

# HOUSE BILL 737

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CF SB 570

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By: **The Speaker (By Request – Administration)**

Introduced and read first time: January 26, 2021

Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Emergency Services – Exposure to Contagious Diseases and Viruses –**  
3 **Notification and Other Requirements**

4 FOR the purpose of altering the definition of “contagious disease or virus” for the purposes  
5 of certain provisions of law governing the notification of a possible exposure of certain  
6 emergency services personnel to include 2019–nCoV; extending certain notification  
7 requirements regarding possible exposure to a contagious disease or virus to certain  
8 emergency medical services clinicians; requiring that certain emergency medical  
9 services clinicians receive certain training and certain equipment; applying to  
10 agencies that employ certain emergency medical services clinicians certain  
11 requirements regarding the development of certain procedures; authorizing certain  
12 facilities and certain physicians to enter into an agreement with the  
13 State–Designated Health Information Exchange to facilitate the process for  
14 providing certain notices; making conforming changes; defining certain terms;  
15 altering certain definitions; and generally relating to emergency services and  
16 exposure of personnel to contagious diseases and viruses.

17 BY repealing and reenacting, with amendments,  
18 Article – Health – General  
19 Section 18–213, 18–213.1, and 18–213.2  
20 Annotated Code of Maryland  
21 (2019 Replacement Volume and 2020 Supplement)

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

24 **Article – Health General**

25 18–213.

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

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (2) “Contagious disease or virus” means:

2 (i) Human immunodeficiency virus (HIV);

3 (ii) Meningococcal meningitis;

4 (iii) Tuberculosis;

5 (iv) Mononucleosis;

6 (v) Any form of viral hepatitis, including but not limited to hepatitis  
7 A, B, C, D, E, F, and G;

8 (vi) Diphtheria;

9 (vii) Plague;

10 (viii) Hemorrhagic fevers; [or]

11 (ix) Rabies; OR

12 (X) 2019–NCoV.

13 (3) “Correctional institution” means a place of detention or correctional  
14 confinement operated by or for the State or a local government.

15 (4) (i) “Correctional officer” means a member of a correctional unit who  
16 is charged with and actually performs those duties that relate to the investigation, care,  
17 custody, control, or supervision of persons confined to places of incarceration.

18 (ii) “Correctional officer” includes any sheriff, warden,  
19 superintendent, or any other person having an equivalent title.

20 (5) “EMERGENCY MEDICAL SERVICES CLINICIAN (EMS CLINICIAN)”  
21 MEANS AN INDIVIDUAL LICENSED OR CERTIFIED BY THE STATE EMERGENCY  
22 MEDICAL SERVICES BOARD TO PROVIDE EMERGENCY MEDICAL SERVICES.

23 [(5)] (6) “Law enforcement officer” means any person who, in an official  
24 capacity, is authorized by law to make arrests and who is a member of one of the following  
25 law enforcement agencies:

26 (i) The Department of State Police;

27 (ii) The Baltimore City Police Department;

- 1 (iii) The police department, bureau, or force of any county;
- 2 (iv) The police department, bureau, or force of any incorporated city  
3 or town;
- 4 (v) The office of the sheriff of any county;
- 5 (vi) The police department, bureau, or force of any bicounty agency  
6 or constituent institution of the University System of Maryland, Morgan State University,  
7 St. Mary's College, or of any institution under the jurisdiction of the Maryland Higher  
8 Education Commission;
- 9 (vii) The Maryland Transit Administration police force of the  
10 Department of Transportation, the Maryland Transportation Authority Police Force, and  
11 the Maryland Port Administration police force of the Department of Transportation;
- 12 (viii) The law enforcement officers of the Department of Natural  
13 Resources;
- 14 (ix) The Field Enforcement Bureau of the Comptroller's Office;
- 15 (x) The Crofton Police Department;
- 16 (xi) The Intelligence and Investigative Division of the Department of  
17 Public Safety and Correctional Services; or
- 18 (xii) The Ocean Pines Police Department.

19 [(6)] (7) "Medical care facility" means a hospital as defined in § 19-301 of  
20 this article or a health care facility of a correctional institution.

21 (8) "STATE-DESIGNATED HEALTH INFORMATION EXCHANGE"  
22 MEANS THE HEALTH INFORMATION EXCHANGE DESIGNATED FOR THE STATE UNDER  
23 § 19-143 OF THIS ARTICLE.

