Notwithstanding subsection 4, the department or a physician may reveal the identity of a person who has tested positive of the HIV infection pursuant to this subsection only to the extent necessary to protect a third party from the direct threat of transmission. This subsection shall not be interpreted to create a duty to warn third parties of the adanger of exposure to HIV through contact with a person who tests positive for the HIV infection.

35 The department shall adopt rules pursuant to chapter 17A to

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1 implement this paragraph "c". The rules shall provide a
2 detailed procedure by which the department or a physician may
3 directly notify an endangered third party.

4 4. In making contact the department shall not disclose the
5 identity of the person who provided the names of the persons
6 to be contacted and shall protect the confidentiality of
7 persons contacted.

8 5. The department may delegate its partner notification 9 duties under this section to local health authorities unless 10 the local authority refuses or neglects to conduct the contact 11 tracing program in a manner deemed to be effective by the 12 department.

6. In addition to the provisions for partner notification here of the contrary, a county medical examiner or deputy medical examiner performing official duties pursuant to sections 331.801 through 331.805 or the state medical examiner or deputy medical examiner performing official duties pursuant to phapter 691, who determines through an investigation that a deceased person was infected with HIV, may notify directly, or request that the department notify, the immediate family of the deceased or any person known to have had a significant exposure from the deceased of the finding.

24 Sec. 10. <u>NEW SECTION</u>. 141A.6 AIDS-RELATED CONDITIONS --25 SCREENING, TESTING, AND REPORTING.

Prior to obtaining a sample for the purpose of
 performing a voluntary HIV-related test, a health care
 provider shall inform the subject of the test that the test is
 voluntary. Within seven days of the testing of a person with
 a test result indicating HIV infection which has been
 confirmed as positive according to prevailing medical
 technology, the physician or other health care provider at
 whose request the test was performed shall make a report to
 the department on a form provided by the department.
 Within seven days of diagnosing a person as having an

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1 AIDS-related condition, the diagnosing physician shall make a 2 report to the department on a form provided by the department.

3 3. Within seven days of the death of a person resulting 4 from an AIDS-related condition, the attending physician shall 5 make a report to the department on a form provided by the 6 department.

7 4. Within seven days of the testing of a person with a 8 test result indicating HIV infection which has been confirmed 9 as positive according to prevailing medical technology, the 10 director of a blood bank shall make a report to the department 11 on a form provided by the department.

5. Within seven days of the testing of a person with a test result indicating HIV infection which has been confirmed as positive according to prevailing medical technology, the for director of a clinical laboratory shall make a report to the department on a form provided by the department.

17 6. The forms provided by the department shall require 18 inclusion of all of the following information:

19 a. The name of the patient.

20 b. The address of the patient.

21 c. The patient's date of birth.

22 d. The gender of the patient.

23 e. The race or ethnicity of the patient.

24 f. The patient's marital status.

25 g. The patient's telephone number.

26 h. The name and address of the laboratory or blood bank.

i. The date the test was found to be positive and the collection date.

29 j. The name of the physician or health care provider who 30 performed the test.

31 k. If the patient is female, whether the patient is 32 pregnant.

33 Sec. 11. <u>NEW SECTION</u>. 141A.7 TEST RESULTS -- COUNSELING 34 -- APPLICATION FOR SERVICES.

35 1. At any time that the subject of an HIV-related test is

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1 informed of confirmed positive test results, counseling 2 concerning the emotional and physical health effects shall be 3 initiated. Particular attention shall be given to explaining 4 the need for the precautions necessary to avoid transmitting 5 the virus. The subject shall be given information concerning 6 additional counseling.

7 2. Notwithstanding subsection 1, the provisions of this 8 section do not apply to any of the following:

9 a. The performance by a health care provider or health 10 facility of an HIV-related test when the health care provider 11 or health facility procures, processes, distributes, or uses a 12 human body part donated for a purpose specified under the 13 uniform anatomical gift Act, or semen provided prior to July 14 1, 1988, for the purpose of artificial insemination, or 15 donations of blood, and such test is necessary to ensure 16 medical acceptability of such gift or semen for the purposes 17 intended.

18 b. A person engaged in the business of insurance who is 19 subject to section 505.16.

20 c. The performance by a health care provider or health 21 facility of an HIV-related test when the subject of the test 22 is deceased and a documented significant exposure has 23 occurred.

3. A person may apply for voluntary treatment, contraceptive services, or screening or treatment for HIV infection and other sexually transmitted diseases directly to a licensed physician and surgeon, an osteopathic physician and surgeon, or a family planning clinic. Notwithstanding any other provision of law, however, a minor shall be informed or prior to testing that, upon confirmation according to prior to testing that, upon confirmation according to prevailing medical technology of a positive HIV-related test result, the minor's legal guardian is required to be informed by the testing facility. Testing facilities where minors are tested shall have available a program to assist minors and legal guardians with the notification process which emphasizes

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1 the need for family support and assists in making available
2 the resources necessary to accomplish that goal. However, a
3 testing facility which is precluded by federal statute,
4 regulation, or centers for disease control and prevention
5 guidelines from informing the legal guardian is exempt from
6 the notification requirement. The minor shall give written
7 consent to these procedures and to receive the services,
8 screening, or treatment. Such consent is not subject to later
9 disaffirmance by reason of minority.

NEW SECTION. 141A.8 CARE PROVIDER NOTIFICATION. 10 Sec. 12. A hospital licensed under chapter 135B shall provide 11 1. 12 notification to a care provider who renders assistance or 13 treatment to an individual, following submission of a 14 significant exposure report by the care provider to the 15 hospital and a diagnosis or confirmation by an attending 16 physician that the individual has HIV infection, and 17 determination that the exposure reported was a significant 18 exposure. The notification shall advise the care provider of 19 possible exposure to HIV infection. Notification shall be 20 made in accordance with both of the following:

a. The hospital informs the individual, when the
individual's condition permits, of the submission of a
significant exposure report.

b. The individual consents to serological testing by or
voluntarily discloses the individual's HIV status to the
hospital and consents to notification.

27 Notwithstanding paragraphs "a" and "b", notification shall 28 be made when the individual denies consent for or consent is 29 not reasonably obtainable for serological testing, and in the 30 course of admission, care, and treatment of the individual, 31 the individual is diagnosed or is confirmed as having HIV 32 infection.

33 2. The hospital shall notify the care provider involved in
34 attending or transporting an individual who submitted a
35 significant exposure report. This shall include a person who

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1 renders direct emergency aid without compensation, or in the 2 case of an emergency care provider, the designated officer of 3 the emergency care provider service, who in turn shall notify 4 any emergency care providers. The identity of the designated 5 officer shall not be revealed to the individual. The 6 designated officer shall inform the hospital of those parties 7 who received the notification, and following receipt of this 8 information and upon request of the individual, the hospital 9 shall inform the individual of the parties to whom 10 notification was provided.

11 3. The hospital, upon request of the individual, shall 12 inform the individual of the persons to whom notification was 13 made.

14 4. The process for notification under this section shall 15 be initiated as soon as is reasonably possible.

16 5. A health care provider, with consent of the individual, 17 may provide the notification required of hospitals in this 18 section to care providers if an individual who has HIV 19 infection is delivered by a care provider to the office or 20 clinic of the health care provider for treatment. The 21 notification shall take place only upon submission of a 22 significant exposure report form by the care provider to the 23 health care provider and the determination by the health care 24 provider that a significant exposure has occurred.

25 6. This section does not require or permit, unless 26 otherwise provided, a hospital or health care provider to 27 administer a test for the express purpose of determining the 28 presence of HIV infection, except that testing may be 29 performed if the individual consents, and if the requirements 30 of this section are satisfied.

31 7. When a care provider in the course of providing care 32 sustains a significant exposure on the premises of a hospital 33 or health facility, the individual to whom the care provider 34 was exposed is deemed to consent to a test to be administered 35 by the hospital or health care facility upon the written

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1 request of the exposed care provider for the express purpose 2 of determining the presence of HIV infection in that 3 individual. The sample and test results shall only be 4 identified by a number and no reports otherwise required by 5 this chapter shall be made which identify the individual 6 tested. However, if the test results are positive, the 7 hospital or health care facility shall notify the individual 8 tested and ensure performance of counseling and reporting 9 requirements of this chapter in the same manner as for an 10 individual from whom actual consent was obtained.

11 8. A hospital or health care provider, or other person 12 participating in good faith in making a report under the 13 notification provisions of this section, under procedures 14 similar to this section for notification of its own employees 15 upon filing of a significant exposure report, or in failing to 16 make a report under this section, is immune from any 17 liability, civil or criminal, which might otherwise be 18 incurred or imposed.

9. Notifications made pursuant to this section shall not disclose the identity of the individual who is diagnosed or confirmed as having HIV infection unless the individual provides a specific written release as provided in subsection al, paragraph "b". If the care provider determines the identity of the individual, the identity of the individual shall be confidential information and shall not be disclosed by the care provider to any other person unless a specific written release is obtained from the individual.

