## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## **HOUSE BILL**

No. 1847 Session of 2013

INTRODUCED BY V. BROWN, ROCK, EVERETT, ROAE, THOMAS, ENGLISH, FLYNN, DONATUCCI, KINSEY, COHEN, CALTAGIRONE, MILLARD, D. COSTA, NEILSON AND CLAY, NOVEMBER 19, 2013

AS REPORTED FROM COMMITTEE ON JUDICIARY, HOUSE OF REPRESENTATIVES, AS AMENDED, MARCH 11, 2014

## AN ACT

Amending the act of November 29, 1990 (P.L.585, No.148), entitled "An act providing for confidentiality of certain records; providing for the authorized sharing of certain information; providing for written consent prior to an HIVrelated test, with certain exceptions; providing for civil 5 immunity for certain licensed physicians; providing for 6 protective procedures and equipment; and creating a civil 7 cause of action," further providing for definitions, for certification of significant exposure and testing procedures, 9 for confidentiality of records and for court order. FURTHER 10 PROVIDING FOR LEGISLATIVE INTENT AND FOR DEFINITIONS; 11 PROVIDING FOR CERTIFICATION OF SIGNIFICANT EXPOSURE OF 12 13 INMATE'S BLOOD OR BODILY FLUID; AND FURTHER PROVIDING FOR COURT ORDER. 14 15 The General Assembly of the Commonwealth of Pennsylvania 16 hereby enacts as follows: Section 1. Section 3 of the act of November 29, 1990 17 <--(P.L.585, No.148), known as the Confidentiality of HIV Related 18 19 Information Act, is amended by adding definitions to read: 20 Section 3. Definitions. 21 The following words and phrases when used in this act shall 22 have the meanings given to them in this section unless the 23 context clearly indicates otherwise:

- 1 \* \* \*
- 2 <u>"Blood-borne pathogen."</u> A pathogenic microorganism which is
- 3 present in human blood and can cause disease in humans. The term
- 4 <u>includes hepatitis B virus (HBV), hepatitis C virus (HCV) and</u>
- 5 human immunodeficiency virus (HIV).
- 6 \* \* \*
- 7 <u>"Community contract facility." A residential facility</u>
- 8 operated by a private vendor that both:
- 9 <u>(1) Houses offenders pursuant to a contract with the</u>
- 10 Department of Corrections.
- 11 (2) Is operated in accordance with 61 Pa.C.S. Ch. 50
- 12 <u>(relating to community corrections centers and community</u>
- 13 corrections facilities).
- 14 "Community corrections center." A residential facility
- 15 operated by the Department of Corrections that houses inmates of
- 16 the Department of Corrections, parolees, parole violators or all-
- 17 of the preceding.
- 18 \* \* \*
- 19 "Corrections contractor." A person who provides services to
- 20 the Department of Corrections pursuant to a contract with the
- 21 Department of Corrections or as an employee of such a person.
- 22 "Corrections employee." Any employee of a department or
- 23 agency, responsible for operating a corrections facility in the
- 24 Commonwealth of Pennsylvania.
- 25 "Corrections facility." A State correctional institution,
- 26 community corrections center or community contract facility.
- 27 <u>"Corrections volunteer." A person who, without financial</u>
- 28 remuneration, provides services to inmates housed in a
- 29 corrections facility.
- 30 \* \* \*

"High-risk worker." An individual health care 1 first responder, corrections employee, corrections contractor 2 corrections volunteer. \* \* \* 4 5 Section 2. Section 6 of the act, amended July 7, 2011 (P.L.274, No.59), is amended to read: 6 Section 6. Certification of significant exposure and testing 7 8 procedures. 9 (a) Physician's evaluation of significant exposure. 10 (1) Whenever [an individual health care provider or first responder] a high-risk worker experiences an exposure 11 to a patient's blood or bodily fluids during the course of 12 13 rendering health care or during the course of his or her 14 occupational services, the individual may request an 15 evaluation of the exposure, by a physician, to determine if 16 it is a significant exposure as defined in this act. No physician shall certify his own significant exposure or that 17 18 of any of his employees. Such requests shall be made within 19 72 hours of the exposure. 20 (2) Within 72 hours of the request, the physician shall make written certification of the significance of the 21 22 exposure. (3) If the physician determines that the individual-23 24 health care provider or first responder has experienced a 25 significant exposure, the physician shall offer the exposed 26 individual the opportunity to undergo testing, following the 27

