



General Assembly

Amendment

January Session, 2015

LCO No. 6889



Offered by:

REP. RITTER M., 1st Dist.

REP. DEMICCO, 21st Dist.

To: House Bill No. 5907

File No. 402

Cal. No. 260

**"AN ACT CONCERNING NOTIFICATION TO EMERGENCY
MEDICAL SERVICES ORGANIZATIONS REGARDING PATIENTS
DIAGNOSED WITH AN INFECTIOUS DISEASE."**

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Section 19a-904 of the general statutes is repealed and the
4 following is substituted in lieu thereof (*Effective October 1, 2015*):

5 (a) As used in this section:

6 (1) "Infectious disease" [includes (A) infectious pulmonary
7 tuberculosis, (B) hepatitis A, (C) hepatitis B, (D) hepatitis C, (E) human
8 immunodeficiency virus (HIV), including acquired immunodeficiency
9 syndrome (AIDS), (F) diphtheria, (G) novel influenza A virus
10 infections with pandemic potential, as defined by the National Centers
11 for Disease Control and Prevention, (H) methicillin-resistant
12 staphylococcus aureus (MRSA), (I) hemorrhagic fevers, (J)

13 meningococcal disease, (K) plague, and (L) rabies;] means any
14 infectious disease on the list developed by the United States Secretary
15 of Health and Human Services pursuant to 42 USC 300ff-131, as
16 amended from time to time, and any infectious disease designated by
17 the Commissioner of Public Health pursuant to subsection (b) of this
18 section;

19 (2) "Airborne infectious disease" means any infectious disease
20 specified as an airborne infectious disease on the list of infectious
21 diseases developed by the United States Secretary of Health and
22 Human Services pursuant to 42 USC 300ff-131, as amended from time
23 to time, and any infectious disease so designated by the Commissioner
24 of Public Health pursuant to subsection (b) of this section;

25 [(2) "Exposure" means a percutaneous or mucous membrane
26 exposure of an individual to the blood, semen, vaginal secretions, or
27 spinal, synovial, pleural, peritoneal, pericardial or amniotic fluid of
28 another person;]

29 (3) "Exposed" means to be in circumstances in which there is a
30 recognized risk for transmission of an infectious disease from a human
31 source to an emergency services member, or in the case of an infectious
32 disease designated by the United States Secretary of Health and
33 Human Services as a select agent, from a surface or environment
34 contaminated by the agent to an emergency services member;

35 [(3)] (4) "Patient" means a person, whether alive or dead, who has
36 been attended, treated, assisted, handled or transported for medical
37 care by an emergency services member as a result of an emergency;

38 [(4)] (5) "Emergency services member" means any police officer as
39 defined in section 7-294a, member of a paid or volunteer fire
40 department, emergency medical technician, ambulance driver, or
41 paramedic as defined in section 19a-175, when acting in an official
42 capacity;

43 [(5)] (6) "Emergency medical technician" means any class of

44 emergency medical technician certified under regulations adopted
45 pursuant to section 19a-179, including, but not limited to, any
46 advanced emergency medical technician or emergency medical
47 responder;

48 ~~[(6)]~~ (7) "Emergency services organization" means the Division of
49 State Police within the Department of Emergency Services and Public
50 Protection, an organized local police department, municipal
51 constabulary, paid or volunteer fire department, ambulance company
52 or any organization whether public, private or voluntary that offers
53 transportation or treatment services to patients under emergency
54 conditions;

55 ~~[(7)]~~ (8) "Hospital" has the same meaning as in section 19a-490; [and]

56 ~~[(8)]~~ (9) "Designated officer" means the employee or volunteer of an
57 emergency services organization designated in accordance with
58 subdivision (1) of subsection [(b)] (c) of this section; [.] and

59 (10) "Hospital contact person" means the employee of a hospital
60 designated by such hospital in accordance with subdivision (2) of
61 subsection (c) of this section.

62 (b) The Commissioner of Public Health may designate a disease as
63 an infectious disease or an airborne infectious disease, as both terms
64 are defined in subsection (a) of this section. The commissioner shall
65 adopt regulations in accordance with chapter 54 to designate a disease
66 as an infectious disease or airborne infectious disease in accordance
67 with the provisions of this subsection. The commissioner may
68 implement such designations while in the process of adopting such
69 designations in regulation form, provided the commissioner publishes
70 notice of intention to adopt the regulations on the Department of
71 Public Health's Internet web site and the eRegulations System within
72 twenty days of implementing such designations. Designations
73 implemented pursuant to this subsection shall be valid until the time
74 such regulations are effective.

75 ~~[(b)] (c) (1)~~ Each emergency services organization shall designate
76 one employee or volunteer to act as the designated officer to receive
77 notification of cases ~~[of possible exposure]~~ where persons have
78 possibly been exposed to infectious disease, investigate such cases, ~~[of~~
79 ~~possible exposure,]~~ maintain ~~[hospital]~~ contact information for hospital
80 contact persons, request further information from ~~[hospitals]~~ hospital
81 contact persons and maintain any records required under this section.
82 The designated officer may designate another employee or volunteer
83 to serve as his or her designee in the event that the designated officer is
84 unavailable.