10. A hospital's duty to notify under this section is not continuing but is limited to the diagnosis of HIV infection 30 made in the course of admission, care, and treatment following 31 the rendering of assistance or treatment of the individual 32 with the infection.

33 11. Notwithstanding subsection 10, if, following discharge 34 or completion of care or treatment, an individual for whom a 35 significant exposure report was submitted but which report did

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not result in notification, wishes to provide information
 regarding the individual's HIV infection status to the care
 provider who submitted the report, the hospital shall provide
 a procedure for notifying the care provider.

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5 12. The employer of a care provider who submits a report 6 of significant exposure under this section sustained in the 7 course of employment shall pay the costs of HIV testing for 8 the individual and the costs of HIV testing and counseling for 9 the care provider. However, the department shall pay the 10 costs of HIV testing for the individual and the costs of HIV 11 testing and counseling for a care provider who renders direct 12 aid without compensation.

13 Sec. 13. <u>NEW SECTION</u>. 141A.9 CONFIDENTIALITY OF 14 INFORMATION.

Any information, including reports and records, obtained, submitted, and maintained pursuant to this chapter is strictly ronfidential medical information. The information shall not be released, shared with an agency or institution, or made public upon subpoena, search warrant, discovery proceedings, or by any other means except as provided in this chapter. A person shall not be compelled to disclose the identity of any person upon whom an HIV-related test is performed, or the results of the test in a manner which permits identification of the subject of the test, except to persons entitled to that information under this chapter. Information shall be made available for release to the following individuals or under or under the following circumstances:

To the subject of the test or the subject's legal
 guardian subject to the provisions of section 141A.7,
 subsection 3, when applicable.

31 2. To any person who secures a written release of test 32 results executed by the subject of the test or the subject's 33 legal guardian.

34 3. To an authorized agent or employee of a health facility 35 or health care provider, if the health facility or health care

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1 provider ordered or participated in the testing or is 2 otherwise authorized to obtain the test results, the agent or 3 employee provides patient care or handles or processes 4 samples, and the agent or employee has a medical need to know 5 such information.

6 4. To a health care provider providing care to the subject 7 of the test when knowledge of the test results is necessary to 8 provide care or treatment.

9 5. To the department in accordance with reporting 10 requirements for an HIV-related condition.

11 6. To a health facility or health care provider which 12 procures, processes, distributes, or uses a human body part 13 from a deceased person with respect to medical information 14 regarding that person, or semen provided prior to July 1, 15 1988, for the purpose of artificial insemination.

16 7. Release may be made of medical or epidemiological 17 information for statistical purposes in a manner such that no 18 individual person can be identified.

19 8. Release may be made of medical or epidemiological 20 information to the extent necessary to enforce the provisions 21 of this chapter and related rules concerning the treatment, 22 control, and investigation of HIV infection by public health 23 officials.

9. Release may be made of medical or epidemiological
25 information to medical personnel to the extent necessary to
26 protect the health or life of the named party.

27 10. Release may be made of test results concerning a
28 patient pursuant to procedures established under section
29 141A.5, subsection 3, paragraph "c".

30 11. To a person allowed access to a record by a court 31 order which is issued in compliance with the following 32 provisions:

a. A court has found that the person seeking the test
34 results has demonstrated a compelling need for the test
35 results which need cannot be accommodated by other means. In

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1 assessing compelling need, the court shall weigh the need for 2 disclosure against the privacy interest of the test subject 3 and the public interest which may be disserved by disclosure 4 due to its deterrent effect on future testing or due to its 5 effect in leading to discrimination.

b. Pleadings pertaining to disclosure of test results
7 shall substitute a pseudonym for the true name of the subject
8 of the test. The disclosure to the parties of the subject's
9 true name shall be communicated confidentially in documents
10 not filed with the court.

11 c. Before granting an order, the court shall provide the 12 person whose test results are in question with notice and a 13 reasonable opportunity to participate in the proceedings if 14 the person is not already a party.

15 d. Court proceedings as to disclosure of test results 16 shall be conducted in camera unless the subject of the test 17 agrees to a hearing in open court or unless the court 18 determines that a public hearing is necessary to the public 19 interest and the proper administration of justice.

e. Upon the issuance of an order to disclose test results,
the court shall impose appropriate safeguards against
unauthorized disclosure, which shall specify the persons who
may gain access to the information, the purposes for which the
information shall be used, and appropriate prohibitions on
future disclosure.

26 12. To an employer, if the test is authorized to be 27 required under any other provision of law.

13. To a convicted or alleged sexual assault offender; the physician or other health care provider who orders the test of a convicted or alleged offender; the victim; the parent, guardian, or custodian of the victim if the victim is a minor; the physician of the victim; the victim counselor or person requested by the victim to provide counseling regarding the HIV-related test and results; the victim's spouse; persons swith whom the victim has engaged in vaginal, anal, or oral

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1 intercourse subsequent to the sexual assault; members of the 2 victim's family within the third degree of consanguinity; and 3 the county attorney who may use the results as evidence in the 4 prosecution of sexual assault under chapter 915, subchapter 5 IV, or prosecution of the offense of criminal transmission of 6 HIV under chapter 709C. For the purposes of this paragraph, 7 "victim" means victim as defined section 915.40.

8 14. To employees of state correctional institutions 9 subject to the jurisdiction of the department of corrections, 10 employees of secure facilities for juveniles subject to the 11 department of human services, and employees of city and county 12 jails, if the employees have direct supervision over inmates 13 of those facilities or institutions in the exercise of the 14 duties prescribed pursuant to section 80.9, subsection 2, 15 paragraph "d".

16 Sec. 14. <u>NEW SECTION</u>. 141A.10 IMMUNITIES.

17 1. A person making a report in good faith pursuant to this 18 chapter is immune from any liability, civil or criminal, which 19 might otherwise be incurred or imposed as a result of the 20 report.

21 2. A health care provider attending a person who tests 22 positive for the HIV infection has no duty to disclose to or 23 to warn third parties of the dangers of exposure to HIV 24 infection through contact with that person and is immune from 25 any liability, civil or criminal, for failure to disclose to 26 or warn third parties of the condition of that person. 27 Sec. 15. NEW SECTION. 141A.11 REMEDIES.

A person aggrieved by a violation of this chapter shall
 have a right of civil action for damages in district court.
 A care provider who intentionally or recklessly makes
 an unauthorized disclosure under this chapter is subject to a
 civil penalty of one thousand dollars.

33 3. A person who violates a confidentiality requirement of
34 section 141A.5 is guilty of an aggravated misdemeanor.
35 4. A civil action under this chapter is barred unless the

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1 action is commenced within two years after the cause of action
2 accrues.

3 5. The attorney general may maintain a civil action to4 enforce this chapter.

5 6. This chapter does not limit the rights of the subject
6 of an HIV-related test to recover damages or other relief
7 under any other applicable law.

8 7. This chapter shall not be construed to impose civil 9 liability or criminal sanction for disclosure of HIV-related 10 test results in accordance with any reporting requirement for 11 a diagnosed case of AIDS or a related condition by the 12 department or the centers for disease control and prevention 13 of the United States public health service.

14 Sec. 16. Section 321.186, unnumbered paragraph 4, Code 15 1999, is amended to read as follows:

16 A physician licensed under chapter 148, 150, or 150A, or an 17 optometrist licensed under chapter 154, may report to the 18 department the identity of a person who has been diagnosed as 19 having a physical or mental condition which would render the 20 person physically or mentally incompetent to operate a motor 21 vehicle in a safe manner. The physician or optometrist shall 22 make reasonable efforts to notify the person who is the 23 subject of the report, in writing. The written notification 24 shall state the nature of the disclosure and the reason for 25 the disclosure. A physician or optometrist making a report 26 under this section shall be immune from any liability, civil 27 or criminal, which might otherwise be incurred or imposed as a 28 result of the report. A physician or optometrist has no duty 29 to make a report or to warn third parties with regard to any 30 knowledge concerning a person's mental or physical competency 31 to operate a motor vehicle in a safe manner. Any report 32 received by the department from a physician or optometrist 33 under this section shall be kept confidential. Information 34 regulated by chapter 141 141A shall be subject to the 35 confidentiality provisions and remedies of sections-141-23-and

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1 141-24 that chapter.

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2 Sec. 17. Section 505.16, subsection 1, Code 1999, is 3 amended to read as follows:

1. A person engaged in the business of insurance shall not 4 5 require a test of an individual in connection with an 6 application for insurance for the presence of an antibody to 7 the human immunodeficiency virus unless the individual 8 provides a written release on a form approved by the insurance 9 commissioner. The form shall include information regarding 10 the purpose, content, use, and meaning of the test, disclosure 11 of test results including information explaining the effect of 12 releasing the information to a person engaged in the business 13 of insurance, the purpose for which the test results may be 14 used, and other information approved by the insurance 15 commissioner. The form shall also authorize the person 16 performing the test to provide the results of the test to the 17 insurance company subject to rules of confidentiality, 18 consistent with section 141-23 141A.9, approved by the 19 insurance commissioner. As used in this section, "a person 20 engaged in the business of insurance" includes hospital 21 service corporations organized under chapter 514 and health 22 maintenance organizations subject to chapter 514B.

