BILL ANALYSIS

C.S.H.B. 2770 By: Martinez, "Mando" Urban Affairs Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties observe that for certain emergency response employees or volunteers, especially emergency medical service personnel, exposure to blood or bodily fluid is a normal occurrence in their daily duties. The parties express concern that there is no system in place for timely notification or confirmation of exposure to an infectious disease or other reportable disease or parasite for these personnel. The parties point out that emergency response employees or volunteers need to know this information quickly because the possible risks can negatively affect their personal lives, loved ones, and peace of mind. The parties contend that timely notification of such exposure also would prevent unnecessary treatment or delays in treatment, thereby increasing the odds of preventing transmission of the disease. C.S.H.B. 2770 seeks to provide for timely notification of such exposure to help address this routine, yet potentially highly dangerous, risk to emergency response employees or volunteers.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 4 of this bill.

ANALYSIS

C.S.H.B. 2770 amends the Health and Safety Code, including provisions amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, to require an entity that employs or uses the services of an emergency response employee or volunteer, defined by the bill as an individual acting in the course and scope of employment or service as a volunteer as emergency medical service personnel, a peace officer, a detention officer, a county jailer, or a fire fighter, to nominate a designated infection control officer and an alternate officer to receive notification of a potential exposure to a reportable disease from a health care facility, notify the appropriate health care providers of a potential exposure to a reportable disease, act as a liaison between the entity's emergency response employees or volunteers who may have been exposed to a reportable disease during the course and scope of employment or service as a volunteer and the destination hospital of the patient who was the source of the potential exposure, investigate and evaluate an exposure incident using current evidence-based information on the possible risks of communicable disease presented by the exposure incident, and monitor all follow-up treatment provided to the affected emergency response employee or volunteer in accordance with applicable federal, state, and local law. The bill requires the executive commissioner of the Health and Human Services Commission by rule, not later than December 1, 2015, to prescribe the qualifications required for a person to be eligible to be designated as an infection control officer and requires that those qualifications include a requirement that the person be trained as a

health care provider or have training in the control of infectious and communicable diseases. The bill establishes that the entity that employs or uses the services of an emergency response employee or volunteer is responsible for notifying the local health authorities or local health care facilities, according to any local rules or procedures, that the entity has a designated infection control officer or alternate infection control officer.

C.S.H.B. 2770 requires the executive commissioner to review the federal Ryan White HIV/AIDS Treatment Extension Act of 2009 or any successor law and any regulations adopted under the law and determine whether adopting any part of the federal law or regulations by rule is in the best interest of the state to further achieve the purposes of the Communicable Disease Prevention and Control Act and authorizes the executive commissioner to adopt by rule all or a part of the federal law or regulations if the executive commissioner determines that adopting the federal law or regulations is in the best interest of the state to further achieve those purposes.

C.S.H.B. 2770 authorizes the release of medical or epidemiological information regarding cases or suspected cases of diseases or health conditions to a designated infection control officer. The bill expands the requirement that notice be given to certain individuals providing emergency care regarding an individual's possible exposure to a reportable disease to include requiring notice to be given to an emergency response employee or volunteer and requiring notice to be given regarding a negative test result, as well as a positive result, for a reportable disease. The bill requires such notice to be given by the hospital to the designated infection control officer of the entity that employs or uses the services of the affected emergency response employee or volunteer and by the local health authority or that designated infection control officer to the employee or volunteer affected. The bill removes requirements that the local health authority give notice to the director give notice to the employee affected. The bill authorizes a designated infection control officer that receives such notice to give notice of the possible exposure to a person other than the affected employee or volunteer if that person demonstrates that the person was exposed to the reportable disease while providing emergency care.

