## **HOUSE BILL 119**

J1 (4lr0158)

## ENROLLED BILL

— Health and Government Operations/Finance —

Introduced by Chair, Health and Government Operations Committee (By Request – Departmental – Health)

Read and	Examine	ed by Pro	oofreaders:			
					Proofre	eader.
					Proofre	eader.
Sealed with the Great Seal and	presente	ed to th	e Governo	r, for his	s approval	l this
day of	at			o'clo	ck,	M.
					Spe	eaker.
	СНАРТЕ	ER	_			
AN ACT concerning						
Public Health – Giving Infan	ts a Futu	ıre Witl	nout Tran	smission	(GIFT) A	$\mathbf{ct}$
FOR the purpose of altering certain for hospitals and health care posts are ports and that certain heat medical laboratories; providing syphilis reports are not disceriminal or administrative accomplete of personal identifying health reporting under certain proving requirements for Hispanian certain proving requirements for Hispanian certain proving the state of the second certain proving under certain proving the second c	providers alth care alth care toverable tion; alter informate visions of IV and sy	for pregress of certain description acquired law; and philis.	nant women in individuous submit ocuments re not admis ain penaltie ired for the	n and new als be incertain bleelated to consider in constitution of the constitution o	borns, included in collood sample certain HIV evidence in to the disciple of HIV and	uding ertain les to <u>V and</u> n any losure AIDS
BY repealing and reenacting, with a	amendmei	nts,				

## EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



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PURPOSE OF INTERVENTION.

1 2 3 4	Article – Health – General Section 18–201.1, 18–202.1, <u>18–215(e)</u> , 18–307, and 18–336 Annotated Code of Maryland (2023 Replacement Volume)
5 6	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
7	Article – Health – General
8	18–201.1.
9 10 11 12 13 14 15	(a) A [physician] HEALTH CARE PROVIDER who has diagnosed [a patient] AN INDIVIDUAL under the [physician's] HEALTH CARE PROVIDER'S care with [human immunodeficiency virus] HIV infection or acquired immunodeficiency syndrome according to the current definition published in the [morbidity and mortality weekly report] MORBIDITY AND MORTALITY WEEKLY REPORT by the Centers for Disease Control and Prevention of the Department of Health and Human Services shall submit immediately a report to the health officer for the county where the [physician] HEALTH CARE PROVIDER cares for that [patient] INDIVIDUAL.
17	(b) The report shall:
18	(1) Be on the form that the Secretary provides;
9	(2) Identify the disease;
20 21	(3) State the name, age, race, sex, and residence address of the [patient; and] INDIVIDUAL;
22 23	(4) STATE THE PREGNANCY STATUS OF THE INDIVIDUAL, IF APPLICABLE; AND
24	[(4)] (5) Be signed by the [physician] HEALTH CARE PROVIDER.
25 26	(c) (1) A [physician] <b>HEALTH CARE PROVIDER</b> shall submit a report as described in subsection (b) of this section to the Secretary within 48 hours of [the]:
27 28	(I) THE birth of an infant whose mother has tested positive for [the human immunodeficiency virus] HIV; AND
29	(II) A PREGNANT WOMAN TESTING POSITIVE FOR HIV, FOR THE