23 Sec. 18. Section 904.515, Code 1999, is amended to read as 24 follows:

25 904.515 HUMAN IMMUNODEFICIENCY VIRUS-RELATED MATTERS -- 26 EXEMPTION.

The provisions of chapter ±4± 141A relating to knowledge and consent do not apply to persons committed to the custody of the department. The department may provide for medically acceptable procedures to inform employees, visitors, and persons committed to the department of possible infection and 2 to protect them from possible infection.

33 Sec. 19. Section 915.40, subsection 3, paragraph c, Code 34 1999, is amended to read as follows:

35 c. The victim counselor or person requested by the victim

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1 who-is-authorized to provide the counseling required-pursuant 2 to-section-141-22 regarding the HIV-related test and results. 3 Sec. 20. Section 915.42, subsection 4, paragraph a, Code 4 1999, is amended to read as follows:

5 a. Prior to the scheduling of a hearing, refer the victim 6 for counseling by a victim counselor or a person requested by 7 the victim who-is-authorized to provide the counseling.

8 required-pursuant-to-section-141-22; regarding the nature, 9 reliability, and significance of the HIV-related test and of 10 the serologic status of the convicted offender.

11 Sec. 21. Section 915.43, subsections 1, 2, 4, and 5, Code 12 1999, are amended to read as follows:

13 1. The physician or other practitioner who orders the test 14 of a convicted or alleged offender for HIV under this 15 subchapter shall disclose the results of the test to the 16 convicted or alleged offender, and to the victim counselor or 17 a person requested by the victim who-is-authorized to provide 18 the counseling required-pursuant-to-section-141-227 regarding 19 the HIV-related test and results who shall disclose the 20 results to the petitioner.

21 2. All testing under this chapter shall be accompanied by 22 pretest and posttest counseling as-required-under-section 23 141-22.

4. Results of a test performed under this subchapter, secept as provided in subsection 13, shall be disclosed only to the physician or other practitioner who orders the test of the convicted or alleged offender, the convicted or alleged soffender, the victim, the victim counselor or person requested by the victim who-is-authorized to provide the counseling required-pursuant-to-section-141.22 regarding the HIV-related test and results, the physician of the victim if requested by the victim, the parent, guardian, or custodian of the victim, if the victim is a minor, and the county attorney who filed the petition for HIV-related testing under this chapter, who smay use the results to file charges of criminal transmission

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1 of HIV under chapter 709C. Results of a test performed under 2 this subchapter shall not be disclosed to any other person 3 without the written informed consent of the convicted or 4 alleged offender. A person to whom the results of a test have 5 been disclosed under this subchapter is subject to the 6 confidentiality provisions of section 141-23 141A.9, and shall 7 not disclose the results to another person except as 8 authorized by section 141-237-subsection-1 141A.9, subsection 9 13.

If testing is ordered under this subchapter, the court 10 5. 11 shall also order periodic testing of the convicted offender 12 during the period of incarceration, probation, or parole or of 13 the alleged offender during a period of six months following 14 the initial test if the physician or other practitioner who 15 ordered the initial test of the convicted or alleged offender 16 certifies that, based upon prevailing scientific opinion 17 regarding the maximum period during which the results of an 18 HIV-related test may be negative for a person after being HIV-19 infected, additional testing is necessary to determine whether 20 the convicted or alleged offender was HIV-infected at the time 21 the sexual assault or alleged sexual assault was perpetrated. 22 The results of the test conducted pursuant to this subsection 23 shall be released only to the physician or other practitioner 24 who orders the test of the convicted or alleged offender, the 25 convicted or alleged offender, the victim counselor or person 26 requested by the victim who-is-authorized to provide the 27 counseling required-pursuant-to-section-141-227 regarding the 28 HIV-related test and results who shall disclose the results to 29 the petitioner, the physician of the victim, if requested by 30 the victim, and the county attorney who may use the results as 31 evidence in the prosecution of the sexual assault or in the 32 prosecution of the offense of criminal transmission of HIV 33 under chapter 709C.

34 Sec. 22. Chapter 141, Code 1999, is repealed.
35 EXPLANATION

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1 This bill replaces the statute pertaining to acquired 2 immune deficiency syndrome (AIDS), which is currently divided 3 into subchapters, with a new chapter which combines the 4 subchapters and makes changes to the chapter. Existing Code 5 chapter 141 is repealed.

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6 The bill combines all definitions used in the chapter into 7 one section. The bill provides a new definition of "care 8 provider" which encompasses any person providing health care 9 services of any kind, including emergency medical assistance 10 or treatment. The definition of "legal guardian" is expanded 11 to include an "attorney in fact". The definition of "ARC" or 12 "AIDS-related complex" is deleted. The definition of "sample" 13 is added to include any specimen obtained for the purposes of 14 conducting an HIV-related test.

The bill designates the Iowa department of public health as 15 16 the lead agency in the coordination and implementation of the 17 state's AIDS prevention and intervention plan. The bill also 18 authorizes the department to adopt rules to implement and 19 enforce the bill. The bill continues the authorization for 20 the department to coordinate efforts with local health 21 officers to investigate sources of HIV infection and to use 22 every appropriate means to prevent the spread of the disease. 23 The bill also continues authorization for the department to 24 conduct epidemiological blinded and nonblinded studies. 25 The bill assigns several duties to the department. These 26 duties include broad responsibilities for testing, education, 27 and disease control. The bill retains the requirement in 28 existing law that school districts, with parental consent, 29 provide education concerning HIV infection and prevention to 30 students.

The bill continues the requirement that testing and counseling be offered for specified groups. In addition, the solution that all pregnant women receive information about testing and treatment opportunities to reduce the solution transmission of HIV to a fetus, requires that all

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1 pregnant women with risk factors for HIV be strongly
2 encouraged to be tested, and requires that upon request a
3 pregnant woman be tested regardless of the absence of risk
4 factors.

The bill requires that the department maintain a partner 5 6 notification program for persons known to have tested positive 7 for HIV infection. Persons who test positive shall receive 8 posttest counseling and be encouraged to refer for counseling 9 and testing any person who may have sustained a significant 10 exposure from them. The section continues the provision that 11 a physician for an infected person may initiate partner 12 notification when the infected person will not participate and 13 will not warn an exposed third party. The bill deletes the 14 current provision that when a person who tests positive for 15 HIV infection will not participate in partner notification 16 prior to notification of a third party, the physician 17 proposing to cause the notification make reasonable efforts to 18 inform, in writing, the person who tested positive.

19 The bill provides for the performance of voluntary testing, 20 eliminates anonymous testing, and contains the reporting 21 requirements for positive test results.

The bill eliminates the provision of pretest counseling. 22 23 The bill provides that upon informing the subject of positive 24 test results, counseling is required to be initiated with 25 emphasis given to the need for precautions to prevent 26 transmitting the virus. The bill continues the provisions 27 granting exceptions to counseling in instances of donation of 28 body parts, patients unable to give consent, insurance exams, 29 and testing of deceased persons involved in a documented 30 significant exposure incident. The provisions relating to 31 minors are amended to eliminate the provision that if a person 32 who personally applies for services, screening, or treatment 33 is a minor, the fact that the minor sought services or is 34 receiving services, screening, or treatment is not to be 35 reported or disclosed except for statistical purposes. The

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1 bill retains the provision that confirmed positive HIV test 2 results are to be reported to a minor's legal guardian. 3 The bill provides a notification process under which care 4 providers who have suffered a significant exposure to an 5 individual in the course of providing assistance may obtain 6 information concerning that individual's HIV status. The bill 7 adds a provision that if a care provider in the course of 8 providing care on the premises of a hospital or health 9 facility sustains a significant exposure, the person to whom 10 the care provider was exposed is deemed to have consented to 11 an HIV-related test, upon the written request of the care The sample and test results are only identified by 12 provider. 13 a number and no report otherwise required is to be made which 14 identifies the subject of the test. If the results are 15 positive, the subject of the test is to be informed and 16 provided with counseling.

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17 The bill provides for strict confidentiality of medical 18 information relating to a patient's HIV status. The bill 19 contains specific provisions relating to when that information 20 may be released and to whom.

The bill provides immunities for persons making reports pursuant to the bill and provides that health care providers have no duty to warn third parties regarding contact with a person who has positive HIV test results.

