

SENATE BILL REPORT

SB 5728

As of February 26, 2015

Title: An act relating to permitting opt-out screening for HIV infection.

Brief Description: Allowing patients to opt out of HIV testing.

Sponsors: Senators Darneille, Rivers, Rolfes, Ranker, Keiser, Parlette, Hasegawa, Chase and Jayapal.

Brief History:

Committee Activity: Health Care: 2/10/15, 2/12/15 [DP, w/oRec].

Ways & Means: 2/25/15.

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Frockt, Ranking Minority Member; Bailey, Baumgartner, Brown, Cleveland, Conway, Jayapal, Keiser, Parlette and Rivers.

Minority Report: That it be referred without recommendation.

Signed by Senator Angel.

Staff: Kathleen Buchli (786-7488)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Sandy Stith (786-7710)

Background: State law provides the circumstances under which a person may undergo HIV testing without consent. Exemptions to this prohibition are listed in state law and include situations involving incarcerated persons, persons participating in seroprevalence studies, persons receiving workers' compensation benefits, and persons who have been ruled not competent to make their own health care conditions.

In 2006 the Centers for Disease Control and Prevention (CDC) released guidelines recommending that every patient between the ages of 13 and 64 be offered an HIV test on an opt-out basis in all health care settings, without the requirements of written consent or

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prevention counseling. According to the CDC recommendations, health care providers offering HIV tests must provide patients information about the test, ask if they have any questions, and inform them that they have the right to opt out of the test. The CDC released these guidelines in order to address the public health challenge that HIV poses because many people who have HIV are unaware of their status and unknowingly infect others.

Summary of Bill: The bill as referred to committee not considered.

Summary of Bill (Proposed Substitute): Screening for HIV infection must be offered by clinicians consistent with the United States Preventative Services Task Force recommendations for all patients 13 through 64 years of age and for all pregnant women. The patient must be informed that the test will be undertaken and that the patient may decline the test. If the patient declines the test, a health care provider may not use the fact that the patient declined as a basis for denying services or treatment to the patient.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill (Health Care): PRO: Mandatory testing has been avoided in the past because of the stigma that has been associated with HIV/AIDS. This bill is a pathway to reduce that stigma by making HIV testing a normal part of a health care routine. This bill matches the CDC language and is an opt-out bill. This will reduce people's reluctance to get the test and it will reduce people who unknowingly infect others with HIV. We have a goal in this state to reduce HIV infection rates to zero. Not knowing HIV status increases the risk of transmitting the disease. Treatments are more effective when there is early diagnosis. This will make it easier for providers to test people for HIV and will reduce the stigma associated with testing for both patients and providers.

Persons Testifying (Health Care): PRO: Senator Darneille, prime sponsor; Alison Mondt, Lifelong; Maria Courogen, WA State Dept. of Health.

Staff Summary of Public Testimony (Ways & Means): PRO: HIV testing should be offered on opt-out basis. This will lead to earlier diagnosis and save money for taxpayers. It will also reduce the testing stigma. HIV screening will result in no out-of-pocket costs to the patient.

Persons Testifying (Ways & Means): PRO: Alison Lundy, Lifelong.