1 (2) If a newborn infant does not become HIV positive after 18 months from 2 the [date that the report required in paragraph (1) of this subsection was submitted] 3 INFANT'S DATE OF BIRTH, the Secretary shall have the newborn infant's name removed 4 from the HIV registry. (d) All [physician] HEALTH CARE PROVIDER reports required under this 5 (1) 6 section are: 7 (i) Confidential and subject to Title 4, Subtitle 1 of this article; and 8 (ii) Not medical records under Title 4, Subtitle 3 of this article, but 9 are subject to the confidentiality requirements of Title 4, Subtitle 1 of this article. 10 The reports and any proceedings, records, or files relating to the reports (2)required under this section are not discoverable and are not admissible in evidence in any 11 12 eivil action CRIMINAL, CIVIL, OR ADMINISTRATIVE ACTION. 13 (3)This subsection does not apply to a disclosure by the Secretary to 14 another governmental agency performing its lawful duties pursuant to State or federal law 15 where the Secretary determines the agency to whom the information is disclosed will maintain the confidentiality of the disclosure. 16 18-202.1. 17 (a) In this section, "institution" includes: 18 19 (1) A hospital; 20 A nursing home; **(2)** A hospice facility; 21(3) 22**(4)** A medical clinic in a correctional facility; 23 An inpatient psychiatric facility; and (5)24(6) An inpatient drug rehabilitation facility. When an institution has an individual in the care of the institution with a 25(b) 26 diagnosis of [human immunodeficiency virus] HIV or acquired immunodeficiency 27 syndrome according to the current definition published in the [morbidity and mortality weekly report] MORBIDITY AND MORTALITY WEEKLY REPORT by the Centers for 28

Disease Control and Prevention, a clinical or infection control practitioner shall submit a report within 48 hours to the health officer for the county where the institution is located.

(c) The report shall:

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18-307.

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1		(1)	Be on the form that the Secretary provides;							
2		(2)	Identify the disease;							
3 4	with the disc	(3) ease;	State	State the name, age, race, sex, and residence address of the individual						
5 6	APPLICABL	(4) E;	STAT	E THE	PREGNANCY	STATUS	OF	THE	INDIVIDU	AL, IF
7		[(4)]	(5)	State the	e name of the a	administrat	ive he	ead of t	he instituti	ion; and
8	[(5)] <b>(6)</b>		State the address of the institution.							
9	(d)	(1)	All in	stitution	reports requir	ed under th	is sec	tion aı	e:	
0			(i)	Confiden	ntial and subje	ct to Title 4	I, Sub	title 1	of this artic	cle; and
$\frac{1}{2}$	are subject t	to the o	(ii) confide		ical records u equirements o		-			cle, but
13 14 15	required under this section are not discoverable and are not admissible in evidence in any									
16 17 18	another governmental agency performing its lawful duties in accordance with State or federal law where the Secretary determines the agency to whom the information is									
20	<u>18–215.</u>									
21 22 23 24 25 26 27 28	information 18–202.1, § 1 personal ide subtitle is g [\$1,000] \$2	ntal un acqui 18–205 ntifyin uilty c 2,000	nit, whered for for § 1 a min for the	no knowing the purp 8–207 of the thinformal isdemeand e first of	r or any other agly and willf boses of HIV chis subtitle to ation under the or and on confense and no	ully disclose and AIDS any person is subtitle continuity is subtitle of the exceeding the exceeding and the exceeding an	es per report who is or othe subjec g [\$5,	rsonal ting un s not a erwise t to a	identifying ider § 18–2 uthorized to in violatior fine not ex	s health 201.1, § coreceive n of this exceeding

30 (a) This section does not apply to a woman who objects to a standard serological syphilis test because the test is against the religious beliefs and practices of the woman.

