Senate Bill 372

By: Senators Tillery of the 19th, Burke of the 11th, Miller of the 49th, Watson of the 1st and Kirkpatrick of the 32nd

AS PASSED

A BILL TO BE ENTITLED AN ACT

1 To amend various titles of the Official Code of Georgia Annotated so as to modernize, 2 clarify, and update provisions relating to public health; to eliminate certain councils and 3 committees; to amend Code Section 16-13-71 of the Official Code of Georgia Annotated, 4 relating to dangerous drugs, so as to revise a provision relating to naloxone; to amend Article 5 1 of Chapter 10 of Title 17 of the Official Code of Georgia Annotated, relating to procedure 6 for sentencing and imposition of punishment, so as to revise a provision regarding the 7 requirement of defendants to submit to HIV tests for AIDS transmitting crimes; to amend 8 Article 2 of Chapter 3 of Title 19 of the Official Code of Georgia Annotated, relating to 9 license and ceremony for marriage generally, so as to authorize but not require the 10 Department of Public Health to promulgate rules and regulations regarding premarital fact 11 sheets; to amend Title 31 of the Official Code of Georgia Annotated, relating to health, so 12 as to revise provisions regarding the Office of Women's Health; to revise provisions 13 regarding the transfer of vital records to State Archives; to repeal certain provisions 14 regarding the care and treatment of chronic renal disease patients; to revise provisions 15 regarding a petition for order for temporary healthcare placement transfer by healthcare 16 facilities; to amend various titles of the Official Code of Georgia Annotated so as to update 17 terminology relating to sexually transmitted diseases; to provide for related matters; to repeal 18 conflicting laws; and for other purposes.

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BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

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SECTION 1.

- 21 Code Section 16-13-71 of the Official Code of Georgia Annotated, relating to dangerous 22 drugs, is amended by revising paragraph (14.25) of subsection (c) as follows:
- "(14.25) Naloxone shall also be exempt from subsections (a) and (b) of this Code 23
- 24 section when used for drug overdose prevention and when supplied by a dispenser or
- licensed distributor or wholesaler as follows: 25

- 26 (A) Nasal adaptor rescue kits containing a minimum of two prefilled 2 ml. luer-lock
- 27 syringes with each containing 1 mg./ml. of naloxone;
- 28 (B) Prepackaged nasal spray rescue kits containing single-use spray devices with each
- 29 containing a minimum of 4 mg./0.1 ml. of naloxone;
- 30 (C) Muscle rescue kits containing a 10 ml. multidose fliptop vial or two 1 ml. vials
 31 with a strength of 0.4 mg./ml. of naloxone; or
- 32 (D) Prepackaged kits of two muscle autoinjectors with each containing a minimum of
- 33 0.4 mg./ml. of naloxone;"
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SECTION 2.

35 Article 1 of Chapter 10 of Title 17 of the Official Code of Georgia Annotated, relating to
36 procedure for sentencing and imposition of punishment, is amended by revising Code
37 Section 17-10-15, relating to AIDS transmitting crimes, requiring defendant to submit to an
38 HIV test, and report of results, as follows:

39 *"*17-10-15.

40 (a) Any term used in this Code section and defined in Code Section 31-22-9.1 shall have

41 the meaning provided for such term in Code Section 31-22-9.1.

42 (b) A victim or the parent or legal guardian of a minor or incompetent victim of a sexual 43 offense as defined in Code Section 31-22-9.1 or other crime which involves significant 44 exposure as defined by subsection (g)(f) of this Code section may request that the agency 45 responsible for prosecuting the alleged offense request that the person arrested for such 46 offense submit to a test for the human immunodeficiency virus and consent to the release 47 of the test results to the victim. If the person so arrested declines to submit to such a test, the judge of the superior court in which the criminal charge is pending, upon a showing of 48 49 probable cause that the person arrested for the offense committed the alleged crime and that 50 significant exposure occurred, may order the test to be performed in compliance with the rules adopted by the Department of Public Health. The cost of the test shall be borne by 51 52 the victim or by the arrested person, in the discretion of the court.