C.S.H.B. 2770 authorizes any emergency response employee or volunteer to request the Department of State Health Services (DSHS) or a health authority to order testing of another person who may have exposed the employee or volunteer to a reportable disease. The bill requires DSHS or DSHS's designee to inform the designated infection control officer of the person who requested the order of the test results if that person is an emergency response employee or volunteer. The bill includes HIV or any reportable disease among the conditions for which a licensed hospital, following a report of accidental exposure of a health care worker to blood or other body fluids of a patient in that hospital, is required to take reasonable steps to test the patient. The bill expands the requirement that a patient who is transported to a licensed hospital be tested for certain conditions after a person who renders assistance to the patient is accidentally exposed to the patient's blood or other body fluids to include testing after an emergency response employee or volunteer is accidentally exposed. The bill requires the hospital to provide those test results to the designated infection control officer of the entity employing or using the services of an affected emergency response employee or volunteer and includes HIV or any reportable disease among the conditions for which the hospital is required to take reasonable steps to test the patient.

C.S.H.B. 2770 changes from communicable diseases to reportable diseases the diseases for which a deceased person who dies at the scene of an emergency or during transport to the hospital is required to be tested after certain individuals have been accidently exposed to the person's blood or other body fluids. The bill also expands the requirement to include such testing after any emergency response employee or volunteer is accidentally exposed. The bill includes a justice of the peace or medical examiner among the entities and persons required to take reasonable steps to have a deceased person so tested following a report of an exposure incident. The bill requires the results of that test to be provided to the designated infection control officer of an affected emergency response employee or volunteer and requires a medical examiner to

follow applicable reporting requirements prescribed by the Communicable Disease Prevention and Control Act. The bill removes a requirement that the person or entity providing the test results inform the next of kin of the deceased person regarding the test results and instead requires DSHS or the local health authority to so inform the next of kin. The bill establishes that no additional duty is imposed on a justice of the peace or medical examiner to order or provide any further testing, treatment, or services or to order or perform further procedures.

C.S.H.B. 2770 authorizes the release of test results for AIDS and other related disorders to a designated infection control officer of an affected emergency response employee or volunteer. The bill authorizes a health care agency or facility to test a person who may have exposed any emergency response employee or volunteer to HIV without the person's specific consent to the test.

C.S.H.B. 2770 amends the Code of Criminal Procedure to expand the requirement that a person arrested for an offense who during the commission of that offense or subsequent arrest causes a peace officer to come into contact with the person's bodily fluids be tested for a communicable disease to include testing of such a person who exposes any emergency response employee or volunteer. The bill requires the person performing the test to make the test results available to the designated infection control officer of the entity that employs or uses the services of the affected employee or volunteer and requires that officer to notify the employee or volunteer of the test result.

C.S.H.B. 2770 amends the Government Code to extend to any emergency response employee or volunteer the entitlement of certain persons exposed to methicillin-resistant Staphylococcus aureus to receive notification of the exposure. The bill expands the entitlement to include notice of exposure of a disease caused by a select agent or toxin identified or listed under certain specified federal regulations.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 2770 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill and does not indicate differences relating to changes made by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, which became effective April 2, 2015.

INTRODUCED

SECTION 1. Article 18.22(a), Code of Criminal Procedure, is amended to read as follows:

(a) A person who is arrested for a misdemeanor or felony and who during the commission of that offense or an arrest following the commission of that offense causes an emergency response employee or volunteer, as defined by Section 81.003, Health and Safety Code, [a peace officer] to come into contact with the person's bodily fluids shall, at the direction of the court having jurisdiction over the arrested person,

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Article 18.22(a), Code of Criminal Procedure, is amended to read as follows:

(a) A person who is arrested for a misdemeanor or felony and who during the commission of that offense or an arrest following the commission of that offense causes an emergency response employee or volunteer, as defined by Section 81.003, Health and Safety Code, [a peace officer] to come into contact with the person's bodily fluids shall, at the direction of the court having jurisdiction over the arrested person,

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undergo a medical procedure or test designed to show or help show whether the person has a communicable disease. The court may direct the person to undergo the procedure or test on its own motion or on the request of the emergency response employee or volunteer [peace officer]. If the person refuses to submit voluntarily to the procedure or test, the court shall require the person to submit to the procedure or test. Notwithstanding any other law, the person performing the procedure or test shall make the test results available to the local health authority and the designated infection control officer of the affected emergency response employee or volunteer, and the local health authority or the designated infection control officer of the affected employee or volunteer shall notify the emergency response employee or volunteer [peace officer] of the test result. The state may not use the fact that a medical procedure or test was performed on a person under this article, or use the results of the procedure or test, in any criminal proceeding arising out of the alleged offense.