- procedure outlined in section 5.
- 28 (b) Opportunity for source patient to consent. -
- 29 (1) In the event that an exposed [individual health care provider or first responder] high risk worker is certified to 30

have experienced a significant exposure and has submitted to an HIV related test, no testing shall be performed on a source patient's available blood unless the certifying physician provides a copy of the written certification of significant exposure to the source patient's physician or institutional health care provider in possession of the available blood and the source patient's physician or institutional health care provider has made a good faith effort to:

(i) Notify the source patient or substitute decisionmaker of the significant exposure.

(ii) Seek the source [patient's] patient or substitute decisionmaker's voluntary informed consent to the HIV related testing as specified in section 5(a).

(2) The source patient's physician or institutional health care provider that receives a certification of significant exposure shall begin to comply with the requestwithin 24 hours. If the source patient's physician or institutional health care provider is unable to secure the source [patient's] patient or substitute decisionmaker's consent because the source patient or the source patient's substitute decisionmaker refuses to grant informed consent or [the source patient] cannot be located, the source patient's physician or institutional health care provider shall arrange for an entry to be placed on the source patient's medical record to that effect. If these procedures are followed and the entry is made on the source patient's medical record, then HIV related tests shall be performed on the source patient's available blood if requested by the exposed [individual health care provider or first responder] high-

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2	(2.1) If the source patient has provided a blood sample,
3	but does not consent to blood-borne pathogens testing, the
4	correctional facility shall ensure that the blood is tested
5	for blood-borne pathogens if the high-risk worker requests
6	the test, provided all of the following criteria are met:
7	(i) The high-risk worker and the Department of
8	Corrections have documented exposure to blood or body
9	fluids during performance of the high risk worker's
10	services.
11	(ii) A licensed physician has determined that a
12	significant exposure has occurred as is prescribed in
13	this section and has documented that blood borne pathogen
14	test results are needed for beginning, modifying,
15	continuing or discontinuing medical treatment for the
16	high risk worker as recommended by the most current
17	guidelines of the United States Public Health Service.
18	(iii) The high risk worker provides a blood sample
19	for testing for blood borne pathogens within 72 hours or
20	as soon as feasible.
21	(iv) The correctional facility asks the source
22	patient to consent to a test for blood borne pathogens
23	and the source patient does not consent.
24	(3) The physician ordering the HIV related test on a
25	source patient's available blood on behalf of the source
26	patient's physician or institutional health care provider
27	shall comply with section 5(c) through (e).
28	(4) The [health care provider or first responder] high
29	<u>risk worker</u> shall be notified of the results of the HIV-
30	related test on the source patient's blood if the [health-