53 (c) Upon a verdict or plea of guilty or a plea of nolo contendere to any AIDS transmitting 54 crime, the court in which that verdict is returned or plea entered shall require the defendant 55 in such case to submit to an HIV test within 45 days following the date of such verdict or 56 plea. The clerk of the court in such case shall mail, within three days following the date of that verdict or plea, a copy of that verdict or plea to the Department of Public Health. 57 58 (d) The Department of Public Health, within 30 days following receipt of the court's order 59 under subsection (b) of this Code section or within 30 days following receipt of the copy 60 of the verdict or plea under subsection (c) of this Code section, shall arrange for the HIV 61 test for the person required to submit thereto.

62 (e)(d) Any person required under this Code section to submit to the HIV test who fails or

63 refuses to submit to the test arranged pursuant to subsection (d) of this Code section shall

64 be subject to such measures deemed necessary by the court in which the order was entered,

65 verdict was returned, or plea was entered to require involuntary submission to the HIV test,

and submission thereto may also be made a condition of suspending or probating any partof that person's sentence for the AIDS transmitting crime.

68 (f)(e) If a person is required by this Code section to submit to an HIV test and is thereby
69 determined to be infected with HIV, that determination and the name of the person shall

70 be reported to:

(1) The Department of Public Health, which shall disclose the name of the person as
necessary to provide counseling to each victim of that person's AIDS transmitting crime
if that crime is other than one specified in subparagraph (a)(3)(J) of Code Section
31-22-9.1 or to any parent or guardian of any such victim who is a minor or incompetent
person;

76 (2) The court which ordered the HIV test, which court shall make that report a part of77 that person's criminal record. That report shall be sealed by the court; and

78 (3) The officer in charge of any penal institution or other facility in which the person has

been confined by order or sentence of the court for purposes of enabling that officer toconfine the person separately from those not infected with HIV.

81 (g)(f) For the purpose of subsection (b) of this Code section, 'significant exposure' means

82 contact of the victim's ruptured or broken skin or mucous membranes with the blood or

83 body fluids of the person arrested for such offense, other than tears, saliva, or perspiration,

84 of a magnitude that the Centers for Disease Control and Prevention have epidemiologically

85 demonstrated can result in transmission of the human immunodeficiency virus.

86 (h)(g) The state may not use the fact that a medical procedure or test was performed on a

87 person under this Code section or use the results of the procedure or test in any criminal

88 proceeding arising out of the alleged offense."

89

SECTION 3.

90 Article 2 of Chapter 3 of Title 19 of the Official Code of Georgia Annotated, relating to 91 license and ceremony for marriage generally, is amended by revising Code Section 92 19-3-41.1, relating to fact sheet for distribution by premarital education providers, 93 requirements, and regulations, as follows:

94 "19-3-41.1.

95 (a) The Department of Public Health shall prepare a fact sheet for public availability and

96 for distribution by premarital education providers. The Department of Public Health shall

97 make such fact sheet available in electronic form, including, but not limited to, a version

98 that can be legibly printed in a poster size of up to 24 by 36 inches.

99 (b) The fact sheet provided for in subsection (a) of this Code section shall:

100 (1) Include basic information about the legal rights and responsibilities of parties to a 101 marriage as well as information about dating violence, sexual assault, stalking, domestic 102 violence, and human trafficking, including, but not limited to, the warning signs and 103 behaviors of an abusive partner and the dynamics of domestic violence and other forms 104 of coercive control. Such fact sheet shall also include basic information about the rights 105 of victims of such violence and the resources available to them, including, but not limited 106 to, website and telephone resources, legal assistance, confidential shelters, and civil 107 protective orders; and

(2) Be developed in partnership with the Georgia Commission on Family Violence and
any other agencies in the discretion of the Department of Public Health that serve
survivors of dating violence, sexual assault, and human trafficking.

