

131st MAINE LEGISLATURE

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Legislative Document

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H.P. 1334

House of Representatives, December 22, 2023

An Act to Protect Health Care Workers from HIV

(EMERGENCY)

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.

Received by the Clerk of the House on December 20, 2023. Referred to the Committee on Health Coverage, Insurance and Financial Services pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint Rule 401.

R(+ B. Hunt

ROBERT B. HUNT Clerk

Presented by Representative PERRY of Calais.

- 1 **Emergency preamble. Whereas,** acts and resolves of the Legislature do not 2 become effective until 90 days after adjournment unless enacted as emergencies; and
- 3 **Whereas,** health care workers who are exposed to bodily fluids from patients are at 4 high risk of infection; and
- 5 **Whereas,** it is imperative that appropriate treatment following exposure be started as 6 soon as possible, which requires knowledge of the pathogen to which the health care worker 7 may have been exposed; and
- 8 Whereas, this legislation allows for a more rapid determination of whether a patient 9 may be positive for HIV and is necessary as quickly as possible to protect the health care 10 workers in the State; and
- 11 **Whereas,** in the judgment of the Legislature, these facts create an emergency within 12 the meaning of the Constitution of Maine and require the following legislation as 13 immediately necessary for the preservation of the public peace, health and safety; now, 14 therefore,
- 15 Be it enacted by the People of the State of Maine as follows:
- Sec. 1. 5 MRSA §19203-A, sub-§4-A, as enacted by PL 1999, c. 429, §3, is
 amended to read:
- 18 4-A. Occupational exposure in health care setting. When a bona fide occupational 19 exposure occurs in a health care setting, a legal representative or administrator of that health 20 care setting shall seek authorization to test the source patient for HIV must be obtained 21 from that patient if the patient is present or can be contacted at the time of exposure and is capable of providing consent. At the time of exposure, if the source patient is not present 22 23 and can not cannot be contacted or is incapacitated, then any reasonably available member of the following classes of individuals who is present, in descending order of priority, may 24 authorize an HIV test on a blood or tissue sample from the source patient: 25
- A. The patient's legal guardian;

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- B. An individual known to have power of attorney for health care for the patient;
- 28 C. An adult relative, by blood, marriage or adoption;
- D. An adult with whom the patient has a meaningful social and emotional relationship;and
 - E. A physician who is familiar with occupational exposures to HIV.
- The individual authorizing the HIV test must be informed of the nature, reliability and significance of the HIV test and the confidential nature of the test.
- If the person contacted for authorization <u>explicitly</u> refuses to authorize the test, the test may
 not be conducted unless consent is obtained from the source patient or from the court
 pursuant to section 19203-C.
- This subsection does not authorize a person described in paragraphs A to D to receive the test result. Test results must be given to the exposed person, to a personal physician if designated by the exposed person and to either the physician who authorizes the test or the
- 40 health care provider who manages the occupational exposure.

The patient may choose not to be informed about the result of the HIV test. Without express patient authorization, the results of the HIV test and the fact that an HIV test was done as a result of an occupational exposure in a health care setting may not appear in the patient's health care records. The exposed individual's occupational health care record may include documentation of the occupational exposure and, if the record does not reveal the source patient's identity, the results of the source patient's HIV test.

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Sec. 2. 5 MRSA §19203-A, sub-§4-B is enacted to read:

8 <u>4-B. Test without consent.</u> An HIV test may be administered without consent or
 9 authorization if consent has not been obtained following a good faith effort to obtain
 10 consent and at least 8 hours have passed since exposure because:

- 11A. The source patient is incapacitated or is determined by that patient's attending health12care provider to lack the mental capacity to provide such consent;
- B. The source patient is not expected to recover in time for the person who is exposed
 to receive appropriate medical treatment; and
- 15C. There is not a person immediately available who has legal authority to consent in16time for the person who is exposed to receive appropriate medical treatment.
- All other provisions of subsection 4-A regarding the administration of the HIV test and the
 results and documentation of the HIV testing apply to an HIV test conducted pursuant to
 this subsection.
- Emergency clause. In view of the emergency cited in the preamble, this legislation
 takes effect when approved.

SUMMARY

Under current law, if a person, while in the course of employment in a health care setting or as an emergency services worker, is exposed to potentially infectious blood or other bodily fluids of a patient in the course of employment, consent is required of the patient before a test for HIV may be performed. Consent may be provided by certain other individuals if the patient is not present and cannot be contacted or is incapacitated.

This bill clarifies that the consent must be sought by a legal representative or administrator of the health care setting and that another individual who can authorize consent must be present. This bill also allows an HIV test to be conducted without consent if, despite a good faith effort to obtain consent, at least 8 hours have passed since exposure and:

- 33 1. The patient is incapacitated or is determined by that patient's attending health care
 34 provider to lack the mental capacity to provide such consent;
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 2. The patient is not expected to recover in time for the person who is exposed to
 36 receive appropriate medical treatment; and
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 3. There is not a person immediately available who has legal authority to consent in
 38 time for the person who is exposed to receive appropriate medical treatment.