The bill establishes civil and criminal remedies for violations of confidentiality and other provisions of the requirement relating for violation of a confidentiality requirement relating to the partner notification program is reduced from a class "D" felony (which carries a maximum sentence of confinement of not more than 5 years and in addition may include a fine of at least \$500 but not more than \$2 \$7,500) to an aggravated misdemeanor (which carries a maximum as sentence of imprisonment not to exceed 2 years and a fine of at least \$500 but not more than \$5,000). The bill contains the specific civil penalty of \$1,000 for a care provider who

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1 intentionally or recklessly makes an unauthorized disclosure.
2 The bill eliminates the provisions for accreditation of HIV
3 testing laboratories.

4 The remainder of the bill makes conforming changes 5 necessitated by the enactment of new Code chapter 141A and the 6 repeal of Code chapter 141.

> LSB 2694HC 78 pf/cf/24

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4/6/99 Returned to Dunn Pest

MAR 1 5 1999	MAR	1	5	1999
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Place On Calendar



HOUSE FILE

BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO HSB 180)

Passed House, Date _____ Passed Senate, Date _____ Vote: Ayes ____ Nays ____ Vote: Ayes _____ Nays _____ Approved

A BILL FOR

1 An Act relating to acquired immune deficiency syndrome, providing 2 penalties, and providing for a repeal.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

H-1091

4 5

HOUSE FILE 681

1

Amend House File 681 as follows:

1. Page 11, by striking lines 31 through 34 and 2 3 inserting the following:

"____. Prior to obtaining a sample for the purpose 5 of performing an HIV-related test, the subject of the 6 test shall be provided with preliminary counseling 7 which includes but is not limited to an explanation of 8 the test, an explanation of the nature of AIDS and 9 AIDS-related conditions, an explanation of the 10 procedures to be followed, and information regarding 11 HIV infection and risk reduction. At any time that". By MILLAGE of Scott

H-1091 FILED MARCH 16, 1999

17 18 19 20 21 22 23

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Section 1. Section 80.9, subsection 2, paragraph d, Code 1 2 1999, is amended to read as follows:

To collect and classify, and keep at all times * # 3 d. 4 available, complete information useful for the detection of 5 crime, and the identification and apprehension of criminals. 6 Such information shall be available for all peace officers 7 within the state, under such regulations as the commissioner 8 may prescribe. The provisions of chapter 141 141A do not 9 apply to the entry of human immunodeficiency virus-related 10 information by criminal or juvenile justice agencies, as 11 defined in section 692.1, into the Iowa criminal justice 12 information system or the national crime information center The provisions of chapter 141 141A also do not apply 13 system. 14 to the transmission of the same information from either or 15 both information systems to criminal or juvenile justice 16 agencies. The provisions of chapter 141 141A also do not 17 apply to the transmission of the same information from either 18 or both information systems to employees of state correctional 19 institutions subject to the jurisdiction of the department of 20 corrections, employees of secure facilities for juveniles 21 subject to the jurisdiction of the department of human 22 services, and employees of city and county jails, if those 23 employees have direct physical supervision over inmates of 24 those facilities or institutions. Human immunodeficiency 25 virus-related information shall not be transmitted over the 26 police radio broadcasting system under chapter 693 or any 27 other radio-based communications system. An employee of an 28 agency receiving human immunodeficiency virus-related 29 information under this section who communicates the 30 information to another employee who does not have direct 31 physical supervision over inmates, other than to a supervisor 32 of an employee who has direct physical supervision over 33 inmates for the purpose of conveying the information to such 34 an employee, or who communicates the information to any person 35 not employed by the agency or uses the information outside the

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1 agency is guilty of a class "D" felony. The commissioner 2 shall adopt rules regarding the transmission of human 3 immunodeficiency virus-related information including 4 provisions for maintaining confidentiality of the information. 5 The rules shall include a requirement that persons receiving 6 information from the Iowa criminal justice information system 7 or the national crime information center system receive 8 training regarding confidentiality standards applicable to the 9 information received from the system. The commissioner shall 10 develop and establish, in cooperation with the department of 11 corrections and the Iowa department of public health, training 12 programs and program criteria for persons receiving human 13 immunodeficiency virus-related information through the Iowa 14 criminal justice information system or the national crime 15 information center system.

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16 Sec. 2. Section 139B.1, subsection 1, paragraph a, Code 17 1999, is amended to read as follows:

a. "Contagious or infectious disease" means hepatitis in any form, meningococcal disease, tuberculosis, and any other disease with the exception of AIDS or HIV infection as defined in section 141-21 141A.1, determined to be life-threatening to a person exposed to the disease as established by rules adopted by the department based upon a determination by the state epidemiologist and in accordance with guidelines of the centers for disease prevention and control of the United States department of health and human services.

27 Sec. 3. Section 139C.1, subsection 6, Code 1999, is 28 amended to read as follows:

29 6. "HIV" means HIV as defined in section 141.21 141A.1.
30 Sec. 4. Section 139C.2, subsection 7, Code 1999, is
31 amended to read as follows:

32 7. Information relating to the HIV status of a health care 33 provider is confidential and subject to the provisions of 34 section ±4±-23 141A.9. A person who intentionally or 35 recklessly makes an unauthorized disclosure of such

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1 information is subject to a civil penalty of one thousand 2 dollars. The attorney general or the attorney general's 3 designee may maintain a civil action to enforce this section. 4 Proceedings maintained under this section shall provide for 5 the anonymity of the individual and all documentation shall be 6 maintained in a confidential manner. Information relating to 7 the HBV status of a health care provider is confidential and 8 shall not be accessible to the public. Information regulated 9 by this section, however, may be disclosed to members of the 10 expert review panel established by the department or a panel 11 established by hospital protocol under this section. The 12 information may also be disclosed to the appropriate examining 13 board by filing a report as required by this section. The 14 examining board shall consider the report a complaint subject 15 to the confidentiality provisions of section 272C.6. Α 16 licensee, upon the filing of a formal charge or notice of 17 hearing by the examining board based on such a complaint, may 18 seek a protective order from the board.

19 Sec. 5. NEW SECTION. 141A.1 DEFINITIONS.

20 As used in this chapter, unless the context otherwise 21 requires:

1. "AIDS" means acquired immune deficiency syndrome as
 defined by the centers for disease control and prevention of
 the United States department of health and human services.

2. "AIDS-related conditions" means the human
26 immunodeficiency virus, or any other condition resulting from
27 the human immunodeficiency virus infection.

3. "Blinded epidemiological studies" means studies in
which specimens which were collected for other purposes are
selected according to established criteria, are permanently
stripped of personal identifiers, and are then tested.
4. "Blood bank" means a facility for the collection,
processing, or storage of human blood or blood derivatives,
including blood plasma, or from which or by means of which
human blood or blood derivatives are distributed or otherwise

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1 made available.

5. "Care provider" means any emergency care provider,
3 health care provider, or any other person providing health
4 care services of any kind.

5 6. "Department" means the Iowa department of public 6 health.

7 7. "Emergency care provider" means a person who is trained 8 and authorized by federal or state law to provide emergency 9 medical assistance or treatment, for compensation or in a 10 voluntary capacity, including but not limited to all of the 11 following:

12 (1) An emergency medical care provider as defined in 13 section 147A.1.

14 (2) A health care provider.

15 (3) A fire fighter.

16 (4) A peace officer.

17 "Emergency care provider" also includes a person who 18 renders emergency aid without compensation.

19 8. "Good faith" means objectively reasonable and not in 20 violation of clearly established statutory rights or other 21 rights of a person which a reasonable person would know or 22 should have known.

9. "Health care provider" means a person licensed or
certified under chapter 148, 148C, 150, 150A, 152, or 153 to
provide professional health care service to a person during
the person's medical care, treatment, or confinement.

10. "Health facility" means a hospital, health care
28 facility, clinic, blood bank, blood center, sperm bank,
29 laboratory organ transplant center and procurement agency, or
30 other health care institution.

31 11. "HIV" means the human immunodeficiency virus 32 identified as the causative agent of AIDS.

33 12. "HIV-related test" means a diagnostic test conducted
34 by a laboratory approved pursuant to the federal Clinical
35 Laboratory Improvements Act for determining the presence of

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1 HIV.

2 13. "Infectious bodily fluids" means bodily fluids capable 3 of transmitting HIV infection as determined by the centers for 4 disease control and prevention of the United States department 5 of health and human services and adopted by rule of the 6 department.

7 14. "Legal guardian" means a person appointed by a court 8 pursuant to chapter 633 or an attorney in fact as defined in 9 section 144B.1. In the case of a minor, "legal guardian" also 10 means a parent or other person responsible for the care of the 11 minor.

12 15. "Nonblinded epidemiological studies" means studies in 13 which specimens are collected for the express purpose of 14 testing for the HIV infection and persons included in the 15 nonblinded study are selected according to established 16 criteria.

17 16. "Release of test results" means a written 18 authorization for disclosure of HIV-related test results which 19 is signed and dated, and which specifies to whom disclosure is 20 authorized and the time period during which the release is to 21 be effective.