111 (c) The Department of Public Health shall promulgate rules and regulations to implement

112 this Code section."

113

SECTION 4.

114 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by revising

115 Code Section 31-2A-5, relating to the Office of Women's Health, as follows:

116 *"*31-2A-5.

(a) There is created in the department the Office of Women's Health. Attached to the
 office shall be an 11 member advisory council. The members of the advisory council shall

119 be appointed by the Governor and shall be representative of major public and private

120 agencies and organizations in the state and shall be experienced in or have demonstrated

121 particular interest in women's health issues. Each member shall be appointed for two years

122 and until his or her successor is appointed. The members shall be eligible to succeed

123 themselves. The council shall elect its chairperson from among the councilmembers for

124 a term of two years. The Governor may name an honorary chairperson of the council.

125 (b) The Office of Women's Health shall serve in an advisory capacity to the Office of

126 Health Strategy and Coordination. In particular, the office shall:

127 (1) Raise awareness of women's nonreproductive health issues;

128 (2) Raise awareness of women's reproductive health issues;

129 (2)(3) Inform and engage in prevention and education activities relating to women's

130 nonreproductive health issues; and

131 (3)(4) Serve as a clearing-house for women's health information for purposes of planning

132 and coordination;

133 (4) Issue reports of the office's activities and findings; and

134 (5) Develop and distribute a state comprehensive plan to address women's health issues.

135 (c) The council shall meet upon the call of its chairperson, the board, or the commissioner.

136 (d) The Office of Women's Health, no later than October 1, 2019, and annually thereafter,

137 shall submit to the Office of Health Strategy and Coordination a report of its findings and

138 recommendations."

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SECTION 5.

140 Said title is further amended in Code Section 31-10-25, relating to disclosure of information
141 contained in vital records and transfer of records to State Archives, by revising subsection
142 (e) as follows:

143 "(e) When 100 125 years have elapsed after the date of birth or 75 100 years have elapsed 144 after the date of death or application for marriage, or divorce, dissolution of marriage, or 145 annulment, the records of these events in the custody of the state registrar shall be 146 transferred to the State Archives and such information shall be made available in 147 accordance with regulations which shall provide for the continued safekeeping of the 148 records."

150 Said title is further amended by revising Chapter 16, relating to care and treatment of chronic151 renal disease patients, as follows:

SECTION 6.

"CHAPTER 16

152

153 31-16-1.

154 (a) It is declared and found that one of the most serious and tragic problems facing the 155 public health and welfare is the death of hundreds of persons in this state every year from 156 chronic renal disease, although the present state of medical arts and technology could 157 return these persons to a socially productive life. Advances and discoveries in the 158 treatment of patients suffering from chronic renal disease now allow not mere survival but 159 rehabilitation of these patients to their normal occupations and activities. Presently, these 160 patients are dying for lack of personal financial resources to pay for the expensive 161 equipment and care which they need. (b) The state recognizes its responsibilities to allow its citizens to keep their health without 162 being pauperized and to use its resources and organization to aid in gathering and 163 disseminating information on the treatment of chronic renal disease. It is believed that 164 these programs will, by making treatment of chronic renal disease easily available, steadily 165

166 lower the cost of such treatment.

167 31-16-2.