SECTION 2. Section 607.102, Government Code, is amended.

SECTION 3. Section 81.003, Health and Safety Code, is amended by adding Subdivisions (1-a), (1-b), and (1-c) to read as follows:

(1-a) "Emergency response employee or volunteer" means an individual acting in the course and scope of employment or service as a volunteer as emergency medical service personnel, a peace officer, a detention officer, a county jailer, or a fire fighter.

(1-b) "Executive commissioner" means the executive commissioner of the Health and Human Services Commission.

(1-c) "Designated infection control officer" means the person serving as an entity's designated infection control officer under Section 81.012.

undergo a medical procedure or test designed to show or help show whether the person has a communicable disease. The court may direct the person to undergo the procedure or test on its own motion or on the request of the emergency response employee or volunteer [peace officer]. If the person refuses to submit voluntarily to the procedure or test, the court shall require the person to submit to the procedure or test. Notwithstanding any other law, the person performing the procedure or test shall make the test results available to the local health authority and the designated infection control officer of the entity that employs or uses the services of the affected emergency response employee or volunteer, and the local health authority or the designated infection control officer of the affected employee or volunteer shall notify the emergency response employee or volunteer [peace officer] of the test result. The state may not use the fact that a medical procedure or test was performed on a person under this article, or use the results of the procedure or test, in any criminal proceeding arising out of the alleged offense.

SECTION 2. Same as introduced version.

SECTION 3. Section 81.003, Health and Safety Code, is amended by adding Subdivisions (1-a) and (1-b) and amending Subdivision (8) to read as follows:

(1-a) "Emergency response employee or volunteer" means an individual acting in the course and scope of employment or service as a volunteer as emergency medical service personnel, a peace officer, a detention officer, a county jailer, or a fire fighter.

(1-b) "Designated infection control officer" means the person serving as an entity's designated infection control officer under Section 81.012.

(8) "Reportable disease" <u>means a</u> [includes only a] disease <u>that is designated as</u> [or condition included in the list of] reportable <u>under Section 81.048</u> [diseases]. SECTION 4. Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Sections 81.012 and 81.013 to read as follows:

Sec. 81.012. DESIGNATED INFECTION CONTROL OFFICER. (a) An entity that employs or uses the services of an emergency response employee or volunteer shall nominate a designated infection control officer and an alternate designated infection control officer to:

(1) receive notification of a potential exposure to an infectious disease from a health care facility;

(2) notify the appropriate health care providers of a potential exposure to an infectious disease;

(3) act as a liaison between the entity's emergency response employees or volunteers who may have been exposed to a reportable disease during the course and scope of employment or service as a volunteer;

(4) investigate and evaluate an exposure incident, using current evidence-based information on the possible risks of communicable disease presented by the exposure incident; and

(5) monitor all follow-up treatment provided to the affected emergency response employee or volunteer, in accordance with applicable federal, state, and local law.