24 (b) (1) While treating or transporting an ill or injured patient to a medical care  
25 facility or while acting in the performance of duty, if a paid or volunteer fire fighter,  
26 [emergency medical technician, or] rescue squadman, OR EMS CLINICIAN comes into  
27 contact with a patient who is subsequently diagnosed as having a contagious disease or  
28 virus, as a result of information obtained in conjunction with the services provided during  
29 the visit to the facility, the attending physician, medical examiner, a designee of the medical  
30 care facility who receives the patient, the Chief Medical Examiner, or the Chief Medical  
31 Examiner's designee shall notify the fire fighter, [emergency medical technician, or] rescue  
32 squadman, OR EMS CLINICIAN, and the employer or employer's designee of the  
33 individual's possible exposure to the contagious disease or virus.

1           **(2) A MEDICAL CARE FACILITY MAY ENTER INTO AN AGREEMENT**  
2 **WITH THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE TO FACILITATE**  
3 **THE PROCESS OF PROVIDING THE REQUIRED NOTICE.**

4           (c) If, while treating or transporting an ill or injured patient to a medical care  
5 facility or while acting in the performance of duty, a law enforcement officer comes into  
6 contact with a patient who is subsequently diagnosed, as a result of information obtained  
7 in conjunction with the services provided during the visit to the facility, as having a  
8 contagious disease or virus, the attending physician, medical examiner, a designee of the  
9 medical care facility who receives the patient, the Chief Medical Examiner or the Chief  
10 Medical Examiner's designee shall notify the law enforcement officer and the officer's  
11 employer or employer's designee of the officer's possible exposure to the contagious disease  
12 or virus.

13           (d) If, while treating or transporting an ill or injured inmate to a medical care  
14 facility or while acting in the performance of duty, a correctional officer comes into contact  
15 with an inmate who is subsequently diagnosed, as a result of information obtained in  
16 conjunction with the services provided during the visit to the facility, as having a contagious  
17 disease or virus, the attending physician, medical examiner, a designee of the medical care  
18 facility that receives the inmate, the Chief Medical Examiner, or the Chief Medical  
19 Examiner's designee shall notify the correctional officer and the correctional officer's  
20 correctional institution or the correctional institution's designee of the officer's possible  
21 exposure to the contagious disease or virus.

22           (e) The notification required under subsection (b), (c), or (d) of this section shall:

23                   (1) Be made within 48 hours, or sooner, of confirmation of the patient's  
24 diagnosis;

25                   (2) Include subsequent written confirmation of possible exposure to the  
26 contagious disease or virus;

27                   (3) Be conducted in a manner that will protect the confidentiality of the  
28 patient; and

29                   (4) To the extent possible, be conducted in a manner that will protect the  
30 confidentiality of the fire fighter, [emergency medical technician,] rescue squadman, **EMS**  
31 **CLINICIAN**, law enforcement officer, or correctional officer.

32           (f) The written confirmation required under subsection (e)(2) of this section shall  
33 constitute compliance with this section.

34           (g) Each medical care facility shall develop written procedures for the  
35 implementation of this section, and, upon request, make copies available to the local fire  
36 authority, the local fire authority's designee, the local law enforcement authority, the local  
37 law enforcement authority's designee, the correctional officer, or the correctional  
38 institution's designee having jurisdiction.

1 (h) A medical care facility, physician, Chief Medical Examiner, or the Chief  
2 Medical Examiner's designee acting in good faith to provide notification in accordance with  
3 this section may not be liable in any cause of action related to the breach of patient  
4 confidentiality.

5 (i) A medical care facility, physician, Chief Medical Examiner, or the Chief  
6 Medical Examiner's designee acting in good faith to provide notification in accordance with  
7 this section may not be liable in any cause of action for:

8 (1) The failure to give the required notice, if the fire fighter, [emergency  
9 medical technician,] rescue squadman, **EMS CLINICIAN**, law enforcement officer, or  
10 correctional officer fails to properly initiate the notification procedures developed by the  
11 [health] **MEDICAL** care facility under subsection (g) of this section; or

12 (2) The failure of the employer or employer's designee to subsequently  
13 notify the fire fighter, [emergency medical technician,] rescue squadman, **EMS**  
14 **CLINICIAN**, law enforcement officer, or correctional officer of the possible exposure to a  
15 contagious disease or virus.