168 The Department of Public Health shall establish a program for the prevention, control, and

169 treatment of kidney disease which shall include the care of patients suffering from chronic

- 170 kidney failure who require lifesaving therapy but are unable to pay for such services on a
- 171 continuing basis.
- 172 31-16-3.
- 173 (a) The commissioner of public health shall appoint a Kidney Disease Advisory
- 174 Committee, hereinafter referred to as KDAC, to advise the department in the administration
- 175 of this chapter. The KDAC shall recommend priorities and relative budgets for the various
- 176 purposes of this chapter as described below.
- 177 (b) The KDAC shall consist of 15 members appointed by the commissioner as follows:
- 178 (1) Four members shall be appointed by the commissioner from a list of eight names
- 179 submitted to him by the presidents of the medical colleges located within Georgia, both
- 180 public and private, and at least one such member shall be appointed from each of the
- 181 medical colleges located within Georgia;
- 182 (2) Two members shall be appointed by the commissioner from a list of four names
- submitted to him by the chief executive officers of the hospitals located within Georgia
 which provide chronic dialysis and kidney transplantation services;
- (3) One member shall be appointed by the commissioner from a list of two names
 submitted to him by the Medical Association of Georgia, and one member shall be
 appointed by the commissioner from a list of two names submitted to him by the Georgia
 State Medical Association;
- 189 (4) One member shall be appointed by the commissioner from a list of two names
- 190 submitted to him by the Kidney Foundation of Georgia;
- (5) One member shall be appointed by the commissioner from a list of two names
 submitted to him by the Georgia Claims Association and the Health Insurance Council;
 (6) One member shall be appointed by the commissioner from a list of two names
 submitted to him by the director of the Georgia Vocational Rehabilitation Agency; and
 (7) Four members shall be selected by the commissioner from the general public.
- 196 (c) The persons whose names are submitted to the commissioner by the medical colleges,
- the hospitals, the Medical Association of Georgia, and the Georgia State Medical
 Association shall all be physicians licensed to practice medicine under the laws of Georgia,
- 199 and the persons whose names are submitted by the Medical Association of Georgia shall
- 200 be actively engaged in the practice of medicine.
- 201 (d) The commissioner shall appoint members for terms such that the terms of four
- 202 members shall expire each year, except that every fourth year the terms of three members

- 203 shall expire, in such manner that after the initial terms all members will serve for terms of
- 204 four years and until their successors are elected and qualified. In making initial
- 205 appointments, the commissioner shall adjust initial terms so as to achieve the staggered
- 206 terms specified by the preceding sentence. In the event of a vacancy for any reason, the
- 207 commissioner shall fill said vacancy for the unexpired term in the same manner that other
 208 appointments are made.
- 209 (e) The KDAC shall meet as often as the commissioner deems necessary but not less than
- 210 twice each year. The members of the KDAC shall receive no compensation for their
- 211 services but shall be reimbursed for actual and necessary expenses incurred by them in
- 212 carrying out their duties as members thereof.
- 213 (f) The KDAC shall prepare and submit a complete and detailed report no later than
- 214 October 1, 2019, and annually thereafter, to the Office of Health Strategy and Coordination
- 215 concerning the impact of the program established pursuant to Code Section 31-16-2 on the
- 216 treatment of chronic renal disease and the cost of such treatment.
- 217 31-16-4.
- 218 The commissioner shall provide staff to carry out administration of this program including,
- 219 but not limited to, consultant physicians, administrative assistants, and clerical support.
- 220 31-16-5.
- 221 The commissioner, with the advice of the KDAC, shall:
- 222 (1) Develop standards for determining eligibility of patients for care and treatment under
- 223 this program and set physical and medical standards for the operation of dialysis and
- 224 kidney transplantation centers. When such centers meet the standards, they shall be
- 225 certified by the department. Patients treated at uncertified centers shall not be eligible for
- 226 state aid for their treatment; and
- 227 (2) Extend financial aid to persons suffering from chronic renal diseases to enable them
- 228 to obtain the medical, nursing, pharmaceutical, and technical services necessary in caring
- 229 for such diseases, including the provision of home dialysis equipment or expenses in
- 230 obtaining organs for transplantation, or both. Criteria and procedures for financial aid
- 231 will be developed by the department.
- 232 31-16-6.
- 233 Nothing in this chapter shall be construed to exclude patients with kidney disease from the
- 234 benefits of any program of state or federal aid for which they might otherwise qualify.