(b) The executive commissioner shall adopt rules for the department to approve the designated infection control officer and alternate designated infection control officer nominated under Subsection (a). SECTION 4. Subchapter A, Chapter 81, Health and Safety Code, is amended by adding Sections 81.012 and 81.013 to read as follows:

Sec. 81.012. DESIGNATED INFECTION CONTROL OFFICER. (a) An entity that employs or uses the services of an emergency response employee or volunteer shall nominate a designated infection control officer and an alternate designated infection control officer to:

(1) receive notification of a potential exposure to a reportable disease from a health care facility;

(2) notify the appropriate health care providers of a potential exposure to a reportable disease;

(3) act as a liaison between the entity's emergency response employees or volunteers who may have been exposed to a reportable disease during the course and scope of employment or service as a volunteer and the destination hospital of the patient who was the source of the potential exposure:

(4) investigate and evaluate an exposure incident, using current evidence-based information on the possible risks of communicable disease presented by the exposure incident; and

(5) monitor all follow-up treatment provided to the affected emergency response employee or volunteer, in accordance with applicable federal, state, and local law.

(b) The executive commissioner by rule shall prescribe the qualifications required for a person to be eligible to be designated as an infection control officer under this section. The qualifications must include a requirement that the person be trained as a health care provider or have training in the control of infectious and communicable diseases.

(c) The entity that employs or uses the services of an emergency response employee or volunteer is responsible for notifying the local health authorities or local health care facilities, according to any local rules or procedures, that the entity has a designated infection control officer or alternate designated infection control officer.

Sec. 81.013. CONSIDERATION OF FEDERAL LAW AND REGULATIONS.

SECTION 5. Section 81.046(c), Health and Safety Code, is amended.

SECTION 6. The heading to Section 81.048, Health and Safety Code, is amended.

SECTION 7. Sections 81.048(b), (c), and (g), Health and Safety Code, are amended to read as follows:

(b) Notice of a positive test result for a reportable disease designated under Subsection (a) shall be given to an emergency response employee or volunteer [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] as provided by this section if:

(1) the emergency <u>response employee or</u> <u>volunteer</u> [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] delivered a person to a hospital as defined by Section 74.001, Civil Practice and Remedies Code;

(2) the hospital has knowledge that the person has a reportable disease and has medical reason to believe that the person had the disease when the person was admitted to the hospital; and

(3) the emergency <u>response employee or</u> <u>volunteer</u> [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] was exposed to the reportable disease during the course <u>and scope of the</u> <u>person's employment or service as a</u> <u>volunteer</u> [of duty].

(c) Notice of the possible exposure shall be given:

(1) by the hospital to the local health authority;

(2) by the <u>hospital to the designated</u> <u>infection control officer of</u> [local health authority to the director of the appropriate department of] the entity that employs <u>or</u> <u>uses the services of</u> the <u>affected emergency</u> <u>response employee or volunteer</u> [emergency medical service personnel, peace officer,

Sec. 81.013. CONSIDERATION OF FEDERAL LAW AND REGULATIONS.

SECTION 5. Same as introduced version.

SECTION 6. Same as introduced version.

SECTION 7. Sections 81.048(b) and (c), Health and Safety Code, and Section 81.048(g), Health and Safety Code, as amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, are amended to read as follows:

(b) Notice of a positive <u>or negative</u> test result for a reportable disease designated under Subsection (a) shall be given to an emergency <u>response employee or volunteer</u> [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] as provided by this section if:

(1) the emergency <u>response employee or</u> <u>volunteer</u> [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] delivered a person to a hospital as defined by Section 74.001, Civil Practice and Remedies Code;

(2) the hospital has knowledge that the person has a reportable disease and has medical reason to believe that the person had the disease when the person was admitted to the hospital; and

(3) the emergency <u>response employee or</u> <u>volunteer</u> [medical service personnel, peace officer, detention officer, county jailer, or fire fighter] was exposed to the reportable disease during the course <u>and scope of the</u> person's employment or service as a <u>volunteer</u> [of duty].

(c) Notice of the possible exposure shall be given:

(1) by the hospital to the local health authority;

(2) by the <u>hospital to the designated</u> <u>infection control officer of</u> [local health authority to the director of the appropriate <u>department of</u>] the entity that employs <u>or</u> <u>uses the services of</u> the <u>affected emergency</u> <u>response employee or volunteer</u> [emergency <u>medical service personnel, peace officer,</u>

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detention officer, county jailer, or fire fighter]; and

(3) by the <u>local health authority or the</u> designated infection control officer of the entity that employs or uses the services of the affected emergency response employee or volunteer [director] to the employee or volunteer affected.