- 1 care provider or first responder's] <u>high-risk worker's</u>
- 2 baseline HIV related test is negative. Further disclosure of
- 3 the test results is prohibited unless authorized under-
- 4 section 7.
- 5 Section 3. Section 7(a) of the act is amended by adding-
- 6 paragraphs to read:
- 7 Section 7. Confidentiality of records.
- 8 (a) Limitations on disclosure. No person or employee, or
- 9 agent of such person, who obtains confidential HIV related
- 10 information in the course of providing any health or social
- 11 service or pursuant to a release of confidential HIV-related
- 12 information under subsection (c) may disclose or be compelled to-
- 13 disclose the information, except to the following persons:
- 14 <del>(1) The subject.</del>
- 15 (2) The physician who ordered the test, or the
- 16 physician's designee.
- 17 (3) Any person specifically designated in a written
- 18 consent as provided for in subsection (c).
- 19 <del>(4) An agent, employee or medical staff member of a</del>
- 20 health care provider, when the health care provider has
- 21 received confidential HIV-related information during the-
- 22 course of the subject's diagnosis or treatment by the health
- 23 care provider, provided that the agent, employee or medical
- 24 staff member is involved in the medical care or treatment of
- 25 the subject. Nothing in this paragraph shall be construed to
- 26 require the segregation of confidential HIV related
- 27 <u>information from a subject's medical record.</u>
- 28 (5) A peer review organization or committee as defined
- 29 in the act of July 20, 1974 (P.L.564, No.193), known as the
- 30 Peer Review Protection Act, a nationally recognized

1 accrediting agency, or as otherwise provided by law, any 2 Federal or State government agency with oversight 3 responsibilities over health care providers. (6) Individual health care providers involved in the 4 care of the subject with an HIV-related condition or a 5 positive test, when knowledge of the condition or test result-6 is necessary to provide emergency care or treatment-8 appropriate to the individual; or health care providers 9 consulted to determine diagnosis and treatment of the 10 individual. 11 (7) An insurer, to the extent necessary to reimburse 12 health care providers or to make any payment of a claim-13 submitted pursuant to an insured's policy. 14 (8) The department and persons authorized to gather, 15 transmit or receive vital statistics under the act of June 29, 1953 (P.L.304, No.66), known as the Vital Statistics Law 16 of 1953. 17 18 (9) The department and local boards and departments of 19 health, as authorized by the act of April 23, 1956 (1955-20 P.L.1510, No.500), known as the Disease Prevention and Control Law of 1955. 21 22 (10) A person allowed access to the information by a 23 court order issued pursuant to section 8. 24 (11) A funeral director responsible for the acceptance 25 and preparation of the deceased subject. 26 (12) Employees of county mental health/mental-27 retardation agencies, county children and youth agencies, 28 county juvenile probation departments, county or Statefacilities for delinquent youth, and contracted residential 29

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providers of the above named entities receiving or

1	contemplating residential placement of the subject, who:
2	(i) generally are authorized to receive medical
3	information; and
4	(ii) are responsible for ensuring that the subject
5	receives appropriate health care; and
6	(iii) have a need to know the HIV related
7	information in order to ensure such care is provided.
8	The above named entities may release the information to a
9	court in the course of a dispositional proceeding under 42
10	Pa.C.S. §§ 6351 (relating to disposition of dependent child)
11	and 6352 (relating to disposition of delinquent child) when
12	it is determined that such information is necessary to meet
13	the medical needs of the subject.
14	(13) A person authorized to receive the information
15	pursuant to this section.
16	(14) A high risk worker who has suffered a significant
17	exposure in the course of his or her occupational duties in a
18	corrections facility or county jail.
19	(15) The Pennsylvania State Police, local police
20	department, other law enforcement agency, Office of Attorney
21	General or office of the district attorney or an agency
22	investigating or prosecuting an allegation that an inmate of
23	a corrections facility or county jail has committed an
24	offense under one or more of the following:
25	(i) 18 Pa.C.S. § 2703 (relating to assault by
26	<del>prisoner).</del>
27	(ii) 18 Pa.C.S. § 2703.1 (relating to aggravated
28	harassment by prisoner).
29	(iii) 18 Pa.C.S. § 2704 (relating to assault by life
30	<del>prisoner).</del>