235 31-16-7. <u>31-16-1.</u>

(a) The physician and that physician's patient retain the discretion to determine whether
or not a kidney dialyzer should be reused. No licensed kidney dialysis clinic or provider
of kidney dialysis services which is certificated by the state Department of Community
Health may interfere with the exercise of that discretion by:

(1) Requiring the reuse of such dialyzer over the objection of that physician and patient;or

242 (2) Discriminating against a physician specializing in the practice of nephrology by

243 prohibiting that physician from practicing in such clinic or performing dialysis services

for such provider if that discrimination is based upon that physician's refusal to reuse a
dialyzer and that refusal is based on the patient's informed consent.

246 (b) A provider of kidney dialysis services who is required to comply with subsection (a)

of this Code section but who does not so comply shall have no claim or cause of action for

248 reimbursement for those services which were rendered without that compliance."

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SECTION 7.

250 Said title is further amended by revising Code Section 31-36A-7, relating to petition for order

251 for temporary health care placement transfer by health care facility, as follows:

252 *"*31-36A-7.

253 (a) In the absence of a person authorized to consent under the provisions of Code Section

254 31-36A-6, any interested person or persons, including, but not limited to, any authority,

corporation, partnership, or other entity operating the health care healthcare facility where
 the adult who is unable to consent is then present, with or without the assistance of legal

counsel, may petition the probate court for a health care healthcare placement transfer,

admission, or discharge order. The petition must be verified and filed in the county where

259 the adult requiring an alternative placement or transfer, admission, or discharge resides or

260 is found, provided that the probate court of the county where the adult is found shall not

261 have jurisdiction to grant the order if it appears that the adult was removed to that county

solely for purposes of filing such a petition. The petition shall set forth:

263 (1) The name, age, address, and county of the residence of the adult, if known;

264 (2) The name, address, and county of residence of the petitioner;

- 265 (3) The relationship of the petitioner to the adult;
- 266 (4) The current location of the adult;
- 267 (5) A physician's certification pursuant to Code Section 31-36A-5;
- 268 (6) The absence of any person to consent to such transfer, admission, or discharge as
- authorized by the provisions of Code Section 31-36A-6;

(7) Name and address of the recommended alternative health care healthcare facility or
 placement; and

(8) A statement of the reasons for such transfer, admission, or discharge as required bysubsections (b) and (c) of this Code section.

(b) The petition shall be supported by the affidavit of an attending physician, treating
physician, or other physician licensed according to the laws of the State of Georgia,
attesting the following:

277 (1) The adult is unable to consent for himself or herself;

(2) It is the physician's belief that it is in the adult's best interest to be admitted to or
discharged from a hospital, institution, medical center, or other health care healthcare
institution providing health or personal care for treatment of any type of physical or
mental condition or to be transferred to an alternative facility or placement, including, but
not limited to, nursing facilities, assisted living communities, personal care homes,
rehabilitation facilities, and home and community based programs; and

(3) The identified type of health care healthcare facility or placement will provide the
adult with the recommended services to meet the needs of the adult and is the most
appropriate, least restrictive level of care available.

(c) The petition shall also be supported by the affidavit of the discharging health care
 <u>healthcare</u> facility's discharge planner, social worker, or other designated personnel
 attesting to and explaining the following:

(1) There is an absence of a person to consent to such transfer, admission, or dischargeas authorized in Code Section 31-36A-6;

292 (2) The recommended alternative facility or placement is the most appropriate facility

- or placement available that provides the least restrictive and most appropriate level ofcare and reasons therefor; and
- (3) Alternative facilities or placements were considered, including home and communitybased placements and available placements, if any, that were in reasonable proximity to
- the adult's residence.