85 (2) Each hospital shall designate one employee to act as the hospital
86 contact person to notify designated officers of cases where persons
87 have possibly been exposed to airborne infectious disease and to
88 receive and respond to requests from designated officers for
89 information concerning the results of any test performed on a patient
90 to determine the presence of an infectious disease. The hospital contact
91 person may designate another employee of the hospital to serve as his
92 or her designee in the event that the hospital contact person is
93 unavailable.

94 ~~[(c)] (d) (1)~~ Any hospital that diagnoses a patient as having
95 ~~[infectious pulmonary tuberculosis]~~ an airborne infectious disease
96 shall, through its hospital contact person, verbally notify the
97 designated officer of the emergency services organization that
98 attended, treated, assisted, handled or transported such patient no
99 later than forty-eight hours after making such a diagnosis, and shall
100 make such notification in writing not later than seventy-two hours
101 after such diagnosis. Such notification shall include, but not be limited
102 to, the diagnosis and the date on which the patient was attended,
103 treated, assisted, handled or transported as a result of an emergency to
104 such hospital, provided the identity of the patient shall not be
105 disclosed in any such notification.

106 (2) Any hospital that determines that a patient, who died at or
107 before reaching such hospital and who was attended, treated, assisted,

108 handled or transported by an emergency services member, had
109 [infectious pulmonary tuberculosis] an airborne infectious disease
110 shall, through its hospital contact person, notify the designated officer
111 of such determination no later than forty-eight hours after making
112 such determination.

113 [(d)] (e) (1) Any member of an emergency service organization who
114 believes that he or she may have been exposed to an infectious disease
115 through the member's contact with a patient who was attended,
116 treated, assisted, handled or transported by the member shall report
117 such [possible exposure] incident during which the member believes to
118 have been exposed to an infectious disease to the designated officer.
119 The designated officer shall immediately collect the facts surrounding
120 such incident [of possible exposure] and evaluate such facts to make a
121 determination of whether it would be reasonable to believe that the
122 member may have been exposed to an infectious disease. If the
123 designated officer determines that [there] it is reasonable to believe
124 that the member may have been [exposure] exposed to an infectious
125 disease, the designated officer shall submit a written request to the
126 hospital contact person at the hospital that received the patient
127 requesting to be notified of the results of any test performed on the
128 patient to determine the presence of an infectious disease. The request
129 shall include:

130 (A) The name, address and telephone number of the designated
131 officer submitting the request;

132 (B) The name of the designated officer's employer or, in the case of a
133 volunteer emergency services member, the entity for which the
134 designated officer volunteers, and the name and contact information of
135 the emergency services member who may have been exposed to the
136 infectious disease; and

137 (C) The date, time, location and manner of the [possible exposure]
138 incident during which the member may have been exposed.

139 (2) Such request shall be valid for ten days after it is made. If at the
140 end of such ten-day period no test has been performed to determine
141 the presence of an infectious disease, no diagnosis has been made or
142 the result of the test is negative, the hospital shall, through its hospital
143 contact person, so notify the designated officer who made the request.
144 The notification shall not include the name of the patient.

145 (3) Any hospital that receives a written request for notification shall,
146 through its hospital contact person, give an oral notification of the
147 presence of an infectious disease or of a confirmed positive test result,
148 if known, to the designated officer no later than forty-eight hours after
149 receiving such request, and shall send a written notification no later
150 than three days after receiving such request. If an infectious disease is
151 present or the test results are confirmed positive, both the oral and
152 written notification shall include the name of the infectious disease and
153 the date on which the patient was attended, treated, assisted, handled
154 or transported by the emergency services organization. Such
155 notification shall not disclose the name of the patient.

156 (4) If a designated officer makes a request pursuant to this
157 subsection and the patient has died at, or before reaching, the hospital
158 receiving such request, the hospital shall, through its hospital contact
159 person, provide a copy of the request to the medical facility
160 ascertaining the cause of death if such facility is not the hospital that
161 received the original request.

162 (f) (1) Not later than January 1, 2016, each emergency services
163 organization shall notify the Commissioner of Public Health, or the
164 commissioner's designee, of its designated officer and the designated
165 officer's contact information.

166 (2) Not later than January 1, 2016, each hospital shall notify said
167 commissioner, or said commissioner's designee, of its hospital contact
168 person and the hospital contact person's contact information.

169 (3) Each emergency services organization and hospital shall

170 promptly notify said commissioner of any change of the designated
171 officer or hospital contact person or such person's contact information.

172 (g) The Commissioner of Public Health, or the commissioner's
173 designee, shall assist designated officers and hospital contact persons
174 in answering questions with respect to responsibilities of a designated
175 officer or hospital contact person under the provisions of this section.
176 Said commissioner shall, on and after January 1, 2016, maintain and
177 update, as necessary, a list of designated officers and hospital contact
178 persons along with such designated officers' and hospital contact
179 persons' contact information and make such list available to the public
180 on the Department of Public Health's Internet web site.

181 [(e)] (h) No cause of action for damages shall arise, or any civil
182 penalty be imposed, against any hospital, hospital contact person or
183 [any] designated officer for failure to comply with the duties
184 established by this section. Notwithstanding the provisions of this
185 subsection, the Commissioner of Public Health may take any action
186 specified in subdivisions (1) to (5), inclusive, of subsection (a) of
187 section 19a-17 and section 19a-494 for a violation of the provisions of
188 this section as the commissioner deems appropriate."

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2015	19a-904