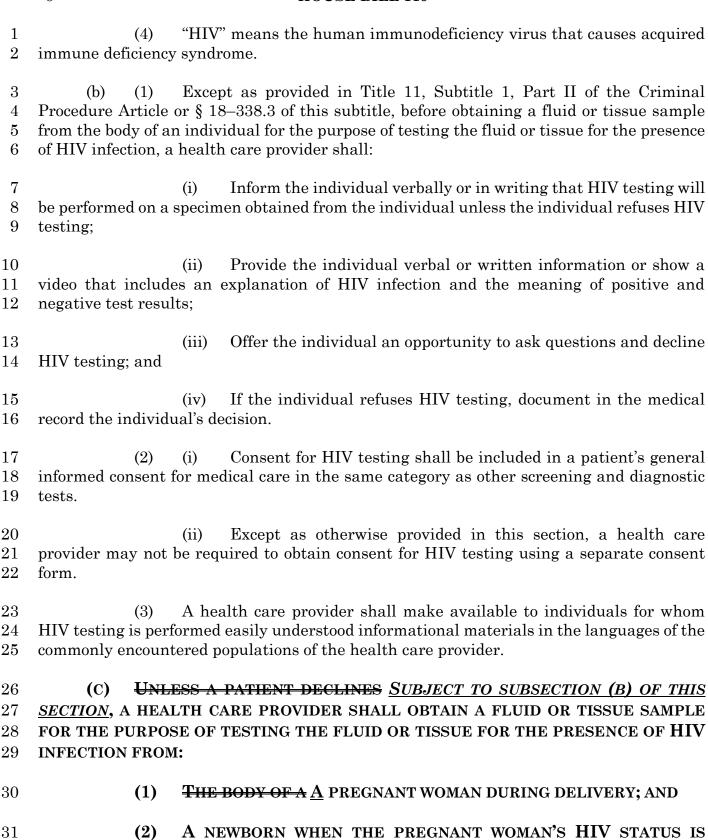
1 (b) (1) The [individual] **HEALTH CARE PROVIDER** attending a woman for 2 pregnancy shall submit to a medical laboratory: 3 A blood sample taken from the woman at the time that the (i) [individual] HEALTH CARE PROVIDER first examines the woman; [and] 4 5 A blood sample taken from the woman [during the third (ii) trimester of the pregnancy IN THE THIRD TRIMESTER AT: 6 7 1. THE PRENATAL VISIT AT 28 WEEKS OF GESTATION; OR 8 2. THE FIRST PRENATAL VISIT AFTER 28 WEEKS OF 9 **GESTATION; AND** 10 (III) 1. A BLOOD SAMPLE TAKEN FROM THE WOMAN WHO DELIVERS A LIVE BORN INFANT AT THE TIME OF DELIVERY; OR 11 12 2. A BLOOD SAMPLE TAKEN FROM THE WOMAN WHO 13 **DELIVERS A STILLBORN INFANT:** 14 Α. AT 20 WEEKS OF GESTATION OR LATER; OR 15 В. WEIGHING AT LEAST 500 GRAMS. 16 (2)The medical laboratory to which a blood sample is submitted shall do a standard serological syphilis test that is approved by the Department. 17 18 (C) A HOSPITAL SHALL DETERMINE THE SYPHILIS SEROLOGIC STATUS OF 19 THE MOTHER BEFORE DISCHARGING THE NEWBORN FOR THE PURPOSES OF 20 NEONATAL EVALUATION AND TREATMENT. 21(D) THE DEPARTMENT MAY ADOPT RULES, REGULATIONS, AND STANDARDS 22 UNDER THIS SECTION. 2318-336. 24In this section the following words have the meanings indicated. (1) (a) 25(2) "Health care facility" has the same meaning stated in § 18–338.2 of this 26 subtitle. 27 "Health care provider" means a physician, nurse, or designee of a health (3)

care facility.

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UNKNOWN.



- [(c)] (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.
- 4 (2) The informed consent for HIV testing document shall be distinct and separate from all other consent forms.
- 6 (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.
- 9 [(d)] (E) An individual's refusal to undergo an HIV test or a positive test result 10 may not be used as the sole basis by an institution or laboratory to deny services or 11 treatment.
- 12 **[(e)] (F)** If the individual is unable to give informed consent, substitute consent 13 may be given under § 5–605 of this article.
- If [(f)] (G) A health care provider who obtains a result from an HIV test conducted in accordance with the provisions of subsection (b) of this section shall:
- 16 (1) Notify the individual from whom the fluid or tissue sample was 17 obtained of the result; and
- 18 (2) If the test is positive:
- 19 (i) Provide a referral for treatment and supportive services;
- 20 (ii) Counsel the individual to inform all sexual and needle—sharing 21 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
- 25 (iv) If necessary, take action appropriate to comply with § 18–337 of 26 this subtitle.
- [(g)] (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 1, 2024.