(d) The court shall review the petition and accompanying affidavits and other information
to determine if all the necessary information is provided to the court as required in
subsections (a), (b), and (c) of this Code section. The court shall enter an instanter order
if the following information is provided:

- 302 (1) The adult is unable to consent for himself or herself;
- 303 (2) There is an absence of any person to consent to such transfer, admission, or discharge

as authorized in Code Section 31-36A-6;

- 305 (3) It is in the adult's best interest to be discharged from a hospital, institution, medical
- 306 center, or other health care <u>healthcare</u> institution or placement providing health or

personal care for treatment for any type of physical or mental condition and to beadmitted or transferred to an alternative facility or placement;

309 (4) The recommended alternative facility or placement is the most appropriate facility

or placement available that provides the least restrictive and most appropriate level ofcare; and

312 (5) Alternative facilities or placements were considered, including home and community

based placements and available placements, if any, in reasonable proximity to the adult'sresidence.

The order shall authorize the petitioner or the petitioner's designee to do all things necessary to accomplish the discharge from a hospital, institution, medical center, or other health care <u>healthcare</u> institution and the transfer to or admission to the recommended facility or placement.

319 (e) At the same time as issuing the order, the court shall provide a copy of said order to the
 320 commissioner of public health.

321 (f)(e) The order authorizing such transfer, admission, or discharge shall expire upon the
 322 earliest of the following:

323 (1) The completion of the transfer, admission, or discharge and such responsibilities
324 associated with such transfer, admission, or discharge, including, but not limited to,
325 assisting with the completion of applications for financial coverage and insurance
326 benefits for the health or personal care;

327 (2) Upon a physician's certification that the adult is able to understand and make
328 decisions regarding his or her placements for health or personal care and can
329 communicate such decisions by any means; or

(3) At a time specified by the court not to exceed 30 days from the date of the order.

331 (g)(f) The order is limited to authorizing the transfer, admission, or discharge and other 332 responsibilities associated with such decision, such as authorizing the application for 333 financial coverage and insurance benefits. It does not include the authority to perform any 334 other acts on behalf of the adult not expressly authorized in this Code section.

(h)(g) This Code section shall not repeal, abrogate, or impair the operation of any other
laws, either federal or state, governing the transfer, admission, or discharge of a person to
or from a health care healthcare facility or placement. Further, such person retains all
rights provided under laws, both federal and state, as a result of an involuntary transfer,
admission, or discharge.

340 (i)(h) Each certifying physician, discharge planner, social worker, or other hospital
 341 personnel or authorized person who acts in good faith pursuant to the authority of this Code
 342 section shall not be subject to any civil or criminal liability or discipline for unprofessional
 343 conduct."

SECTION 8.

- 345 The Official Code of Georgia Annotated is amended by replacing "venereal" with "sexually
- 346 transmitted" wherever the former term occurs in:
- 347 (1) Code Section 26-3-13, relating to when a drug, device, or cosmetic advertisement 348 deemed false;
- 349 (2) Code Section 31-2A-8, relating to Department of Public Health as agency of state for
- 350 receipt and administration of federal and other funds;
- 351 (3) Code Section 31-17-1, relating to enumeration of diseases deemed dangerous to public352 health;
- 353 (4) Code Section 31-17-2, relating to report of diagnosis or treatment to health authorities;
- 354 (5) Code Section 31-17-3, relating to examination and treatment by health authorities;
- 355 (6) Code Section 31-17-6, relating to regulation of laboratories;
- 356 (7) Code Section 31-17-7, relating to consent of minor to medical or surgical care or services
- 357 and informing spouse, parent, custodian, or guardian;
- 358 (8) Code Section 31-21-3, relating to death of person with infectious or communicable 359 disease;
- 360 (9) Code Section 31-26-2, relating to requirement of certificate, application, educational
- 361 requirements, and issuance, suspension, and revocation; and
- 362 (10) Code Section 42-1-7, relating to notification to transporting law enforcement agency
- 363 of inmate's or patient's infectious or communicable disease.

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SECTION 9.

365 All laws and parts of laws in conflict with this Act are repealed.