16 (j) A fire fighter, [emergency medical technician,] rescue squadman, **EMS**  
17 **CLINICIAN**, law enforcement officer, or correctional officer shall receive from their  
18 employers or local governmental bodies, at the expense of the employer or local  
19 governmental body, as part of their training, education on:

20 (1) (i) The routes of transmission of HIV and hepatitis B virus; and

21 (ii) The routes by which a fire fighter, [emergency medical  
22 technician,] rescue squadman, **EMS CLINICIAN**, law enforcement officer, or correctional  
23 officer may be exposed to HIV and hepatitis B virus; and

24 (2) The current Centers for Disease Control and Prevention guidelines for  
25 preventing prehospital exposure to HIV and hepatitis B while rendering emergency  
26 medical care.

27 (k) A fire fighter, [emergency medical technician,] rescue squadman, **EMS**  
28 **CLINICIAN**, law enforcement officer, or correctional officer shall receive from their  
29 employers, associations, or local governmental bodies, at the employers', associations', or  
30 local governmental bodies' expense, equipment recommended by the Centers for Disease  
31 Control and Prevention to protect a fire fighter, [emergency medical technician,] rescue  
32 squadman, **EMS CLINICIAN**, law enforcement officer, or correctional officer from exposure  
33 to HIV and hepatitis B while rendering emergency medical care.

34 (l) (1) The fire department, law enforcement agency, and all other agencies or  
35 organizations employing a fire fighter, [emergency medical technician,] rescue squadman,  
36 **EMS CLINICIAN**, law enforcement officer, or correctional officer shall develop written

1 procedures for the implementation of this section.

2 (2) On request, copies of the procedures developed in this subsection shall  
3 be made available to employees, employee unions, volunteer associations, and the  
4 Secretary.

5 (m) A person under this section may not refuse to treat or transport an individual  
6 because the individual is HIV positive.

7 18–213.1.

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

9 (2) (i) “Body fluids” means:

10 1. Any fluid containing visible blood, semen, or vaginal  
11 secretions; or

12 2. Cerebral spinal fluid, synovial, or amniotic fluid.

13 (ii) “Body fluid” does not include saliva, stool, nasal secretions,  
14 sputum, tears, urine, or vomitus.

15 (3) “Contact exposure” means as between a patient and a sworn member of  
16 the State Fire Marshal’s office:

17 (i) Percutaneous contact with blood or body fluids;

18 (ii) Mucocutaneous contact with blood or body fluids;

19 (iii) Open wound, including dermatitis, exudative lesions, or chapped  
20 skin, contact with blood or body fluids for a prolonged period; or

21 (iv) Intact skin contact with large amounts of blood or body fluids for  
22 a prolonged period.

23 (4) “Contagious disease or virus” means:

24 (i) Human immunodeficiency virus (HIV);

25 (ii) Meningococcal meningitis;

26 (iii) Tuberculosis;

27 (iv) Mononucleosis;

28 (v) Any form of viral hepatitis, including but not limited to hepatitis

1 A, B, C, D, E, F, and G;

2 (vi) Diphtheria;

3 (vii) Plague;

4 (viii) Hemorrhagic fevers; [or]

5 (ix) Rabies; OR

6 (x) 2019-NCOV.

7 (5) "Medical care facility" means a hospital as defined in § 19-301 of this  
8 article or a health care facility of a correctional institution.

9 (6) **"STATE-DESIGNATED HEALTH INFORMATION EXCHANGE"**  
10 **MEANS THE HEALTH INFORMATION EXCHANGE DESIGNATED FOR THE STATE UNDER**  
11 **§ 19-143 OF THIS ARTICLE.**

12 (b) (1) If, while treating or transporting an ill or injured patient to a medical  
13 care facility or while acting in the performance of duty, a sworn member of the State Fire  
14 Marshal's office comes into contact exposure with a patient who is subsequently diagnosed,  
15 as a result of information obtained in conjunction with the services provided during the  
16 visit to the facility, as having a contagious disease or virus, the attending physician,  
17 medical examiner, a designee of the medical care facility who receives the patient, the Chief  
18 Medical Examiner, or the Chief Medical Examiner's designee shall notify the sworn  
19 member of the State Fire Marshal's office and the State Fire Marshal or the State Fire  
20 Marshal's designee of the officer's possible contact exposure to the contagious disease or  
21 virus.

