Chapter 112

(House Bill 978)

AN ACT concerning

HIV Testing – Informed Consent and Pretest Requirements – Modification

FOR the purpose of altering certain requirements health care providers must meet before obtaining certain samples for the purpose of HIV testing; requiring consent for HIV testing to be included in a certain general informed consent for medical care in a certain category of tests; providing, subject to a certain exception, that a health care provider may not be required to obtain certain consent using a separate consent form; requiring a health care provider to make available certain materials and certain language assistance to certain individuals; prohibiting a certain refusal to undergo a certain HIV test from being used as the sole basis by an institution or a laboratory to deny services or treatment; requiring a certain health care provider who obtains certain results from an HIV test to take certain actions; making certain stylistic changes; and generally relating to HIV testing procedures and requirements for health care providers.

BY repealing and reenacting, with amendments,
Article – Health – General
Section 18–336
Annotated Code of Maryland
(2009 Replacement Volume and 2014 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

18–336.

(a)  (1) In this section the following words have the meanings indicated.

(2) “HIV” means the human immunodeficiency virus that causes acquired immune deficiency syndrome.

(3) “Health care facility” has the same meaning stated in § 18–338.2 of this subtitle.

(4) “Health care provider” means a physician, nurse, or designee of a health care facility.

(b) (1) Except as provided in Title 11, Subtitle 1, Part II of the Criminal Procedure Article or § 18–338.3 of this subtitle, before obtaining a fluid or tissue sample
from the body of an individual for the purpose of testing the fluid or tissue for the presence of HIV infection, a health care provider shall:

[(1) Obtain informed consent from the individual after:

(i) Informing the individual that an HIV test will be administered; and

(ii) Advising the individual of the right to refuse the HIV test without penalty;

(2) Document in the medical record the provision of informed consent; and

(3) Provide the individual with pretest counseling as provided in regulations adopted by the Department.

(c) Pretest counseling may be provided in writing, verbally, by video, or a combination of these strategies as appropriate based on the individual’s informational needs and testing history.]

(d) (1) If the HIV test is ordered at a location that is not a health care facility, informed consent shall be in writing and signed by the individual on an informed consent for HIV testing document that is approved by the Department.

(2) The informed consent for HIV testing document shall be distinct and separate from all other consent forms.

(3) A patient identifying number obtained from an anonymous and confidential test site which is approved by the Department may be evidence of a patient’s informed consent in lieu of a patient’s signature.

(i) Obtain general informed consent from an individual to provide medical care to the individual;

(ii) (1) Inform the individual orally verbally or in writing that HIV testing will be performed on a specimen obtained from the individual unless the individual refuses HIV testing;

(iii) (II) Provide the individual oral verbal or written information or show a video that includes an explanation of HIV infection and the meaning of positive and negative test results;

(iv) (III) Offer the individual an opportunity to ask questions and decline HIV testing; and
(iv) If the individual refuses HIV testing, document in the medical record the individual’s decision.

(2) (i) Consent for HIV testing shall be included in a patient’s general informed consent for medical care in the same category as other screening and diagnostic tests.

(ii) Except as otherwise provided in this section, a health care provider may not be required to obtain consent for HIV testing using a separate consent form.

(2) (3) A health care provider shall:

(i) Make available to individuals for whom HIV testing is performed easily understood informational materials in the languages of the commonly encountered populations within the service area of the health care provider; and

(ii) Provide language assistance to individuals for whom HIV testing is performed who have limited English proficiency through the use of competent interpreters or bilingual staff.

[(d) (c)] (1) If the HIV test is ordered at a location that is not a health care facility, informed consent shall be in writing and signed by the individual on an informed consent for HIV testing document that is approved by the Department.

(2) The informed consent for HIV testing document shall be distinct and separate from all other consent forms.

(3) A patient identifying number obtained from an anonymous and confidential test site which is approved by the Department may be evidence of a patient’s informed consent in lieu of a patient’s signature.

[(e) (c) (d)] [Refusal to consent to the] An individual’s refusal to undergo an HIV antibody test or a positive test result may not be used as the sole basis by an institution or laboratory to deny services or treatment.

[(f) (d) (e)] If the individual is unable to give informed consent, substitute consent may be given under § 5–605 of this article.

[(g) (e) (f)] A physician or physician’s designee, health care provider who obtains a result from an HIV antibody test conducted in accordance with the provisions of subsection (b) of this section shall:
(1) Notify the individual from whom the fluid or tissue sample was obtained of the result; and

(2) If the test is positive:

(i) Provide a referral for treatment and supportive services;

(ii) Counsel the individual to inform all sexual and needle–sharing partners of the individual’s positive HIV status;

(iii) Offer to assist in notifying the individual’s sexual and needle–sharing partners or refer the individual to the local health officer to assist the individual with notifying the individual’s sexual and needle–sharing partners; and

(iv) If necessary, take action appropriate to comply with § 18–337 of this subtitle.

[(h)] 

Local health officers shall make available to health care providers in their jurisdiction information on referral resources for an individual with an HIV positive status, including counseling, testing, needs assessment, treatment, and support services.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect

October July 1, 2015.

Approved by the Governor, April 14, 2015.