House	Amendment NO
Offered By	
	ate Committee Substitute for Senate Bill No. 88, Page
2, Section 191.227, Line 47, by inserting after	all of said section and line the following:
"191.630. As used in sections 191.630	and 191.631, the following terms mean:
	mployed as an emergency medical care provider,
	epatitis in any form and any other communicable
	AIDS or HIV infection as defined in section 191.650,
	sposed to the disease as established by rules adopted
	tes of the Centers for Disease Control and Prevention
of the Department of Health and Human Service	
immunodeficiency syndrome (AIDS), cutaneo	
	ngococcal disease, mumps, pertussis, pneumonic
	ome (SARS-CoV), smallpox, tuberculosis, varicella
rule or regulation;	d other such diseases as the department may define by
<del></del>	designed for detection of communicable diseases.
	the Occupational Safety and Health Administration
	se Control and Prevention (CDC) guidelines will be
recommended;	e Control and Trevention (CDC) guidelines will be
<del></del>	same meaning as defined in chapter 58;
	epartment of health and senior services;
- 1 / - 1 / - 1	officer", the person or persons within the entity or
2 ( / 3 + /	nfection control program and for coordinating efforts
surrounding the investigation of an exposure su	
	ounding possible exposure of an emergency care
provider or Good Samaritan to a communicabl	e disease;
(b) Contacting facilities that receive par	tients or clients of potentially exposed emergency care
providers or Good Samaritans to ascertain if a	determination has been made as to whether the patient
or client has had a communicable disease and t	o ascertain the results of that determination; and
	der or Good Samaritan as to whether there is reason
for concern regarding possible exposure;	
	er", <u>a person who is serving as</u> a licensed or certified
	mergency medical care as a first responder, emergency
	ed in section 190.100, <u>firefighter</u> , <u>law enforcement</u>
officer, sheriff, deputy sheriff, registered nurse	
certification or licensure levels adopted by rule	e of the department;
Action Taken	Data

- [(5)] (7) "Exposure", a specific eye, mouth, other mucous membrane, nonintact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties;
  - [(6) "HIV", the same meaning as defined in section 191.650;
- (7)] (8) "Good Samaritan", any person who renders emergency medical assistance or aid within his or her level of training or skill until such time as he or she is relieved of those duties by an emergency care provider;
  - (9) "Hospital", the same meaning as defined in section 197.020;
- (10) "Source patient", person who is sick or injured and requiring the care or services of a Good Samaritan or emergency care provider, for whose blood or other potentially infectious materials have resulted in exposure."; and

Further amend said bill, Page 5, Section 197.100, Line 31, by inserting after all of said section and line the following:

- "191.631. 1. (1) Notwithstanding any other law to the contrary, if [a] <u>an emergency</u> care provider <u>or a Good Samaritan</u> sustains an exposure from a person while rendering emergency health care services, the person to whom the <u>emergency</u> care provider <u>or Good Samaritan</u> was exposed is deemed to consent to a test to determine if the person has a [contagious or infectious] <u>communicable</u> disease and is deemed to consent to notification of the <u>emergency</u> care provider <u>or the Good Samaritan</u> of the results of the test, upon submission of an exposure report by the <u>emergency</u> care provider <u>or the Good Samaritan</u> to the hospital where the person is delivered by the <u>emergency</u> care provider.
- (2) The hospital where the [person] <u>source patient</u> is delivered shall conduct the test. The sample and test results shall only be identified by a number and shall not otherwise identify the person tested.
- (3) A hospital shall have written policies and procedures for notification of [a] an emergency care provider or Good Samaritan pursuant to this section. The hospital shall include local representation of designated infection control officers during the process to develop or review such policies. The policies shall be substantially the same as those in place for notification of hospital employees. The policies and procedures shall include designation of a representative of the emergency care provider to whom notification shall be provided and who shall, in turn, notify the emergency care provider. The identity of the designated [representative] local infection control officer of the emergency care provider shall not be disclosed to the [person] source patient tested. The designated [representative] local infection control officer shall inform the hospital of those parties who receive the notification, and following receipt of such information and upon request of the person tested, the hospital shall inform the person of the parties to whom notification was provided.
- (4) A coroner and medical examiner shall have written policies and procedures for notification of an emergency care provider and Good Samaritan pursuant to this section. The coroner or medical examiner shall include local representation of a designated infection control officer during the process to develop or review such policies. The policies shall be substantially the same as those in place for notification of coroner or medical examiner employees. The policies and procedures shall include designation of a representative of the emergency care providers to whom notification shall be provided and who shall, in turn, notify the emergency care provider. The identity of the designated local infection control officer of the emergency care provider shall not be disclosed to the source patient tested. The designated local infection control officer shall inform the coroner or medical examiner of those parties who receive the notification, and following receipt of

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such information and upon request of the person tested, the coroner or medical examiner shall inform the person of the parties to whom notification was provided.