22 (2) **A MEDICAL CARE FACILITY MAY ENTER INTO IN AN AGREEMENT**  
23 **WITH THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE TO FACILITATE**  
24 **THE PROCESS OF PROVIDING THE REQUIRED NOTICE.**

25 (c) The notification required under subsection (b) of this section shall:

26 (1) Be made within 48 hours of confirmation of the patient's diagnosis;

27 (2) Include subsequent written confirmation of possible contact exposure  
28 to the contagious disease or virus;

29 (3) Be conducted in a manner that will protect the confidentiality of the  
30 patient; and

31 (4) To the extent possible, be conducted in a manner that will protect the  
32 confidentiality of the sworn member of the State Fire Marshal's office.

1 (d) The written confirmation required under subsection (c)(2) of this section shall  
2 constitute compliance with this section.

3 (e) Each medical care facility shall develop written procedures for the  
4 implementation of this section, and upon request, make copies available to the State Fire  
5 Marshal's office.

6 (f) A medical care facility, physician, Chief Medical Examiner, or the Chief  
7 Medical Examiner's designee acting in good faith to provide notification in accordance with  
8 this section may not be liable in any cause of action related to the breach of patient  
9 confidentiality.

10 (g) A medical care facility, physician, Chief Medical Examiner, or the Chief  
11 Medical Examiner's designee acting in good faith to provide notification in accordance with  
12 this section may not be liable in any cause of action for:

13 (1) The failure to give the required notice, if the sworn member of the State  
14 Fire Marshal's office fails to properly initiate the notification procedures developed by the  
15 health care facility under subsection (e) of this section; or

16 (2) The failure of the State Fire Marshal or the State Fire Marshal's  
17 designee to subsequently notify the sworn member of the State Fire Marshal's office of the  
18 possible contact exposure to a contagious disease or virus.

19 (h) A sworn member of the State Fire Marshal's office shall receive from the State  
20 Fire Marshal's office, at the expense of the State Fire Marshal's office, as part of the  
21 member's training, education on:

22 (1) (i) The routes of transmission of HIV and hepatitis B virus; and

23 (ii) The routes by which a sworn member of the State Fire Marshal's  
24 office may be exposed to HIV and hepatitis B virus; and

25 (2) The current Centers for Disease Control and Prevention guidelines for  
26 preventing prehospital exposure to HIV and hepatitis B while rendering emergency  
27 medical care.

28 (i) A sworn member of the State Fire Marshal's office shall receive from the State  
29 Fire Marshal's office, at the State Fire Marshal's expense, equipment recommended by the  
30 Centers for Disease Control and Prevention to protect a sworn member of the State Fire  
31 Marshal's office from exposure to HIV and hepatitis B while rendering emergency medical  
32 care.

33 (j) (1) The State Fire Marshal's office shall develop written procedures for the  
34 implementation of this section.



1 (vii) Plague;

2 (viii) Hemorrhagic fevers; [or]

3 (ix) Rabies; OR

4 **(X) 2019–NCoV.**

5 (5) “Correctional institution” means a place of detention or correctional  
6 confinement operated by or for the State or a local government.

7 (6) (i) “Correctional officer” means a member of a correctional unit who  
8 is charged with and actually performs those duties that relate to the investigation, care,  
9 custody, control, or supervision of individuals confined to places of incarceration.

10 (ii) “Correctional officer” includes any sheriff, warden,  
11 superintendent, or other individual having the equivalent title.

12 (7) “First responder” means a:

13 (i) Firefighter;

14 [(ii) Emergency medical technician;]

15 **(II) EMERGENCY MEDICAL SERVICES CLINICIAN (EMS**  
16 **CLINICIAN), AS DEFINED IN § 18–213 OF THIS SUBTITLE;**

17 (iii) Rescue squad member;

18 (iv) Law enforcement officer;

19 (v) Correctional officer; or

20 (vi) Sworn member of the State Fire Marshal’s office.