22 17. "Sample" means a human specimen obtained for the 23 purpose of conducting an HIV-related test.

18. "Significant exposure" means the risk of contracting HIV infection by means of exposure to a person's infectious bodily fluids in a manner capable of transmitting HIV rinfection as determined by the centers for disease control and prevention of the United States department of health and human services and adopted by rule of the department.

30 Sec. 6. <u>NEW SECTION</u>. 141A.2 LEAD AGENCY.

The department is designated as the lead agency in the
 coordination and implementation of the state comprehensive
 AIDS-related conditions prevention and intervention plan.
 The department shall adopt rules pursuant to chapter
 17A to implement and enforce this chapter. The rules may

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1 include procedures for taking appropriate action with regard 2 to health facilities or health care providers which violate 3 this chapter or the rules adopted pursuant to this chapter.

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The department shall adopt rules pursuant to chapter 4 3. 5 17A which require that if a health care provider attending a 6 person prior to the person's death determines that the person 7 suffered from or was suspected of suffering from a contagious 8 or infectious disease, the health care provider shall place 9 with the remains written notification of the condition for the 10 information of any person handling the body of the deceased 11 person subsequent to the person's death. For purposes of this 12 subsection, "contagious or infectious disease" means hepatitis 13 in any form, meningococcal disease, tuberculosis, and any 14 other disease including AIDS or HIV infection, determined to 15 be life-threatening to a person exposed to the disease as 16 established by rules adopted by the department based upon a 17 determination by the state epidemiologist and in accordance 18 with guidelines of the centers for disease control and 19 prevention of the United States department of health and human 20 services.

4. The department, in cooperation with the department of public safety and persons who represent those who attend dead bodies, shall establish for all care providers, including paramedics, ambulance personnel, physicians, nurses, hospital personnel, first responders, peace officers, and fire fighters, who provide care services to a person, and for all persons who attend dead bodies, protocol and procedures for the use of universal precautions to prevent the transmission of contagious and infectious diseases.

30 5. The department shall coordinate efforts with local 31 health officers to investigate sources of HIV infection and 32 use every appropriate means to prevent the spread of the 33 infection.

34 6. The department, with the approval of the state board of 35 health, may conduct epidemiological blinded and nonblinded

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studies to determine the incidence and prevalence of the HIV
 infection. Initiation of any new epidemiological studies
 shall be contingent upon the receipt of funding sufficient to
 cover all the costs associated with the studies. The informed
 consent, reporting, and counseling requirements of this
 chapter shall not apply to blinded studies.

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7 Sec. 7. <u>NEW SECTION</u>. 141A.3 DUTIES OF THE DEPARTMENT. 8 1. All federal and state moneys appropriated to the 9 department for AIDS-related activities shall be allocated in 10 accordance with a prioritized schedule developed by rule of 11 the department, and grants shall be awarded to the maximum 12 extent feasible to community-based organizations.

13 2. The department shall do all of the following:
14 a. Provide consultation to agencies and organizations
15 regarding appropriate policies for testing, education,
16 confidentiality, and infection control.

b. Conduct health information programs for the public
relating to HIV infection, including information about how the
infection is transmitted and how transmittal can be prevented.
The department shall prepare, for free distribution, printed
information relating to HIV infection and prevention.

22 c. Provide educational programs concerning HIV infection23 in the workplace.

d. Develop and implement HIV education risk-reduction
programs for specific populations at high risk for infection.
e. Provide an informational brochure for patients who
provide samples for purposes of performing an HIV test which,
at a minimum, shall include a summary of the patient's rights
and responsibilities under the law.

30 f. In cooperation with the department of education, 31 develop and update a medically correct AIDS prevention 32 curriculum for use at the discretion of secondary and middle 33 schools.

34 3. The department shall, in cooperation with the35 department of education and other agencies, organizations,

1 coalitions, and local health departments, develop and 2 implement a program of public and professional AIDS-related 3 education.

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4 Sec. 8. <u>NEW SECTION</u>. 141A.4 TESTING AND COUNSELING.
5 1. HIV testing and counseling shall be offered to the
6 following:

7 a. All persons seeking treatment for a sexually8 transmitted disease.

9 b. All persons seeking treatment for injecting drug abuse 10 or having a history of injecting drug abuse.

11 c. All persons who consider themselves at risk for the HIV
12 infection.

13 d. Male and female prostitutes.

14 2. Pregnant women shall be provided information about HIV 15 prevention, risk reduction, and treatment opportunities to 16 reduce the possible transmission of HIV to a fetus. Pregnant 17 women who report one or more recognized risk factors for HIV 18 shall be strongly encouraged to undergo HIV-related testing. 19 A pregnant woman who requests testing shall be tested 20 regardless of the absence of risk factors.

21 Sec. 9. <u>NEW SECTION</u>. 141A.5 PARTNER NOTIFICATION PROGRAM 22 -- HIV.

23 1. The department shall maintain a partner notification 24 program for persons known to have tested positive for the HIV 25 infection.

26 2. The department shall initiate the program at
27 alternative testing and counseling sites and at sexually
28 transmitted disease clinics.

3. In administering the program, the department shall30 provide for the following:

31 a. A person who tests positive for the HIV infection shall 32 receive posttest counseling, during which time the person 33 shall be encouraged to refer for counseling and HIV testing 34 any person with whom the person has had sexual relations or 35 has shared drug injecting equipment.

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b. The physician or other health care provider attending the person may provide to the department any relevant information provided by the person regarding any person with whom the tested person has had sexual relations or has shared for up injecting equipment. The department disease prevention staff shall then conduct partner notification in the same manner as that utilized for sexually transmitted diseases consistent with the provisions of this chapter.

9 c. Devise a procedure, as a part of the partner 10 notification program, to provide for the notification of an 11 identifiable third party who is a sexual partner of or who 12 shares drug injecting equipment with a person who has tested 13 positive for HIV, by the department or a physician, when all 14 of the following situations exist:

15 (1) A physician for the infected person is of the good 16 faith opinion that the nature of the continuing contact poses 17 an imminent danger of HIV infection transmission to the third 18 party.

19 (2) When the physician believes in good faith that the 20 infected person, despite strong encouragement, has not and 21 will not warn the third party and will not participate in the 22 voluntary partner notification program.

Notwithstanding subsection 4, the department or a physician may reveal the identity of a person who has tested positive for the HIV infection pursuant to this subsection only to the extent necessary to protect a third party from the direct threat of transmission. This subsection shall not be interpreted to create a duty to warn third parties of the anger of exposure to HIV through contact with a person who tests positive for the HIV infection.

The department shall adopt rules pursuant to chapter 17A to implement this paragraph "c". The rules shall provide a detailed procedure by which the department or a physician may directly notify an endangered third party.

35 4. In making contact, the department shall not disclose

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1 the identity of the person who provided the names of the 2 persons to be contacted and shall protect the confidentiality 3 of persons contacted.

5. The department may delegate its partner notification b duties under this section to local health authorities unless b the local health authority refuses or neglects to conduct the contact tracing program in a manner deemed to be effective by 8 the department.

9 6. In addition to the provisions for partner notification 10 provided under this section and notwithstanding any provision 11 to the contrary, a county medical examiner or deputy medical 12 examiner performing official duties pursuant to sections 13 331.801 through 331.805 or the state medical examiner or 14 deputy medical examiner performing official duties pursuant to 15 chapter 691, who determines through an investigation that a 16 deceased person was infected with HIV, may notify directly, or 17 request that the department notify, the immediate family of 18 the deceased or any person known to have had a significant 19 exposure from the deceased of the finding.

20 Sec. 10. <u>NEW SECTION</u>. 141A.6 AIDS-RELATED CONDITIONS --21 SCREENING, TESTING, AND REPORTING.

1. Prior to obtaining a sample for the purpose of performing a voluntary HIV-related test, a health care provider shall inform the subject of the test that the test is voluntary. Within seven days of the receipt of a test result indicating HIV infection which has been confirmed as positive according to prevailing medical technology, the physician or other health care provider at whose request the test was performed shall make a report to the department on a form provided by the department.

31 2. Within seven days of diagnosing a person as having an 32 AIDS-related condition, the diagnosing physician shall make a 33 report to the department on a form provided by the department. 34 3. Within seven days of the death of a person resulting 35 from an AIDS-related condition, the attending physician shall

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1 make a report to the department on a form provided by the 2 department.

4. Within seven days of the receipt of a test result
4 indicating HIV infection which has been confirmed as positive
5 according to prevailing medical technology, the director of a
6 blood bank shall make a report to the department on a form
7 provided by the department.

8 5. Within seven days of the receipt of a test result 9 indicating HIV infection which has been confirmed as positive 10 according to prevailing medical technology, the director of a 11 clinical laboratory shall make a report to the department on a 12 form provided by the department.