- 1 \* \* \*
- 2 Section 4. Section 8(c) of the act is amended to read:
- 3 Section 8. Court order.
- 4 \* \* \*
- 5 (c) Compelling need. In assessing compelling need for
- 6 subsections (a) and (b), the court shall weigh the need for-
- 7 disclosure against the privacy interest of the individual and
- 8 the public interests which may be harmed by disclosure. A high-
- 9 <u>risk worker who has suffered a significant exposure in the</u>
- 10 course of his or her occupational duties in a correctional
- 11 <u>facility or county jail shall be presumed to have a compelling</u>
- 12 <u>need for the information that cannot be accommodated by other</u>
- 13 means. The presumption can only be overcome by clear and
- 14 <u>convincing evidence to the contrary.</u>
- 15 \* \* \*
- 16 Section 5. This act shall take effect in 60 days.
- 17 SECTION 1. SECTION 2 OF THE ACT OF NOVEMBER 29, 1990
- 18 (P.L.585, NO.148), KNOWN AS THE CONFIDENTIALITY OF HIV-RELATED

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- 19 INFORMATION ACT, IS AMENDED BY ADDING A SUBSECTION TO READ:
- 20 SECTION 2. LEGISLATIVE INTENT.
- 21 \* \* \*
- 22 <u>(E) INTENT WITH RESPECT TO CORRECTIONS STAFF.--IT IS THE</u>
- 23 INTENT OF THE GENERAL ASSEMBLY TO PROVIDE A MECHANISM FOR
- 24 CORRECTIONS STAFF MEMBERS WHO EXPERIENCE A SIGNIFICANT EXPOSURE
- 25 OF AN INMATE'S BLOOD AND/OR BODILY FLUIDS TO LEARN OF THE
- 26 INMATE'S STATUS REGARDING INFECTION OF HIV, HEPATITIS B OR
- 27 HEPATITIS C. THIS KNOWLEDGE WILL ENABLE A CORRECTIONS STAFF
- 28 MEMBER TO MAKE INFORMED DECISIONS WITH RESPECT TO MODES AND
- 29 DURATION OF THERAPY AS WELL AS MEASURES TO REDUCE THE LIKELIHOOD
- 30 OF TRANSMITTING INFECTION TO OTHERS.

- 1 SECTION 2. THE DEFINITIONS OF "AVAILABLE BLOOD" AND
- 2 "SIGNIFICANT EXPOSURE" IN SECTION 3 OF THE ACT ARE AMENDED AND
- 3 THE SECTION IS AMENDED BY ADDING DEFINITIONS TO READ:
- 4 SECTION 3. DEFINITIONS.
- 5 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ACT SHALL
- 6 HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
- 7 CONTEXT CLEARLY INDICATES OTHERWISE:
- 8 \* \* \*
- 9 "AVAILABLE BLOOD." THE TERM MEANS:
- 10 (1) BLOOD THAT IS IN THE POSSESSION OF THE INSTITUTIONAL
- 11 HEALTH CARE PROVIDER OR THE SOURCE PATIENT'S PHYSICIAN
- 12 PURSUANT TO A VALID AUTHORIZATION.
- 13 (2) FOR PURPOSES OF SECTION 6.1, BLOOD THAT IS IN
- 14 POSSESSION OF A CORRECTIONAL FACILITY PURSUANT TO MEDICAL
- 15 CARE PROVIDED TO THE INMATE PRIOR TO SIGNIFICANT EXPOSURE, AS
- 16 DEFINED IN PARAGRAPH (2) OF THE DEFINITION OF "SIGNIFICANT
- 17 EXPOSURE" IN THIS SECTION.
- 18 \* \* \*
- 19 "CORRECTIONAL FACILITY." A STATE OR A COUNTY CORRECTIONAL
- 20 INSTITUTION. THE TERM INCLUDES A COMMUNITY CORRECTIONS FACILITY
- 21 OR COMMUNITY CORRECTIONS CENTER AS DEFINED IN 61 PA.C.S. § 5001
- 22 (RELATING TO DEFINITIONS).
- 23 "CORRECTIONS STAFF MEMBER." AN INDIVIDUAL WHO PROVIDES
- 24 HEALTH CARE, OCCUPATIONAL OR OTHER SERVICES TO INMATES AT A
- 25 CORRECTIONAL FACILITY. THE TERM INCLUDES AN INDIVIDUAL WHO IS:
- 26 (1) PAID BY THE COMMONWEALTH OR A COUNTY;
- 27 (2) PAID BY A PRIVATE ENTITY WHICH HAS A CONTRACT WITH
- 28 THE COMMONWEALTH OR A COUNTY; OR
- 29 (3) A VOLUNTEER.
- 30 \* \* \*

