



Senate

General Assembly

February Session, 2002

File No. 105

Senate Bill No. 459

Senate, March 21, 2002

The Committee on Labor and Public Employees reported through SEN. PRAGUE of the 19th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

***AN ACT CONCERNING WORKERS' COMPENSATION COVERAGE
FOR EXPOSURE TO HEPATITIS, TUBERCULOSIS AND MENINGITIS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2002*) (a) As used in this
2 section:

3 (1) "Body fluids" means blood and body fluids containing visible
4 blood and other body fluids to which universal precautions for
5 prevention of occupational transmission of blood-borne pathogens, as
6 established by the National Centers for Disease Control, apply. For
7 purposes of potential transmission of meningococcal meningitis or
8 tuberculosis, the term "body fluids" includes respiratory, salivary and
9 sinus fluids, including droplets, sputum and saliva, mucous and other
10 fluids through which infectious airborne organisms can be transmitted
11 between persons.

12 (2) "Emergency rescue or public safety worker" means a local or

13 state police officer, state marshal, judicial marshal, correction officer,
14 emergency medical technician, medical response technician,
15 paramedic, ambulance driver, firefighter, active member of a volunteer
16 fire company or fire department engaged in volunteer duties, or active
17 member of an organization certified as a volunteer ambulance service
18 in accordance with section 19a-180 of the general statutes who, in the
19 course of employment, runs a high risk of occupational exposure to
20 hepatitis, meningococcal meningitis or tuberculosis.

21 (3) "Hepatitis" means hepatitis A, hepatitis B, hepatitis non-A,
22 hepatitis non-B, hepatitis C or any other strain of hepatitis generally
23 recognized by the medical community.

24 (4) "High risk of occupational exposure" means risk that is incurred
25 because a person subject to the provisions of this section, in
26 performing the basic duties associated with such person's
27 employment:

28 (A) Provides emergency medical treatment in a nonhealthcare
29 setting where there is a potential for transfer of body fluids between
30 persons;

31 (B) At the site of an accident, fire or other rescue or public safety
32 operation, or in an emergency rescue or public safety vehicle, handles
33 body fluids in or out of containers or works with or otherwise handles
34 needles or other sharp instruments exposed to body fluids;

35 (C) Engages in the pursuit, apprehension or arrest of law violators
36 or suspected law violators and, in performing such duties, may be
37 exposed to body fluids; or

38 (D) Is responsible for the custody and physical restraint, when
39 necessary, of prisoners or inmates within a prison, jail or other criminal
40 detention facility, while on work detail outside the facility or while
41 being transported and, in performing such duties, may be exposed to
42 body fluids.

43 (5) "Occupational exposure", in the case of hepatitis, meningococcal

44 meningitis or tuberculosis, means an exposure that occurs during the
45 performance of job duties that may place a worker at risk of infection.

46 (b) Any emergency rescue or public safety worker who suffers a
47 condition or impairment of health that is caused by hepatitis,
48 meningococcal meningitis or tuberculosis that requires medical
49 treatment, and that results in total or partial incapacity or death shall
50 be presumed to have sustained such condition or impairment of health
51 in the course of employment and shall be entitled to receive workers'
52 compensation benefits pursuant to chapter 568 of the general statutes,
53 unless the contrary is shown by competent evidence, provided:

54 (1) The emergency rescue or public safety worker has, prior to
55 diagnosis, undergone standard, medically acceptable tests for evidence
56 of the communicable disease for which the presumption is sought or
57 for evidence of medical conditions derived therefrom, which tests
58 failed to indicate the presence of infection, or in the case of hepatitis
59 infection, shall have banked serum for future testing, which future
60 tests fail to reveal evidence of infection; and

61 (2) The emergency rescue or public safety worker presents a written
62 affidavit verifying by written declaration that, to the best of the
63 worker's knowledge and belief:

64 (A) In the case of meningococcal meningitis, in the ten days
65 immediately preceding diagnosis, the worker was not exposed, outside
66 the scope of employment, to any person known to have meningococcal
67 meningitis or known to be an asymptomatic carrier of the disease.

68 (B) In the case of tuberculosis, in the period of time since the
69 worker's last negative tuberculosis skin test, the worker has not been
70 exposed, outside the scope of employment, to any person known by
71 the worker to have tuberculosis.

72 (c) The employing agency shall maintain a record of any known or
73 reasonably suspected exposure of an emergency rescue or public safety
74 worker in its employ to the diseases described in this section and shall

75 immediately notify the employee of such exposure. An emergency
76 rescue or public safety worker shall file an incident or accident report
77 with the worker's employer of each instance of known or suspected
78 occupational exposure to hepatitis infection, meningococcal meningitis
79 or tuberculosis.

This act shall take effect as follows:	
Section 1	<i>October 1, 2002</i>

LAB *Joint Favorable*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Fund-Type	Agency Affected	FY 03 \$	Future Years
GF - Cost	Correction, Dept.; Workers' Comp. Claims-Admin. Serv. Dept.; Mental Retardation, Dept.; Mental Health & Addiction Serv., Dept.; Children & Families, Dept.; Public Safety, Dept.	Minimal	Potential Significant
TF - Cost	Workers' Comp. Claims-Admin. Serv. Dept.	Minimal	Potential Significant
Second Injury Fund - Cost	Treasurer	15,000 to 30,000	20,000 to 40,000

Note: GF=General Fund; TF=Transportation Fund

Municipal Impact:

Effect	Municipalities	FY 03 \$	Future Years
STATE MANDATE - Cost	All Municipalities	Minimal	Potential Significant

Explanation

This bill results in additional costs to the state and municipalities that are anticipated to be minimal at this time. However, future costs could be potentially significant, especially to the state and municipalities that are self-insured for workers' compensation. It is a State Mandate on municipalities. It is also estimated to result in costs to the state's Second Injury Fund estimated from \$15,000 to \$30,000 in FY 03 and from \$20,000 to \$40,000 in FY 04.