(g) A hospital that gives notice of a possible exposure under Subsection (c) or a local health authority or designated infection control officer that receives notice of a possible exposure under Subsection (c) may give notice of the possible exposure to a person other than the affected emergency response employee or volunteer [emergency medical personnel, a peace officer, a detention officer, a county jailer, or a fire fighter] if the person demonstrates that the person was exposed to the reportable disease while providing emergency care. The executive commissioner [of the Health and Human Services Commission] shall adopt rules to implement this subsection.

SECTION 8. Sections 81.050(b) and (h), Health and Safety Code, are amended to read as follows:

(b) A person whose occupation or whose volunteer service is included in one or more of the following categories may request the department or a health authority to order testing of another person who may have exposed the person to a reportable disease, including HIV infection:

(1) a law enforcement officer;

(2) a fire fighter;

(3) an emergency medical service employee or paramedic;

(4) a correctional officer;

(5) an employee, contractor, or volunteer, other than a correctional officer, who performs a service in a correctional facility as defined by Section 1.07, Penal Code, or a secure correctional facility or secure detention facility as defined by Section 51.02, Family Code; [or]

(6) an employee of a juvenile probation department; or

(7) any other emergency response employee or volunteer.

detention officer, county jailer, or fire fighter]; and

(3) by the <u>local health authority or the</u> designated infection control officer of the entity that employs or uses the services of the affected emergency response employee or volunteer [director] to the employee or volunteer affected.

(g) A hospital that gives notice of a possible exposure under Subsection (c) or a local health authority <u>or designated infection</u> <u>control officer</u> that receives notice of a possible exposure under Subsection (c) may give notice of the possible exposure to a person other than <u>the affected emergency</u> <u>response employee or volunteer</u> [emergency <u>medical personnel</u>, <u>a peace officer</u>, <u>a</u> <u>detention officer</u>, <u>a county jailer</u>, <u>or a fire</u> <u>fighter</u>] if the person demonstrates that the person was exposed to the reportable disease while providing emergency care. The executive commissioner shall adopt rules to implement this subsection.

SECTION 8. Section 81.050(b), Health and Safety Code, as amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, and Section 81.050(h), Health and Safety Code, are amended to read as follows:

(b) A person whose occupation or whose volunteer service is included in one or more of the following categories may request the department or a health authority to order testing of another person who may have exposed the person to a reportable disease:

- (1) a law enforcement officer;
- (2) a fire fighter;

(3) an emergency medical service employee or paramedic;

(4) a correctional officer;

(5) an employee, contractor, or volunteer, other than a correctional officer, who performs a service in a correctional facility as defined by Section 1.07, Penal Code, or a secure correctional facility or secure detention facility as defined by Section 51.02, Family Code; [or]

(6) an employee of a juvenile probation department; or

(7) any other emergency response employee or volunteer.

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(h) The department or the department's designee shall inform the person who requested the order and the designated infection control officer of the person who requested the order, if that person is an emergency response employee or volunteer, of the results of the test. If the person subject to the order is found to have a reportable disease, the department or the department's designee shall inform that person and the person who requested the order of the need for medical follow-up and counseling services. The department or the department's designee shall develop protocols for coding test specimens to ensure that any identifying information concerning the person tested will be destroyed as soon as the testing is complete.

SECTION 9. Sections 81.095(a) and (b), Health and Safety Code, are amended to read as follows:

(a) In a case of accidental exposure of a health care worker to blood or other body fluids of a patient in a licensed hospital, the hospital, following a report of the exposure incident, shall take reasonable steps to test the patient for hepatitis B_{\star} [Θr] hepatitis C_{\star} HIV, or any reportable disease or parasite.