1	"SIGNIFICANT EXPOSURE." THE TERM MEANS:
2	(1) DIRECT CONTACT WITH BLOOD OR BODY FLUIDS OF A
3	PATIENT IN A MANNER WHICH, ACCORDING TO THE MOST CURRENT
4	GUIDELINES OF THE CENTERS FOR DISEASE CONTROL, IS CAPABLE OF
5	TRANSMITTING HUMAN IMMUNODEFICIENCY VIRUS, INCLUDING, BUT NOT
6	LIMITED TO, A PERCUTANEOUS INJURY (E.G., A NEEDLE STICK OR
7	CUT WITH A SHARP OBJECT), CONTACT OF MUCOUS MEMBRANES OR
8	CONTACT OF SKIN (ESPECIALLY WHEN THE EXPOSED SKIN IS CHAPPED,
9	ABRADED OR AFFLICTED WITH DERMATITIS) OR IF THE CONTACT IS
10	PROLONGED OR INVOLVES AN EXTENSIVE AREA.
11	(2) FOR PURPOSES OF SECTION 6.1, DIRECT CONTACT WITH
12	BLOOD OR BODILY FLUIDS OF AN INMATE IN A CORRECTIONAL
13	FACILITY IN A MANNER WHICH:
14	(I) ACCORDING TO THE MOST CURRENT GUIDELINES OF THE
15	CENTERS FOR DISEASE CONTROL, IS CAPABLE OF TRANSMITTING
16	HIV, INCLUDING, BUT NOT LIMITED TO, A PERCUTANEOUS
17	INJURY, THAT IS, A NEEDLE STICK OR CUT WITH A SHARP
18	OBJECT, CONTACT WITH MUCOUS MEMBRANES OR CONTACT OF SKIN,
19	ESPECIALLY WHEN THE SKIN IS CHAPPED, ABRADED OR AFFLICTED
20	WITH DERMATITIS, OR IF THE CONTACT IS PROLONGED OR
21	INVOLVES AN EXTENSIVE AREA; OR
22	(II) IS CAPABLE OF TRANSMITTING HEPATITIS B VIRUS OR
23	HEPATITIS C VIRUS.
24	* * *
25	SECTION 3. THE ACT IS AMENDED BY ADDING A SECTION TO READ:
26	SECTION 6.1. CERTIFICATION OF SIGNIFICANT EXPOSURE OF INMATE'S
27	BLOOD OR BODILY FLUID.
28	(A) PHYSICIAN'S EVALUATION OF SIGNIFICANT EXPOSURE
29	(1) WHENEVER A CORRECTIONS STAFF MEMBER EXPERIENCES AN
30	EXPOSURE TO AN INMATE'S BLOOD OR BODILY FLUIDS DURING THE