The bill establishes a rebuttable presumption that certain emergency-rescue or public safety personnel who develop hepatitis, tuberculosis or meningitis got the condition from the workplace and

are entitled to workers' compensation benefits. The personnel include local or state police officers, state marshals, judicial marshals, correction officers, emergency medical technicians, medical response technicians, paramedics, ambulance drivers, and firefighters, who run a high risk of occupational exposure to hepatitis, tuberculosis or meningococcal meningitis. To be covered, the condition must require medical treatment and result in total or partial incapacity or death.

Establishing a rebuttable presumption shifts the burden of proof to the employer or insurer to attempt to refute the employee's claim that the disease was contracted on the job. Currently, such persons seeking workers' compensation benefits have the burden of proving that they contracted the disease from the workplace. In order to be entitled to the rebuttable presumption, the worker must (1) have undergone medical tests prior to the diagnosis and tested negative (or banked blood for future testing in the case of hepatitis) and (2) in the case of meningitis and tuberculosis provide a written affidavit that he was not exposed to any person known to have the disease outside of work. The bill also requires emergency rescue and public safety workers to file reports about exposures and requires employers to maintain records of such exposures. Since the bill establishes these substantive changes in workers compensation coverage on the effective date of the act of October 1, 2002, only claims filed on or after that date could be considered under the rebuttable presumption provisions.

It is not known how many emergency workers (1) contract these diseases, (2) claim workers' compensation benefits, and (3) are granted or denied benefits by their employer or insurer. However, only five to seven such cases per year are brought before the Workers' Compensation Commission (WCC) and virtually all of them are determined in favor of the claimant. The National Council on Compensation Insurance and the Department of Administrative Services estimate that the current costs of the bill would be minimal because most of the claimants are currently provided benefits under workers' compensation.

However, future costs could be significant, depending on the increase of these diseases, especially hepatitis C. The Center for Disease Control estimates that Hepatitis C currently infects over 3 million Americans, most of who do not know they have the disease. Hepatitis C can result in liver damage and liver failure and currently kills four times as many Americans as does AIDS. About 75% to 80% of infected persons have chronic infection, and 70% of these persons have chronic liver disease. About 3% of the infected persons die from chronic liver disease. The number of cases of tuberculosis and meningitis are also increasing, and these diseases are becoming increasingly resistant to treatment and antibiotics. Just one case could result in costs of \$800,000 to \$1 million. This would be significant, especially for the state and municipalities that self-insure for their workers' compensation costs.

OLR Bill Analysis

SB 459

AN ACT CONCERNING WORKERS' COMPENSATION COVERAGE FOR EXPOSURE TO HEPATITIS, TUBERCULOSIS AND MENINGITIS**SUMMARY:**

This bill creates a rebuttable presumption that an emergency rescue or public safety worker who develops hepatitis, meningococcal meningitis, or tuberculosis got the condition from work and is entitled to workers' compensation benefits. The disease must require medical treatment and result in total or partial incapacity or death.

In order to be entitled to the presumption, the worker must, in cases of meningitis and tuberculosis, have tested negative for the condition in the past and swear he was not exposed to the claimed condition outside of work. In cases of hepatitis, the worker must have banked blood for future testing and have such blood test negative.

The bill also requires (1) emergency rescue and public safety workers to file reports about exposures and (2) employers to maintain records of exposures.

EFFECTIVE DATE: October 1, 2002

EMERGENCY RESCUE AND PUBLIC SAFETY WORKERS

The bill applies to emergency rescue and public safety workers who run a high risk of occupational exposure to hepatitis, meningococcal meningitis, or tuberculosis in their work. These are individuals who work as state or local police officers, state or judicial marshals, correction officers, emergency medical or medical response technicians, paramedics, ambulance drivers, fire fighters, active members of volunteer fire companies or fire departments engaged in volunteer duties, or active members of volunteer ambulance services.

"High risk of occupational exposure" means a risk incurred because a person, in performing his basic duties:

1. provides emergency medical treatment outside of a non-healthcare setting where there is a potential for transferring body fluids;
2. handles body fluids, needles, or other sharp instruments exposed to body fluids at the site of an accident, fire, or other rescue or safety operation or in an emergency rescue or public safety vehicle;
3. may be exposed to body fluids while engaged in the pursuit, apprehension, or arrest of law or suspected law violators; or
4. may be exposed to body fluids when responsible for the custody and physical restraint of prisoners or other detainees.

"Body fluids" are blood, fluids containing blood, and other body fluids for which universal precautions apply. For purposes of meningococcal meningitis or tuberculosis, they include respiratory, salivary, and sinus fluids.

AFFIDAVITS

In order to be entitled to the presumption, the emergency rescue or public safety worker must, in cases of meningitis, present a sworn statement that in the 10 days prior to diagnosis, he was not exposed outside of work to any person having or carrying the disease or, in cases of tuberculosis, present a sworn statement that he was not exposed outside of work to any person known to have the disease since his last negative test.

RECORDS

Emergency rescue and public safety workers must file reports with their employer each time they are, or suspect they are, exposed to hepatitis, meningococcal meningitis, or tuberculosis on the job. Employers must keep records of known or reasonably suspected cases of exposure and immediately notify affected employees about them.

COMMITTEE ACTION

Labor and Public Employees Committee

Joint Favorable Report
Yea 10 Nay 4