13 6. The forms provided by the department shall require 14 inclusion of all of the following information:

15 a. The name of the patient.

16 b. The address of the patient.

17 c. The patient's date of birth.

18 d. The gender of the patient.

19 e. The race or ethnicity of the patient.

20 f. The patient's marital status.

21 g. The patient's telephone number.

22 h. The name and address of the laboratory or blood bank.

i. The date the test was found to be positive and the24 collection date.

25 j. The name of the physician or health care provider who 26 performed the test.

27 k. If the patient is female, whether the patient is 28 pregnant.

29 Sec. 11. <u>NEW SECTION</u>. 141A.7 TEST RESULTS -- COUNSELING 30 -- APPLICATION FOR SERVICES.

31 1. Prior to undergoing an HIV-related test, information 32 shall be available to the subject of the test concerning 33 testing and any means of obtaining additional information 34 regarding HIV infection and risk reduction. At any time that 35 the subject of an HIV-related test is informed of confirmed

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1 positive test results, counseling concerning the emotional and 2 physical health effects shall be initiated. Particular 3 attention shall be given to explaining the need for the 4 precautions necessary to avoid transmitting the virus. The 5 subject shall be given information concerning additional 6 counseling.

7 2. Notwithstanding subsection 1, the provisions of this 8 section do not apply to any of the following:

9 a. The performance by a health care provider or health 10 facility of an HIV-related test when the health care provider 11 or health facility procures, processes, distributes, or uses a 12 human body part donated for a purpose specified under the 13 uniform anatomical gift Act, or semen provided prior to July 14 1, 1988, for the purpose of artificial insemination, or 15 donations of blood, and such test is necessary to ensure 16 medical acceptability of such gift or semen for the purposes 17 intended.

18 b. A person engaged in the business of insurance who is 19 subject to section 505.16.

20 c. The performance by a health care provider or health 21 facility of an HIV-related test when the subject of the test 22 is deceased and a documented significant exposure has 23 occurred.

3. A person may apply for voluntary treatment, 5 contraceptive services, or screening or treatment for HIV 6 infection and other sexually transmitted diseases directly to 7 a licensed physician and surgeon, an osteopathic physician and 8 surgeon, or a family planning clinic. Notwithstanding any 9 other provision of law, however, a minor shall be informed 30 prior to testing that, upon confirmation according to 31 prevailing medical technology of a positive HIV-related test 32 result, the minor's legal guardian is required to be informed 33 by the testing facility. Testing facilities where minors are 34 tested shall have available a program to assist minors and 35 legal guardians with the notification process which emphasizes

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1 the need for family support and assists in making available
2 the resources necessary to accomplish that goal. However, a
3 testing facility which is precluded by federal statute,
4 regulation, or centers for disease control and prevention
5 guidelines from informing the legal guardian is exempt from
6 the notification requirement. The minor shall give written
7 consent to these procedures and to receive the services,
8 screening, or treatment. Such consent is not subject to later
9 disaffirmance by reason of minority.

10 Sec. 12. NEW SECTION. 141A.8 CARE PROVIDER NOTIFICATION. A hospital licensed under chapter 135B shall provide 11 1. 12 notification to a care provider who renders assistance or 13 treatment to an individual, following submission of a 14 significant exposure report by the care provider to the 15 hospital and a diagnosis or confirmation by an attending 16 physician that the individual has HIV infection, and 17 determination that the exposure reported was a significant 18 exposure. The notification shall advise the care provider of 19 possible exposure to HIV infection. Notification shall be 20 made in accordance with both of the following:

a. The hospital informs the individual, when the
individual's condition permits, of the submission of a
significant exposure report.

b. The individual consents to serological testing by or
voluntarily discloses the individual's HIV status to the
hospital and consents to notification.

Notwithstanding paragraphs "a" and "b", notification shall not made when the individual denies consent for or consent is not reasonably obtainable for serological testing, and in the occurse of admission, care, and treatment of the individual, the individual is diagnosed or is confirmed as having HIV infection.

33 2. The hospital shall notify the care provider involved in
34 attending or transporting an individual who submitted a
35 significant exposure report. This shall include a person who

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1 renders direct emergency aid without compensation, or in the 2 case of an emergency care provider, the designated officer of 3 the emergency care provider service, who in turn shall notify 4 any emergency care providers. The identity of the designated 5 officer shall not be revealed to the individual. The 6 designated officer shall inform the hospital of those parties 7 who received the notification, and following receipt of this 8 information and upon request of the individual, the hospital 9 shall inform the individual of the parties to whom 10 notification was provided.

11 3. The hospital, upon request of the individual, shall
12 inform the individual of the persons to whom notification was
13 made.

14 4. The process for notification under this section shall15 be initiated as soon as is reasonably possible.

16 5. A health care provider, with consent of the individual, 17 may provide the notification required of hospitals in this 18 section to care providers if an individual who has HIV 19 infection is delivered by a care provider to the office or 20 clinic of the health care provider for treatment. The 21 notification shall take place only upon submission of a 22 significant exposure report form by the care provider to the 23 health care provider and the determination by the health care 24 provider that a significant exposure has occurred.

6. This section does not require or permit, unless 6. This section does not require or permit, unless 6. This section, a hospital or health care provider to 7. administer a test for the express purpose of determining the 8. presence of HIV infection, except that testing may be 9. performed if the individual consents, and if the requirements 30 of this section are satisfied.

31 7. When a care provider in the course of providing care 32 sustains a significant exposure on the premises of a health 33 care facility or while engaged in rendering aid or providing 34 transportation to an individual in circumstances which lead to 35 the individual's presence at a health care facility, the

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1 individual to whom the care provider was exposed is deemed to 2 consent to a test to be administered by the health care 3 facility upon the written request of the exposed care provider 4 for the express purpose of determining the presence of HIV 5 infection in that individual. The sample and test results 6 shall only be identified by a number and no reports otherwise 7 required by this chapter shall be made which identify the 8 individual tested. However, if the test results are positive, 9 the health care facility shall notify the individual tested 10 and ensure performance of counseling and reporting 11 requirements of this chapter in the same manner as for an 12 individual from whom actual consent was obtained.

13 8. A hospital or health care provider, or other person 14 participating in good faith in making a report under the 15 notification provisions of this section, under procedures 16 similar to this section for notification of its own employees 17 upon filing of a significant exposure report, or in failing to 18 make a report under this section, is immune from any 19 liability, civil or criminal, which might otherwise be 20 incurred or imposed.

9. Notifications made pursuant to this section shall not disclose the identity of the individual who is diagnosed or confirmed as having HIV infection unless the individual provides a specific written release as provided in subsection 1, paragraph "b". If the care provider determines the identity of the individual, the identity of the individual shall be confidential information and shall not be disclosed by the care provider to any other person unless a specific written release is obtained from the individual.

30 10. A hospital's duty to notify under this section is not 31 continuing but is limited to the diagnosis of HIV infection 32 made in the course of admission, care, and treatment following 33 the rendering of assistance or treatment of the individual 34 with the infection.

35 11. Notwithstanding subsection 10, if, following discharge

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1 or completion of care or treatment, an individual for whom a
2 significant exposure report was submitted but which report did
3 not result in notification, wishes to provide information
4 regarding the individual's HIV infection status to the care
5 provider who submitted the report, the hospital shall provide
6 a procedure for notifying the care provider.

7 12. The employer of a care provider who submits a report 8 of significant exposure under this section sustained in the 9 course of employment shall pay the costs of HIV testing for 10 the individual and the costs of HIV testing and counseling for 11 the care provider. However, the department shall pay the 12 costs of HIV testing for the individual and the costs of HIV 13 testing and counseling for a care provider who renders direct 14 aid without compensation.

15 Sec. 13. <u>NEW SECTION</u>. 141A.9 CONFIDENTIALITY OF 16 INFORMATION.

Any information, including reports and records, obtained, 17 18 submitted, and maintained pursuant to this chapter is strictly 19 confidential medical information. The information shall not 20 be released, shared with an agency or institution, or made 21 public upon subpoena, search warrant, discovery proceedings, 22 or by any other means except as provided in this chapter. Α 23 person shall not be compelled to disclose the identity of any 24 person upon whom an HIV-related test is performed, or the 25 results of the test in a manner which permits identification 26 of the subject of the test, except to persons entitled to that 27 information under this chapter. Information shall be made 28 available for release to the following individuals or under 29 the following circumstances:

30 1. To the subject of the test or the subject's legal
31 guardian subject to the provisions of section 141A.7,
32 subsection 3, when applicable.

33 2. To any person who secures a written release of test 34 results executed by the subject of the test or the subject's 35 legal guardian.

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To an authorized agent or employee of a health facility
 or health care provider, if the health facility or health care
 provider ordered or participated in the testing or is
 otherwise authorized to obtain the test results, the agent or
 employee provides patient care or handles or processes
 samples, and the agent or employee has a medical need to know
 such information.

