

Rep. Mary E. Flowers

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09400HB4306ham004 LRB094 16161 LJB 55164 a 1 AMENDMENT TO HOUSE BILL 4306 2 AMENDMENT NO. . Amend House Bill 4306, AS AMENDED, by 3 replacing everything after the enacting clause with the 4 following: "Section 5. The Perinatal HIV Prevention Act is amended by 5 6 changing Sections 5 and 10 and by adding Sections 15, 20, 25, 30, and 35 as follows: 8 (410 ILCS 335/5) Sec. 5. Definitions. In this Act: 9 "Department" means the Department of Public Health. 10 "Health care professional" means a physician licensed to 11 practice medicine in all its branches, a physician assistant 12 who has been delegated the provision of health services by his 13 or her supervising physician, or an advanced practice 14 15 registered nurse who has a written collaborative agreement with 16 a collaborating physician that authorizes the provision of health services. 17 18 "Health care facility" or "facility" means any hospital or other institution that is licensed or otherwise authorized to 19 deliver health care services. 20 21 "Health care services" means any prenatal medical care or 22 labor or delivery services to a pregnant woman and her newborn infant, including hospitalization. 23

(Source: P.A. 93-566, eff. 8-20-03.)

1 (410 ILCS 335/10)

- Sec. 10. HIV counseling and <u>recommendation</u> offer of HIV testing required.
- (a) Every health care professional who provides health care services to a pregnant woman shall provide the woman with HIV counseling and recommend offer HIV testing, unless she has already received an HIV test during pregnancy. HIV testing shall be provided with the woman's consent. A health care professional shall provide the counseling and recommend offer the testing as early in the woman's pregnancy as possible. For women at continued risk of exposure to HIV infection in the judgment of the health care professional, a repeat test should be recommended offered late in pregnancy or at the time of labor and delivery. The health care professional shall inform the pregnant woman that, should she refuse HIV testing during pregnancy, her newborn infant will be tested for HIV. The counseling and recommendation offer of testing shall be documented in the woman's medical record.
 - (b) Every health care professional or facility that cares for a pregnant woman during labor or delivery shall provide the woman with HIV counseling and recommend offer HIV testing. HIV testing shall be provided with the woman's consent. No counseling or offer of testing is required if already provided during the woman's pregnancy. The counseling and offer of testing shall be documented in the woman's medical record. The health care facility shall adopt a policy that provides that as soon as possible within medical standards after the infant's birth, the mother's HIV test result, if available, shall be noted in the newborn infant's medical record. It shall also be noted in the newborn infant's medical record if the mother's HIV test result is not available because she has not been tested or has declined testing. Any testing or test results shall be documented in accordance with the AIDS Confidentiality

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- (c) Every health care professional or facility caring for a newborn infant shall, upon delivery or as soon as possible within medical standards 48 hours after the infant's birth, provide counseling to the parent or guardian of the infant and perform rapid HIV testing, when the HIV status of the infant's mother is unknown, if the parent or quardian does not refuse. The health care professional or facility shall document in the woman's medical record that counseling and the offer of testing were given, and that no written refusal was given.
- (d) The counseling required under this Section must be provided in accordance with the AIDS Confidentiality Act and must include the following:
 - (1) For the health of the pregnant woman, the voluntary nature of the testing and the The benefits of HIV testing, for the pregnant woman, including the prevention of transmission.
 - (2) The benefit of HIV testing for the newborn infant, including interventions to prevent HIV transmission.
 - (3) The side effects of interventions to prevent HIV transmission.
 - The statutory confidentiality provisions that relate to HIV and acquired immune deficiency syndrome ("AIDS") testing.
 - (5) The voluntary nature of the testing, including the opportunity to refuse testing of a newborn infant in writing.
- (e) All counseling and testing must be performed in accordance with the standards set forth in the AIDS Confidentiality Act, including the written informed consent provisions of Sections 4, 7, and 8 of that Act, with the exception of the requirement of consent for testing of newborn infants. Consent for testing of a newborn infant shall be presumed when a health care professional or health care