(b) This subsection applies only in a case of accidental exposure of certified emergency medical services personnel, an emergency response employee or volunteer [a firefighter, a peace officer], or a first responder who renders assistance at the scene of an emergency or during transport to the hospital to blood or other body fluids of a patient who is transported to a licensed hospital. The hospital receiving the patient, following a report of the exposure incident, shall take reasonable steps to test the patient for hepatitis B, [or] hepatitis C, HIV, or any reportable disease or parasite if the report shows there is significant risk to the person exposed. The organization that employs the person or for which the person works as a volunteer in connection with rendering the assistance is responsible for paying the costs of the test. The hospital shall provide the test results to the department or to the local health authority and to the designated infection control officer of the entity employing or using the services of an affected emergency response employee or

(h) The department or the department's designee shall inform the person who requested the order and the designated infection control officer of the person who requested the order, if that person is an emergency response employee or volunteer, of the results of the test. If the person subject to the order is found to have a reportable disease, the department or the department's designee shall inform that person and the person who requested the order of the need for medical follow-up and counseling services. The department or the department's designee shall develop protocols for coding test specimens to ensure that any identifying information concerning the person tested will be destroyed as soon as the testing is complete.

SECTION 9. Sections 81.095(a) and (b), Health and Safety Code, are amended to read as follows:

(a) In a case of accidental exposure of a health care worker to blood or other body fluids of a patient in a licensed hospital, the hospital, following a report of the exposure incident, shall take reasonable steps to test the patient for hepatitis B_{2} [Θr] hepatitis C_{2} HIV, or any reportable disease.

(b) This subsection applies only in a case of accidental exposure of certified emergency medical services personnel, an emergency response employee or volunteer [A] firefighter, a peace officer], or a first responder who renders assistance at the scene of an emergency or during transport to the hospital to blood or other body fluids of a patient who is transported to a licensed hospital. The hospital receiving the patient, following a report of the exposure incident, shall take reasonable steps to test the patient for hepatitis B, [or] hepatitis C, HIV, or any reportable disease if the report shows there is significant risk to the person exposed. The organization that employs the person or for which the person works as a volunteer in connection with rendering the assistance is responsible for paying the costs of the test. The hospital shall provide the test results to the department or to the local health authority and to the designated infection control officer of the entity employing or using the services of an affected emergency response employee or volunteer, which are

volunteer, which are responsible for following the procedures prescribed by Section 81.050(h) to inform the person exposed and, if applicable, the patient regarding the test results. The hospital shall follow applicable reporting requirements prescribed by Subchapter C. This subsection does not impose a duty on a hospital to provide any further testing, treatment, or services or to perform further procedures.

SECTION 10. Sections 81.0955(a) and (b), Health and Safety Code, are amended to read as follows:

(a) This section applies only to the accidental exposure to the blood or other body fluids of a person who dies at the scene of an emergency or during transport to the hospital involving <u>an emergency</u> response employee or volunteer [certified emergency medical services personnel, a firefighter, a peace officer,] or <u>another</u> [a] first responder who renders assistance at the scene of an emergency or during transport of a person to the hospital.

(b) A hospital, certified emergency medical services personnel, justice of the peace, medical examiner, or a physician on behalf of the person exposed, following a report of the exposure incident, shall take reasonable steps to have [test] the deceased person tested for communicable diseases. The hospital, certified emergency medical services personnel, justice of the peace, medical examiner, or physician shall provide the test results to the department or to the local health authority and to the designated infection control officer of an affected emergency response employee or volunteer responsible for following the procedures prescribed by Section 81.050(h) to inform the person exposed. If [and, if] applicable, the department or the local health authority shall inform the next of kin of the deceased person regarding the test results. The hospital, certified emergency medical services personnel, or physician follow applicable shall reporting requirements prescribed by Subchapter C. This subsection does not impose a duty on a hospital, certified emergency medical

responsible for following the procedures prescribed by Section 81.050(h) to inform the person exposed and, if applicable, the patient regarding the test results. The hospital shall follow applicable reporting requirements prescribed by Subchapter C. This subsection does not impose a duty on a hospital to provide any further testing, treatment, or services or to perform further procedures.