- 1 COURSE OF RENDERING HEALTH CARE, OCCUPATIONAL SERVICES OR
- 2 OTHER SERVICES, THE INDIVIDUAL MAY REQUEST AN EVALUATION OF
- THE EXPOSURE, BY A PHYSICIAN, TO DETERMINE IF IT IS A
- 4 <u>SIGNIFICANT EXPOSURE AS DEFINED IN THIS ACT. NO PHYSICIAN</u>
- 5 SHALL CERTIFY THE PHYSICIAN'S OWN SIGNIFICANT EXPOSURE OR
- 6 THAT OF ANY OF THE PHYSICIAN'S EMPLOYEES. REQUESTS MUST BE
- 7 MADE WITHIN 72 HOURS OF THE EXPOSURE.
- 8 (2) WITHIN 72 HOURS OF THE REQUEST, THE PHYSICIAN SHALL
- 9 MAKE WRITTEN CERTIFICATION OF THE SIGNIFICANCE OF THE
- 10 EXPOSURE.
- 11 (3) IF THE PHYSICIAN DETERMINES THAT THE INDIVIDUAL HAS
- 12 <u>EXPERIENCED A SIGNIFICANT EXPOSURE, THE PHYSICIAN SHALL OFFER</u>
- THE EXPOSED INDIVIDUAL THE OPPORTUNITY TO UNDERGO TESTING FOR
- 14 HIV, FOLLOWING THE PROCEDURE OUTLINED IN SECTION 5.
- 15 (B) USE OF AVAILABLE BLOOD. -- IN THE EVENT THAT THE INMATE
- 16 DOES NOT CONSENT TO A TESTING OF THE INMATE'S BLOOD FOR HIV,
- 17 HEPATITIS B OR HEPATITIS C AFTER THE OCCURRENCE OF THE
- 18 SIGNIFICANT EXPOSURE TO A CORRECTIONS STAFF MEMBER, THE
- 19 CORRECTIONAL FACILITY SHALL TEST THE INMATE'S AVAILABLE BLOOD
- 20 FOR HIV, HEPATITIS B AND HEPATITIS C IF ALL OF THE FOLLOWING
- 21 CONDITIONS ARE MET:
- 22 (1) THE CORRECTIONS STAFF MEMBER REQUESTS THAT THE
- 23 INMATE'S BLOOD BE TESTED FOR HIV, HEPATITIS B OR HEPATITIS C.
- 24 (2) A SIGNIFICANT EXPOSURE TO THE INMATE'S BLOOD HAS
- 25 BEEN DOCUMENTED BY A PHYSICIAN IN ACCORDANCE WITH SUBSECTION
- 26 (A).
- 27 (3) A PHYSICIAN DOCUMENTED THAT THE RESULTS OF TESTS ON
- THE INMATE'S BLOOD ARE NEEDED TO TREAT THE INDIVIDUAL AS
- 29 RECOMMENDED BY THE MOST CURRENT GUIDELINES OF THE UNITED
- 30 STATES PUBLIC HEALTH SERVICE.

- 1 (4) THE INDIVIDUAL PROVIDES A BLOOD SAMPLE WITHIN 72
- 2 HOURS, OR AS SOON AS PRACTICABLE, WHICHEVER IS SOONER.
- 3 (C) IF INMATE CONSENTS TO TESTING OF BLOOD. -- THE INMATE
- 4 SHALL BE GIVEN THE OPPORTUNITY TO CONSENT TO A TESTING OF THE
- 5 INMATE'S BLOOD AFTER A SIGNIFICANT EXPOSURE.
- 6 (D) TEST RESULTS. -- THE FOLLOWING ARE AUTHORIZED TO RECEIVE
- 7 THE RESULTS OF THE TESTING ON THE INMATE'S BLOOD AFTER A
- 8 SIGNIFICANT EXPOSURE OCCURS:
- 9 (1) THE CORRECTIONS STAFF MEMBER.
- 10 (2) THE INMATE.
- 11 (3) THE ATTORNEY FOR THE COMMONWEALTH, IF THE
- 12 <u>SIGNIFICANT EXPOSURE IS ALLEGED TO BE A VIOLATION OF AN</u>
- OFFENSE SET FORTH IN 18 PA.C.S. (RELATING TO CRIMES AND
- OFFENSES).
- 15 (4) THE PHYSICIAN SET FORTH IN SUBSECTION (B) AND ANY
- 16 OTHER PHYSICIAN OR HEALTH CARE PROVIDER WHO IS INVOLVED WITH
- 17 TREATMENT OF THE INDIVIDUAL OR INMATE.
- 18 (5) WITH RESPECT TO A POSITIVE TEST FOR HIV, THE
- 19 DEPARTMENT AND LOCAL BOARDS AND DEPARTMENTS OF HEALTH, AS
- 20 AUTHORIZED BY THE ACT OF APRIL 23, 1956 (1955 P.L.1510,
- 21 NO.500), KNOWN AS THE DISEASE PREVENTION AND CONTROL LAW OF
- 22 1955.
- 23 (6) WITH RESPECT TO A POSITIVE TEST FOR HIV, THE
- DEPARTMENT AND PERSONS AUTHORIZED TO GATHER, TRANSMIT OR
- 25 RECEIVE VITAL STATISTICS UNDER THE ACT OF JUNE 29, 1953
- 26 (P.L.304, NO.66), KNOWN AS THE VITAL STATISTICS LAW OF 1953.
- (E) IMMUNITY FOR GOOD FAITH CONDUCT.--THE FOLLOWING APPLY:
- 28 (1) THE PHYSICIAN WHO CERTIFIES THAT A SIGNIFICANT
- 29 EXPOSURE HAS OCCURRED AS PROVIDED IN THIS SECTION SHALL NOT
- 30 BE SUBJECT TO CIVIL LIABILITY IF ACTING IN THE GOOD FAITH AND