21 (8) “Law enforcement officer” means any individual who, in an official  
22 capacity, is authorized by law to make arrests and who is a member of one of the following  
23 law enforcement agencies:

24 (i) The Department of State Police;

25 (ii) The Baltimore City Police Department;

26 (iii) The police department, bureau, or force of any county;

1 (iv) The police department, bureau, or force of any incorporated city  
2 or town;

3 (v) The office of the sheriff of any county;

4 (vi) The police department, bureau, or force of any bicounty agency  
5 or constituent institution of the University System of Maryland, Morgan State University,  
6 St. Mary's College, or of any institution under the jurisdiction of the Maryland Higher  
7 Education Commission;

8 (vii) The Maryland Aviation Administration police force of the  
9 Department of Transportation, the Maryland Transit Administration police force of the  
10 Department of Transportation, the Maryland Transportation Authority police force, and  
11 the Maryland Port Administration police force of the Department of Transportation;

12 (viii) The law enforcement officers of the Department of Natural  
13 Resources;

14 (ix) The Field Enforcement Bureau of the Comptroller's Office;

15 (x) The Intelligence and Investigative Division of the Department of  
16 Public Safety and Correctional Services; or

17 (xi) The Maryland Capitol Police of the Department of General  
18 Services.

19 (9) "Medical care facility" means a hospital, or a health care facility of a  
20 correctional institution.

21 (10) "Physician performing a postmortem examination" means any of the  
22 following persons who perform a postmortem examination on a decedent:

23 (i) The Chief Medical Examiner; or

24 (ii) The Chief Medical Examiner's designee.

25 **(11) "STATE-DESIGNATED HEALTH INFORMATION EXCHANGE"**  
26 **MEANS THE HEALTH INFORMATION EXCHANGE DESIGNATED FOR THE STATE UNDER**  
27 **§ 19-143 OF THIS ARTICLE.**

28 (b) **(1)** If, while transporting a person to a medical care facility or while acting  
29 in the performance of duty, a first responder comes into contact exposure while treating or  
30 transporting a person who dies at the scene or while being transported and who is  
31 subsequently determined, as a result of information obtained in conjunction with a  
32 postmortem examination by the Chief Medical Examiner or a designee of the Chief Medical  
33 Examiner to have had a contagious disease or virus at the time of death, the physician  
34 performing the postmortem examination shall notify the first responder and the first

1 responder's employer or the employer's designee of the first responder's possible contact  
2 exposure to the contagious disease or virus.

3 **(2) THE PHYSICIAN MAY ENTER INTO AN AGREEMENT WITH THE**  
4 **STATE-DESIGNATED HEALTH INFORMATION EXCHANGE TO FACILITATE THE**  
5 **PROCESS OF PROVIDING THE REQUIRED NOTICE.**

6 (c) The notification required under subsection (b) of this section shall:

7 (1) Be made within 48 hours of confirmation of the determination that the  
8 deceased person had a contagious disease or virus at the time of death;

9 (2) Include subsequent written confirmation of possible contact exposure  
10 to the contagious disease or virus;

11 (3) Be conducted in a manner that will protect the confidentiality of the  
12 deceased person; and

13 (4) To the extent possible, be conducted in a manner that will protect the  
14 confidentiality of the first responder.

15 (d) The written confirmation required under subsection (c)(2) of this section shall  
16 constitute compliance with this section.

17 (e) A medical care facility or physician performing a postmortem examination  
18 acting in good faith to provide notification in accordance with this section is not liable in  
19 any cause of action related to a breach of patient confidentiality.

20 (f) A medical care facility or physician performing a postmortem examination  
21 acting in good faith to provide notification in accordance with this section is not liable in  
22 any cause of action for:

23 (1) The failure to give the required notice if the first responder fails to  
24 properly initiate the notification procedures developed by the medical care facility and the  
25 Chief Medical Examiner under subsection (g) of this section; or

26 (2) The failure of the employer or the employer's designee to subsequently  
27 notify the first responder of the possible contact exposure to a contagious disease or virus.

28 (g) (1) The State Fire Marshal, the Chief Medical Examiner, and each fire  
29 department, rescue squad company, medical care facility, correctional institution, and law  
30 enforcement agency in the State shall develop written procedures for the implementation  
31 of this section.

32 (2) On request, the State Fire Marshal and each fire department, rescue  
33 squad company, medical care facility, correctional institution, and law enforcement agency  
34 shall make copies of the procedures developed in this subtitle available to employees,

1 employee unions, volunteer associations, and the Secretary.

2 (h) A person covered under subsection (a)(5), (6), (7), (8), (9), and (10) of this  
3 section may not refuse to treat or transport a deceased person because the deceased person  
4 was HIV positive at the time of death.

5 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July  
6 1, 2021.