SECTION 10. Section 81.0955(a), Health and Safety Code, and Section 89.055(b), Health and Safety Code, as amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, are amended to read as follows:

(a) This section applies only to the accidental exposure to the blood or other body fluids of a person who dies at the scene of an emergency or during transport to the hospital involving <u>an emergency</u> response employee or volunteer [certified emergency medical services personnel, a firefighter, a peace officer,] or <u>another</u> [a] first responder who renders assistance at the scene of an emergency or during transport of a person to the hospital.

(b) A hospital, certified emergency medical services personnel, a justice of the peace, a medical examiner, or a physician on behalf of the person exposed, following a report of the exposure incident, shall take reasonable steps to have [test] the deceased person reportable [communicable] tested for diseases. The hospital, certified emergency medical services personnel, justice of the peace, medical examiner, or physician shall provide the test results to the department or to the local health authority and to the designated infection control officer of an affected emergency response employee or volunteer responsible for following the procedures prescribed by Section 81.050(h) to inform the person exposed, and, if applicable, the department or the local health authority shall inform the next of kin of the deceased person regarding the test results. The hospital, certified emergency medical services personnel, medical physician shall examiner, or follow applicable reporting requirements prescribed by Subchapter C. This subsection does not impose a duty on a hospital, certified

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services personnel, <u>medical examiner</u>, or a physician to provide any further testing, treatment, or services or to perform further procedures. <u>This subsection does not impose</u> a duty on a justice of the peace to order that further testing, treatment, or services be provided or further procedures be performed. The executive commissioner [of the Health and Human Services Commission] shall adopt rules to implement this subsection.

SECTION 11. Section 81.102(c), Health and Safety Code, is amended to read as follows:

(c) Protocols adopted under Subsection (a)(5)(D) [(a)(4)(D)] must clearly establish procedural guidelines with criteria for testing that respect the rights of the person with the infection and the person who may be exposed to that infection. The protocols may not require the person who may have been exposed to be tested and must ensure the confidentiality of the person with the infection in accordance with this chapter.

SECTION 12. Section 81.103(b), Health and Safety Code, is amended.

SECTION 13. Section 81.107(a), Health and Safety Code, is amended to read as follows:

(a) In a case of accidental exposure to blood or other body fluids under Section 81.102(a)(5)(D) [81.102(a)(4)(D)], the health care agency or facility may test a person who may have exposed the health care worker <u>or other emergency response</u> <u>employee or volunteer</u> to HIV without the person's specific consent to the test.

SECTION 14. Not later than December 1, 2015, the executive commissioner of the Health and Human Services Commission shall adopt the rules required by Section 81.012, Health and Safety Code, as added by this Act.

emergency medical services personnel, <u>a</u> <u>medical examiner</u>, or a physician to provide any further testing, treatment, or services or to perform further procedures. <u>This</u> <u>subsection does not impose a duty on a</u> <u>justice of the peace to order that further</u> <u>testing, treatment, or services be provided or</u> <u>further procedures be performed</u>. The executive commissioner shall adopt rules to implement this subsection.

No equivalent provision.

SECTION 11. Same as introduced version.

SECTION 12. Section 81.107(a), Health and Safety Code, as amended by S.B. 219, Acts of the 84th Legislature, Regular Session, 2015, is amended to read as follows:

(a) In a case of accidental exposure to blood or other body fluids under Section 81.102(a)(5)(D), the health care agency or facility may test a person who may have exposed the health care worker <u>or other</u> <u>emergency response employee or volunteer</u> to HIV without the person's specific consent to the test.

SECTION 13. Same as introduced version.

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SECTION 15. This Act takes effect September 1, 2015.

SECTION 14. Same as introduced version.