- 1 REASONABLE BELIEF THAT THE DOCUMENTATION OF SIGNIFICANT
- 2 EXPOSURE WAS APPROPRIATE AND CONSISTENT WITH THIS SECTION.
- 3 (2) PHYSICIANS, HEALTH CARE PROVIDERS AND EMPLOYEES OF A
- 4 CORRECTIONAL FACILITY SHALL BE IMMUNE FOR ACTS COMMITTED IN
- 5 GOOD FAITH TO IMPLEMENT THE PROVISIONS OF THIS SECTION.
- 6 (F) CONSTRUCTION. -- THIS SECTION SHALL NOT BE CONSTRUED TO
- 7 PRECLUDE OR LIMIT ANY OTHER TESTING OF AN INMATE'S BLOOD THAT IS
- 8 OTHERWISE LAWFULLY PERMITTED BY SEARCH WARRANT, COURT ORDER,
- 9 <u>STATUTE OR COMMON LAW.</u>
- 10 SECTION 4. SECTION 8(C) OF THE ACT IS AMENDED TO READ:
- 11 SECTION 8. COURT ORDER.
- 12 \* \* \*
- 13 (C) COMPELLING NEED. -- IN ASSESSING COMPELLING NEED FOR
- 14 SUBSECTIONS (A) AND (B), THE COURT SHALL WEIGH THE NEED FOR
- 15 DISCLOSURE AGAINST THE PRIVACY INTEREST OF THE INDIVIDUAL AND
- 16 THE PUBLIC INTERESTS WHICH MAY BE HARMED BY DISCLOSURE. IN THE
- 17 EVENT THE COURT DETERMINES THAT A CORRECTIONS STAFF MEMBER IS
- 18 SEEKING ACCESS TO CONFIDENTIAL HIV-RELATED INFORMATION DUE TO A
- 19 SIGNIFICANT EXPOSURE TO AN INMATE'S BLOOD UNDER PARAGRAPH (2) OF
- 20 THE DEFINITION OF "SIGNIFICANT EXPOSURE" IN SECTION 3, THERE
- 21 SHALL BE A PRESUMPTION OF COMPELLING NEED. THE PRESUMPTION MAY
- 22 BE OVERCOME BY CLEAR AND CONVINCING EVIDENCE.
- 23 \* \* \*
- 24 SECTION 5. THE AMENDMENT OR ADDITION OF SECTIONS 2(E), 3,
- 25 6.1 AND 8(C) OF THE ACT SHALL APPLY TO A SIGNIFICANT EXPOSURE
- 26 OCCURRING ON OR AFTER THE EFFECTIVE DATE OF THIS SECTION.
- 27 SECTION 6. THIS ACT SHALL TAKE EFFECT IN 60 DAYS.