8 4. To a health care provider providing care to the subject 9 of the test when knowledge of the test results is necessary to 10 provide care or treatment.

11 5. To the department in accordance with reporting 12 requirements for an HIV-related condition.

13 6. To a health facility or health care provider which 14 procures, processes, distributes, or uses a human body part 15 from a deceased person with respect to medical information 16 regarding that person, or semen provided prior to July 1, 17 1988, for the purpose of artificial insemination.

18 7. Release may be made of medical or epidemiological
19 information for statistical purposes in a manner such that no
20 individual person can be identified.

8. Release may be made of medical or epidemiological
 information to the extent necessary to enforce the provisions
 of this chapter and related rules concerning the treatment,
 control, and investigation of HIV infection by public health
 officials.

9. Release may be made of medical or epidemiological
27 information to medical personnel to the extent necessary to
28 protect the health or life of the named party.

29 10. Release may be made of test results concerning a 30 patient pursuant to procedures established under section 31 141A.5, subsection 3, paragraph "c".

32 11. To a person allowed access to a record by a court 33 order which is issued in compliance with the following 34 provisions:

35 a. A court has found that the person seeking the test

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1 results has demonstrated a compelling need for the test 2 results which need cannot be accommodated by other means. In 3 assessing compelling need, the court shall weigh the need for 4 disclosure against the privacy interest of the test subject 5 and the public interest which may be disserved by disclosure 6 due to its deterrent effect on future testing or due to its 7 effect in leading to discrimination.

8 b. Pleadings pertaining to disclosure of test results 9 shall substitute a pseudonym for the true name of the subject 10 of the test. The disclosure to the parties of the subject's 11 true name shall be communicated confidentially in documents 12 not filed with the court.

13 c. Before granting an order, the court shall provide the 14 person whose test results are in question with notice and a 15 reasonable opportunity to participate in the proceedings if 16 the person is not already a party.

17 d. Court proceedings as to disclosure of test results 18 shall be conducted in camera unless the subject of the test 19 agrees to a hearing in open court or unless the court 20 determines that a public hearing is necessary to the public 21 interest and the proper administration of justice.

e. Upon the issuance of an order to disclose test results,
the court shall impose appropriate safeguards against
unauthorized disclosure, which shall specify the persons who
may gain access to the information, the purposes for which the
information shall be used, and appropriate prohibitions on
future disclosure.

28 12. To an employer, if the test is authorized to be 29 required under any other provision of law.

30 13. To a convicted or alleged sexual assault offender; the 31 physician or other health care provider who orders the test of 32 a convicted or alleged offender; the victim; the parent, 33 guardian, or custodian of the victim if the victim is a minor; 34 the physician of the victim; the victim counselor or person 35 requested by the victim to provide counseling regarding the

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1 HIV-related test and results; the victim's spouse; persons 2 with whom the victim has engaged in vaginal, anal, or oral 3 intercourse subsequent to the sexual assault; members of the 4 victim's family within the third degree of consanguinity; and 5 the county attorney who may use the results as evidence in the 6 prosecution of sexual assault under chapter 915, subchapter 7 IV, or prosecution of the offense of criminal transmission of 8 HIV under chapter 709C. For the purposes of this paragraph, 9 "victim" means victim as defined section 915.40.

10 14. To employees of state correctional institutions 11 subject to the jurisdiction of the department of corrections, 12 employees of secure facilities for juveniles subject to the 13 department of human services, and employees of city and county 14 jails, if the employees have direct supervision over inmates 15 of those facilities or institutions in the exercise of the 16 duties prescribed pursuant to section 80.9, subsection 2, 17 paragraph "d".

18 Sec. 14. NEW SECTION. 141A.10 IMMUNITIES.

19 1. A person making a report in good faith pursuant to this 20 chapter is immune from any liability, civil or criminal, which 21 might otherwise be incurred or imposed as a result of the 22 report.

2. A health care provider attending a person who tests
 24 positive for the HIV infection has no duty to disclose to or
 25 to warn third parties of the dangers of exposure to HIV
 26 infection through contact with that person and is immune from
 27 any liability, civil or criminal, for failure to disclose to
 28 or warn third parties of the condition of that person.
 29 Sec. 15. NEW SECTION. 141A.11 REMEDIES.

A person aggrieved by a violation of this chapter shall
 have a right of civil action for damages in district court.
 A care provider who intentionally or recklessly makes
 an unauthorized disclosure under this chapter is subject to a
 civil penalty of one thousand dollars.

35 3. A person who violates a confidentiality requirement of

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1 section 141A.5 is guilty of an aggravated misdemeanor.

2 4. A civil action under this chapter is barred unless the 3 action is commenced within two years after the cause of action 4 accrues.

5 5. The attorney general may maintain a civil action to 6 enforce this chapter.

7 6. This chapter does not limit the rights of the subject
8 of an HIV-related test to recover damages or other relief
9 under any other applicable law.

10 7. This chapter shall not be construed to impose civil 11 liability or criminal sanctions for disclosure of HIV-related 12 test results in accordance with any reporting requirement for 13 a diagnosed case of AIDS or a related condition by the 14 department or the centers for disease control and prevention 15 of the United States public health service.

16 Sec. 16. Section 321.186, unnumbered paragraph 4, Code
17 1999, is amended to read as follows:

18 A physician licensed under chapter 148, 150, or 150A, or an 19 optometrist licensed under chapter 154, may report to the 20 department the identity of a person who has been diagnosed as 21 having a physical or mental condition which would render the 22 person physically or mentally incompetent to operate a motor 23 vehicle in a safe manner. The physician or optometrist shall 24 make reasonable efforts to notify the person who is the 25 subject of the report, in writing. The written notification 26 shall state the nature of the disclosure and the reason for 27 the disclosure. A physician or optometrist making a report 28 under this section shall be immune from any liability, civil 29 or criminal, which might otherwise be incurred or imposed as a 30 result of the report. A physician or optometrist has no duty 31 to make a report or to warn third parties with regard to any 32 knowledge concerning a person's mental or physical competency 33 to operate a motor vehicle in a safe manner. Any report 34 received by the department from a physician or optometrist 35 under this section shall be kept confidential. Information

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1 regulated by chapter ±4± 141A shall be subject to the
2 confidentiality provisions and remedies of sections-141-23-and
3 ±4±-24 that chapter.

4 Sec. 17. Section 505.16, subsection 1, Code 1999, is 5 amended to read as follows:

A person engaged in the business of insurance shall not 1. 6 7 require a test of an individual in connection with an 8 application for insurance for the presence of an antibody to 9 the human immunodeficiency virus unless the individual 10 provides a written release on a form approved by the insurance 11 commissioner. The form shall include information regarding 12 the purpose, content, use, and meaning of the test, disclosure 13 of test results including information explaining the effect of 14 releasing the information to a person engaged in the business 15 of insurance, the purpose for which the test results may be 16 used, and other information approved by the insurance 17 commissioner. The form shall also authorize the person 18 performing the test to provide the results of the test to the 19 insurance company subject to rules of confidentiality, 20 consistent with section 141-23 141A.9, approved by the 21 insurance commissioner. As used in this section, "a person 22 engaged in the business of insurance" includes hospital 23 service corporations organized under chapter 514 and health 24 maintenance organizations subject to chapter 514B.

25 Sec. 18. Section 904.515, Code 1999, is amended to read as 26 follows:

27 904.515 HUMAN IMMUNODEFICIENCY VIRUS-RELATED MATTERS -- 28 EXEMPTION.

The provisions of chapter 141 <u>141A</u> relating to knowledge and consent do not apply to persons committed to the custody of the department. The department may provide for medically acceptable procedures to inform employees, visitors, and persons committed to the department of possible infection and to protect them from possible infection.

35 Sec. 19. Section 915.40, subsection 3, paragraph c, Code

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1 1999, is amended to read as follows:

c. The victim counselor or person requested by the victim
3 who-is-authorized to provide the counseling required-pursuant
4 to-section-141-22 regarding the HIV-related test and results.
5 Sec. 20. Section 915.42, subsection 4, paragraph a, Code
6 1999, is amended to read as follows:

7 a. Prior to the scheduling of a hearing, refer the victim 8 for counseling by a victim counselor or a person requested by 9 the victim who-is-authorized to provide the counseling 10 required-pursuant-to-section-141-227 regarding the nature, 11 reliability, and significance of the HIV-related test and of 12 the serologic status of the convicted offender.

13 Sec. 21. Section 915.43, subsections 1, 2, 4, and 5, Code 14 1999, are amended to read as follows:

15 1. The physician or other practitioner who orders the test 16 of a convicted or alleged offender for HIV under this 17 subchapter shall disclose the results of the test to the 18 convicted or alleged offender, and to the victim counselor or 19 a person requested by the victim who-is-authorized to provide 20 the counseling required-pursuant-to-section-141-227 regarding 21 the HIV-related test and results who shall disclose the 22 results to the petitioner.

