The Senate Committee on Health and Human Services offered the following substitute to SB 372:

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.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

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- 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:
- 23 "(14.25) Naloxone shall also be exempt from subsections (a) and (b) of this Code
- section when used for drug overdose prevention and when supplied by a dispenser or
- 25 <u>licensed distributor or wholesaler</u> as follows:

26 (A) Nasal adaptor rescue kits containing a minimum of two prefilled 2 ml. luer-lock

- syringes with each containing 1 mg./ml. of naloxone;
- 28 (B) Prepackaged nasal spray rescue kits containing single-use spray devices with each
- 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
- 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;"

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
- offense as defined in Code Section 31-22-9.1 or other crime which involves significant
- 44 exposure as defined by subsection $\frac{g}{f}$ of this Code section may request that the agency
- 45 responsible for prosecuting the alleged offense request that the person arrested for such
- offense submit to a test for the human immunodeficiency virus and consent to the release
- of the test results to the victim. If the person so arrested declines to submit to such a test,
- 48 the judge of the superior court in which the criminal charge is pending, upon a showing of
- 49 probable cause that the person arrested for the offense committed the alleged crime and that
- significant exposure occurred, may order the test to be performed in compliance with the
- 51 rules adopted by the Department of Public Health. The cost of the test shall be borne by
- 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
- crime, the court in which that verdict is returned or plea entered shall require the defendant
- 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
- 57 of that verdict or plea, a copy of that verdict or plea to the Department of Public Health.
- 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
- 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

- refuses to submit to the test arranged pursuant to subsection (d) of this Code section shall
- be subject to such measures deemed necessary by the court in which the order was entered,
- 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 part
- of 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
- determined to be infected with HIV, that determination and the name of the person shall
- 70 be reported to:
- 71 (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
- 74 31-22-9.1 or to any parent or guardian of any such victim who is a minor or incompetent
- 75 person;
- 76 (2) The court which ordered the HIV test, which court shall make that report a part of
- 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 to
- confine the person separately from those not infected with HIV.
- 81 $\frac{\text{(g)}(f)}{\text{(f)}}$ 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,
- 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."

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

protective orders; and

- 108 (2) Be developed in partnership with the Georgia Commission on Family Violence and 109 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."

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.
- 117 (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
- 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
- particular interest in women's health issues. Each member shall be appointed for two years
- and until his or her successor is appointed. The members shall be eligible to succeed
- 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
- 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
- nonreproductive health issues; and
- 131 (3)(4) Serve as a clearing-house for women's health information for purposes of planning
- 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,
- shall submit to the Office of Health Strategy and Coordination a report of its findings and 137
- 138 recommendations."

139 **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 $\frac{100}{125}$ years have elapsed after the date of birth or $\frac{75}{100}$ 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
- accordance with regulations which shall provide for the continued safekeeping of the 147
- 148 records."

149 **SECTION 6.**

- 150 Said title is further amended by revising Chapter 16, relating to care and treatment of chronic
- 151 renal disease patients, as follows:
- 152 "CHAPTER 16
- 153 31-16-1.

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- 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
- 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

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
- lower the cost of such treatment. 166

- 167 31-16-2.
- 168 The Department of Public Health shall establish a program for the prevention, control, and
- 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
- 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
- submitted to him by the presidents of the medical colleges located within Georgia, both
- 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;
- 185 (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
- 187 appointed by the commissioner from a list of two names submitted to him by the Georgia
- 188 State Medical Association;
- 189 (4) One member shall be appointed by the commissioner from a list of two names
- submitted to him by the Kidney Foundation of Georgia;
- 191 (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;
- 193 (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
- 195 (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,
- 197 the hospitals, the Medical Association of Georgia, and the Georgia State Medical
- 198 Association shall all be physicians licensed to practice medicine under the laws of Georgia,
- 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

shall expire, in such manner that after the initial terms all members will serve for terms of
four years and until their successors are elected and qualified. In making initial
appointments, the commissioner shall adjust initial terms so as to achieve the staggered
terms specified by the preceding sentence. In the event of a vacancy for any reason, the
commissioner shall fill said vacancy for the unexpired term in the same manner that other
appointments are made.

(e) The KDAC shall meet as often as the commissioner deems necessary but not less than

- (e) The KDAC shall meet as often as the commissioner deems necessary but not less than twice each year. The members of the KDAC shall receive no compensation for their services but shall be reimbursed for actual and necessary expenses incurred by them in 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.

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- 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.
- 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. 31-16-1.
- 236 (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:
- 240 (1) Requiring the reuse of such dialyzer over the objection of that physician and patient;
- 241 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
- reimbursement for those services which were rendered without that compliance."

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
- 256 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;

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

- placement; and
- 272 (8) A statement of the reasons for such transfer, admission, or discharge as required by
- subsections (b) and (c) of this Code section.
- 274 (b) The petition shall be supported by the affidavit of an attending physician, treating
- 275 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;
- 278 (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
- 282 not limited to, nursing facilities, assisted living communities, personal care homes,
- rehabilitation facilities, and home and community based programs; and
- 284 (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.
- 287 (c) The petition shall also be supported by the affidavit of the discharging health care
- 288 <u>healthcare</u> facility's discharge planner, social worker, or other designated personnel
- attesting to and explaining the following:
- 290 (1) There is an absence of a person to consent to such transfer, admission, or discharge
- as 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 of
- 294 care and reasons therefor; and
- 295 (3) Alternative facilities or placements were considered, including home and community
- based placements and available placements, if any, that were in reasonable proximity to
- the adult's residence.
- 298 (d) The court shall review the petition and accompanying affidavits and other information
- 299 to determine if all the necessary information is provided to the court as required in
- 300 subsections (a), (b), and (c) of this Code section. The court shall enter an instanter order
- 301 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 healthcare institution or placement providing health or

personal care for treatment for any type of physical or mental condition and to be admitted 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 of
- 311 care; 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's
- 314 residence.
- 315 The order shall authorize the petitioner or the petitioner's designee to do all things
- 316 necessary to accomplish the discharge from a hospital, institution, medical center, or other
- 317 <u>health care 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
- and earliest of the following:
- 323 (1) The completion of the transfer, admission, or discharge and such responsibilities
- associated with such transfer, admission, or discharge, including, but not limited to,
- assisting with the completion of applications for financial coverage and insurance
- benefits for the health or personal care;
- 327 (2) Upon a physician's certification that the adult is able to understand and make
- decisions regarding his or her placements for health or personal care and can
- 329 communicate such decisions by any means; or
- 330 (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
- responsibilities associated with such decision, such as authorizing the application for
- financial coverage and insurance benefits. It does not include the authority to perform any
- other acts on behalf of the adult not expressly authorized in this Code section.
- 335 (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
- personnel or authorized person who acts in good faith pursuant to the authority of this Code
- section shall not be subject to any civil or criminal liability or discipline for unprofessional
- 343 conduct."

344 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 public
- 352 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.

SECTION 9.

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