- facility seeks to perform a test on a newborn infant whose 1
- 2 mother's HIV status is not known, provided that the counseling
- 3 required under subsection (d) has taken place and the newborn
- 4 infant's parent or quardian has not indicated in writing that
- he or she refuses to allow the newborn infant to receive HIV 5
- 6 testing.
- (f) The Illinois Department of Public Health shall adopt 7
- 8 necessary rules to implement this Act.
- (Source: P.A. 93-566, eff. 8-20-03.) 9
- (410 ILCS 335/15 new) 10
- Sec. 15. Reporting. 11
- (a) A health care facility shall adopt a policy that 12
- 13 provides that a report of a preliminarily HIV-positive woman
- 14 and a report of a preliminarily HIV-exposed newborn infant
- identified by a rapid HIV test conducted during labor and 15
- delivery or after delivery shall be made to the Department's 16
- 17 Perinatal HIV Hotline within 24 hours after birth. Section 15
- of the AIDS Confidentiality Act applies to reporting under this 18
- 19 Act, except for willful and wanton misconduct.
- 20 (b) The Department shall adopt rules specifying the
- information required in reporting the preliminarily 21
- HIV-positive woman and preliminarily HIV-exposed newborn 22
- infant and the method of reporting. In adopting the rules, the 23
- 24 Department shall consider the need for information,
- 25 protections for the privacy and confidentiality of the infant
- and parents, the need to provide access to care and follow-up 26
- 27 services to the infant, and procedures for destruction of
- 28 records maintained by the Department if, through subsequent HIV
- testing, the woman or newborn infant is found to be 29
- 30 HIV-negative.
- (c) The confidentiality provisions of the AIDS 31
- 32 Confidentiality Act shall apply to the reports of cases of
- perinatal HIV made pursuant to this Section. 33

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1	(d) Health care facilities shall monthly report aggregate
2	statistics to the Department that include the number of
3	infected women who presented with known HIV status, the number
4	of pregnant women rapidly tested for HIV in labor and delivery,
5	the number of newborn infants rapidly tested for HIV-exposure,
6	the number of preliminarily HIV-positive pregnant women and
7	HIV-exposed newborn infants identified, the number of families
8	referred to case management, and other information the
9	Department determines is necessary to measure progress under
10	the provisions of this Act. Health care facilities must report
11	the confirmatory test result when it becomes available for each
12	preliminarily positive rapid HIV test performed on the woman
13	and newborn.
1 4	(e) The Department or its authorized representative shall

- (e) The Department or its authorized representative shall provide case management services to the preliminarily positive pregnant woman or the parent or quardian of the newborn infant to ensure access to treatment and care and other services as appropriate if the parent or quardian has consented to the services.
- 20 (410 ILCS 335/20 new)
- 21 Sec. 20. 24-hour Perinatal HIV Hotline.
- (a) The Department of Public Health or its authorized 22 representative shall establish and maintain a 24-hour 23 24 Perinatal HIV Hotline. The purpose of the hotline is to provide 25 linkage to case management and ensure consultation to help prevent the following: 26
- 27 (1) transmission of HIV during labor and delivery; and 28 (2) HIV infection of the newborn infant.
- (b) The hotline must provide to health care professionals 29 perinatal HIV treatment information in accordance with 30 guidelines established by the U.S. Public Health Service or 31 32 other nationally-recognized experts, as determined by the Department. An electronic reporting system may replace the 33

telephone hotline if the Department determines the same 1 2

services can be provided more effectively.

3 (410 ILCS 335/25 new)

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Sec. 25. Treatment information. A health care facility shall adopt a policy that provides that when an HIV test performed under this Act shows that a newborn infant is HIV-exposed, the infant's parent or quardian shall be informed of the importance of obtaining timely treatment for the infant in order to prevent the newborn from becoming HIV infected, and the mother of the newborn infant shall be informed of the importance of obtaining treatment for her HIV infection. The Department shall provide to health care professionals and health care facilities written information that may be used to satisfy their obligation under this Section.

(410 ILCS 335/30 new)

Sec. 30. Objections of parent or quardian to test. The provisions of this Act shall not apply when a parent or guardian of a child objects thereto on the grounds that the test conflicts with his or her religious tenets and practices. A written statement of the objection shall be presented to the physician or other person whose duty it is to administer and report the tests under the provisions of this Act.

(410 ILCS 335/35 new)

Sec. 35. Department report. The Department of Public Health shall prepare an annual report for the Governor and the General Assembly on the implementation of this Act that includes information on the number of HIV-positive women who presented with known HIV status, the number of pregnant women rapidly tested for HIV in labor and delivery, the number of newborn infants rapidly tested for HIV exposure, the number of preliminarily HIV-positive pregnant women and preliminarily

becoming law.".

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- HIV-exposed newborn infants identified, the confirmatory test 1 2 result for each preliminarily positive rapid HIV test performed 3 on the woman and newborn, the number of families referred to case management, and other information the Department 4 determines is necessary to measure progress under the 5 provisions of this Act. The Department shall assess the needs 6 7 of health care professionals and facilities for ongoing
- 10 Section 99. Effective date. This Act takes effect upon

make recommendations to improve the program.

training in implementation of the provisions of this Act and