23 2. All testing under this chapter shall be accompanied by 24 pretest-and-posttest counseling as required under section 25 ±4±-22 141A.7.

4. Results of a test performed under this subchapter, 27 except as provided in subsection 13, shall be disclosed only 28 to the physician or other practitioner who orders the test of 29 the convicted or alleged offender, the convicted or alleged 30 offender, the victim, the victim counselor or person requested 31 by the victim who-is-authorized to provide the counseling 32 required-pursuant-to-section-141-22 regarding the HIV-related 33 test and results, the physician of the victim if requested by 34 the victim, the parent, guardian, or custodian of the victim, 35 if the victim is a minor, and the county attorney who filed

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1 the petition for HIV-related testing under this chapter, who 2 may use the results to file charges of criminal transmission 3 of HIV under chapter 709C. Results of a test performed under 4 this subchapter shall not be disclosed to any other person 5 without the written informed consent of the convicted or 6 alleged offender. A person to whom the results of a test have 7 been disclosed under this subchapter is subject to the 8 confidentiality provisions of section 141-23 141A.9, and shall 9 not disclose the results to another person except as 10 authorized by section 141-237-subsection-1 141A.9, subsection 11 13.

12 If testing is ordered under this subchapter, the court 5. 13 shall also order periodic testing of the convicted offender 14 during the period of incarceration, probation, or parole or of 15 the alleged offender during a period of six months following 16 the initial test if the physician or other practitioner who 17 ordered the initial test of the convicted or alleged offender 18 certifies that, based upon prevailing scientific opinion 19 regarding the maximum period during which the results of an 20 HIV-related test may be negative for a person after being HIV-21 infected, additional testing is necessary to determine whether 22 the convicted or alleged offender was HIV-infected at the time 23 the sexual assault or alleged sexual assault was perpetrated. 24 The results of the test conducted pursuant to this subsection 25 shall be released only to the physician or other practitioner 26 who orders the test of the convicted or alleged offender, the 27 convicted or alleged offender, the victim counselor or person 28 requested by the victim who-is-authorized to provide the 29 counseling required-pursuant-to-section-141-227 regarding the 30 HIV-related test and results who shall disclose the results to 31 the petitioner, the physician of the victim, if requested by 32 the victim, and the county attorney who may use the results as 33 evidence in the prosecution of the sexual assault or in the 34 prosecution of the offense of criminal transmission of HIV 35 under chapter 709C.

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1 2 Sec. 22. Chapter 141, Code 1999, is repealed. EXPLANATION

3 This bill replaces the statute pertaining to acquired 4 immune deficiency syndrome (AIDS), which is currently divided 5 into subchapters, with a new chapter which combines the 6 subchapters and makes changes to the chapter. Existing Code 7 chapter 141 is repealed.

8 The bill combines all definitions used in the chapter into 9 one section. The bill provides a new definition of "care 10 provider" which encompasses any person providing health care 11 services of any kind, including emergency medical assistance 12 or treatment. The definition of "legal guardian" is expanded 13 to include an "attorney in fact". The definition of "ARC" or 14 "AIDS-related complex" is deleted. The definition of "sample" 15 is added to include any specimen obtained for the purposes of 16 conducting an HIV-related test.

The bill designates the Iowa department of public health as the lead agency in the coordination and implementation of the state's AIDS prevention and intervention plan. The bill also authorizes the department to adopt rules to implement and enforce the bill. The bill continues the authorization for the department to coordinate efforts with local health officers to investigate sources of HIV infection and to use every appropriate means to prevent the spread of the disease. The bill also continues authorization for the department to conduct epidemiological blinded and nonblinded studies.

The bill assigns several duties to the department. These a duties include broad responsibilities for testing, education, and disease control.

The bill continues the requirement that testing and counseling be offered for specified groups. In addition, the bill requires that all pregnant women receive information about testing and treatment opportunities to reduce the possible transmission of HIV to a fetus, requires that all pregnant women with risk factors for HIV be strongly

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1 encouraged to be tested, and requires that upon request a
2 pregnant woman be tested regardless of the absence of risk
3 factors.

4 The bill requires that the department maintain a partner 5 notification program for persons known to have tested positive 6 for HIV infection. Persons who test positive shall receive 7 posttest counseling and are encouraged to refer for counseling 8 and testing any person who may have sustained a significant 9 exposure from them. The section continues the provision that 10 a physician for an infected person may initiate partner 11 notification when the infected person will not participate and 12 will not warn an exposed third party. The bill deletes the 13 current provision that when a person who tests positive for 14 HIV infection will not participate in partner notification 15 prior to notification of a third party, the physician 16 proposing to cause the notification make reasonable efforts to 17 inform, in writing, the person who tested positive. 18 The bill provides for the performance of voluntary testing, 19 eliminates anonymous testing, and contains the reporting 20 requirements for positive test results.

21 The bill provides that prior to undergoing an HIV-related 22 test, information shall be available to the subject of the 23 test concerning testing and any means of obtaining additional 24 information regarding HIV infection and risk reduction. The 25 bill provides that upon informing the subject of positive test 26 results, counseling is required to be initiated with emphasis 27 given to the need for precautions to prevent transmitting the 28 virus. The bill continues the provisions granting exceptions 29 to counseling in instances of donation of body parts, patients 30 unable to give consent, insurance exams, and testing of 31 deceased persons involved in a documented significant exposure 32 incident. The provisions relating to minors are amended to 33 eliminate the provision that if a person who personally 34 applies for services, screening, or treatment is a minor, the 35 fact that the minor sought services or is receiving services,

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1 screening, or treatment is not to be reported or disclosed 2 except for statistical purposes. The bill retains the 3 provision that confirmed positive HIV test results are to be 4 reported to a minor's legal guardian.

The bill provides a notification process under which care 5 6 providers who have suffered a significant exposure to an 7 individual in the course of providing assistance may obtain 8 information concerning that individual's HIV status. The bill 9 adds a provision that if a care provider in the course of 10 providing care on the premises of a health care facility or in 11 rendering aid or providing transportation to an individual in 12 circumstances which lead to the individual's presence at the 13 health care facility, sustains a significant exposure, the 14 person to whom the care provider was exposed is deemed to have 15 consented to an HIV-related test, upon the written request of 16 the care provider. The sample and test results are only 17 identified by a number and no report otherwise required is to 18 be made which identifies the individual tested. If the 19 results are positive, the individual tested is to be informed 20 and provided with counseling.

The bill provides for strict confidentiality of medical information relating to a patient's HIV status. The bill contains specific provisions relating to when that information any be released and to whom.

The bill provides immunity for persons making reports pursuant to the bill and provides that health care providers have no duty to warn third parties regarding contact with a person who has positive HIV test results.

The bill establishes civil and criminal remedies for violations of confidentiality and other provisions of the lil. The penalty for violation of a confidentiality requirement relating to the partner notification program is reduced from a class "D" felony (which carries a maximum sentence of confinement of not more than 5 years and in addition may include a fine of at least \$500 but not more than

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1 \$7,500) to an aggravated misdemeanor (which carries a maximum 2 sentence of imprisonment not to exceed 2 years and a fine of 3 at least \$500 but not more than \$5,000). The bill contains 4 the specific civil penalty of \$1,000 for a care provider who 5 intentionally or recklessly makes an unauthorized disclosure. 6 The bill eliminates the provisions for accreditation of HIV 7 testing laboratories.

8 The remainder of the bill makes conforming changes 9 necessitated by the enactment of new Code chapter 141A and the 10 repeal of Code chapter 141.

HOUSE CLIP SHEET

MARCH 23, 1999

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HOUSE FILE 681 FISCAL NOTE

The estimate for House File 681 is hereby submitted as a fiscal note pursuant to Joint Rule 17 and as a correctional impact statement pursuant to Section 2.56, <u>Code of Iowa</u>. Data used in developing this fiscal note and correctional impact statement are available from the Legislative Fiscal Bureau to members of the Legislature upon request.

House File 681 replaces the statute pertaining to the acquired immune deficiency syndrome (AIDS) with a new chapter which combines the subchapters and makes changes. Among the changes, the Bill requires that all pregnant women receive education about testing and treatment opportunities.

FISCAL IMPACT

House File 681 would have a General Fund impact of approximately \$25,000 in FY 2000 and each year thereafter. Federal funds are not authorized to be used for prenatal testing. As a result of the testing provision, the General Funds would be required to pay for the \$10.00 test for approximately 2,500 women per year, who would not have the test covered by a third-party payor.



CORRECTIONAL IMPACT

House File 681 has no significant correctional impact.

SOURCES

Department of Public Health Criminal and Juvenile Justice Planning Division, Department of Human Rights

(LSB 2694hv, VMT)

FILED MARCH 22, 1999

BY DENNIS PROUTY, FISCAL DIRECTOR