- 2. If a person tested is diagnosed or confirmed as having a [contagious or infectious] <u>communicable</u> disease pursuant to this section, the hospital, <u>coroner</u>, <u>or medical examiner</u> shall notify the <u>emergency</u> care provider, <u>Good Samaritan</u>, or the designated [representative] <u>local infection control officer</u> of the <u>emergency</u> care provider who shall then notify the care provider.
- 3. The notification to the <u>emergency</u> care provider <u>or the Good Samaritan</u> shall advise the <u>emergency</u> care provider <u>or the Good Samaritan</u> of possible exposure to a particular [contagious or infectious] <u>communicable</u> disease and recommend that the <u>emergency</u> care provider <u>or Good Samaritan</u> seek medical attention. The notification shall be provided as soon as is reasonably possible following determination that the individual has a [contagious or infectious] <u>communicable</u> disease. The notification shall not include the name of the person tested for the [contagious or infectious] <u>communicable</u> disease unless the person consents. If the <u>emergency</u> care provider <u>or Good Samaritan</u> who sustained an exposure determines the identity of the person diagnosed or confirmed as having a [contagious or infectious] <u>communicable</u> disease, the identity of the person shall be confidential information and shall not be disclosed by the <u>emergency</u> care provider <u>or the Good Samaritan</u> to any other individual unless a specific written release <u>is</u> obtained by the person diagnosed with or confirmed as having a [contagious or infectious] <u>communicable</u> disease.
- 4. This section does not require or permit, unless otherwise provided, a hospital to administer a test for the express purpose of determining the presence of a [contagious or infectious] <u>communicable</u> disease; except that testing may be performed if the person consents and if the requirements of this section are satisfied.
- 5. This section does not preclude a hospital, <u>coroner</u>, <u>or medical examiner</u> from providing notification to [a] <u>an emergency</u> care provider <u>or Good Samaritan</u> under circumstances in which the hospital's, <u>coroner's</u>, <u>or medical examiner's</u> policy provides for notification of the hospital's, <u>coroner's</u>, <u>or medical examiner's</u> own employees of exposure to a [contagious or infectious] <u>communicable</u> disease that is not life-threatening if the notice does not reveal a patient's name, unless the patient consents.
- 6. A hospital, coroner, or medical examiner participating in good faith in complying with the provisions of this section is immune from any liability, civil or criminal, which may otherwise be incurred or imposed.
- 7. A hospital's duty of notification pursuant to this section is not continuing but is limited to diagnosis of a [contagious or infectious] <u>communicable</u> disease made in the course of admission, care, and treatment following the rendering of health care services to which notification pursuant to this section applies.
- 8. A hospital, coroner, or medical examiner that performs a test in compliance with this section or that fails to perform a test authorized pursuant to this section is immune from any liability, civil or criminal, which may otherwise be incurred or imposed.
  - 9. [A hospital has no duty to perform the test authorized.
- 10.] The department shall adopt rules to implement this section. The department may determine by rule the [contagious or infectious] <u>communicable</u> diseases for which testing is reasonable and appropriate and which may be administered pursuant to this section. No rule or portion of a rule promulgated under the authority of this section shall become effective unless it has been promulgated pursuant to chapter 536.
- [11.] 10. The [employer of a] agency which employs or sponsors the emergency care provider who sustained an exposure pursuant to this section shall pay the costs of testing for the person who is the source of the exposure and of the testing of the emergency care provider if the exposure was sustained during the course of [employment] the provider's expected duties.

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11. All emergency care providers shall respond to and treat any patient regardless of the status of the patient's HIV or other communicable disease infection.

- 12. Ambulance services and emergency medical response agencies licensed under chapter 190 shall establish and maintain local policies and provide training regarding exposure of personnel to patient blood and body fluids as well as general protection from communicable diseases. The training provided and the policies established shall be in substantial compliance with the appropriate CDC and OSHA guidelines.
- 13. Hospitals, nursing homes, and other medical facilities and practitioners who transfer patients known to have a communicable disease or to be subject to an order of quarantine or an order of isolation shall notify the emergency care providers who are providing the transportation services of the potential risk of exposure to a communicable disease, including communicable diseases of a public health threat.
  - 14. The department shall promulgate regulations regarding all of the following:
- (a) The type of exposure that would prompt notification of the emergency care provider or Good Samaritan, which shall cover, at a minimum, methods of potential transmission of any diseases designated under P.L. 101-381 or diseases additionally identified from the department's list of communicable diseases;
- (b) The process to be used by the emergency care provider, Good Samaritan, licensed facility, coroner, medical examiner, and designated infection control officer for the reports required by this section, the process to be used to evaluate requests received from emergency care providers and Good Samaritans, and for informing emergency care providers and Good Samaritans as to their obligations to maintain the confidentiality of information received; and
- (c) The method by which emergency care providers and Good Samaritans shall be provided information and advice in a timely manner related to the risk of infection from communicable diseases as a result of aid or medical care.
- 302.291. 1. The director, having good cause to believe that an operator is incompetent or unqualified to retain his or her license, after giving ten days' notice in writing by certified mail directed to such person's present known address, may require the person to submit to an examination as prescribed by the director. Upon conclusion of the examination, the director may allow the person to retain his or her license, may suspend, deny or revoke the person's license, or may issue the person a license subject to restrictions as provided in section 302.301. If an examination indicates a condition that potentially impairs safe driving, the director, in addition to action with respect to the license, may require the person to submit to further periodic examinations. The refusal or neglect of the person to submit to an examination within thirty days after the date of such notice shall be grounds for suspension, denial or revocation of the person's license by the director, an associate circuit or circuit court. Notice of any suspension, denial, revocation or other restriction shall be provided by certified mail. As used in this section, the term "denial" means the act of not licensing a person who is currently suspended, revoked or otherwise not licensed to operate a motor vehicle. Denial may also include the act of withdrawing a previously issued license.
- 2. The examination provided for in subsection 1 of this section may include, but is not limited to, a written test and tests of driving skills, vision, highway sign recognition and, if appropriate, a physical and/or mental examination as provided in section 302.173.
- 3. The director shall have good cause to believe that an operator is incompetent or unqualified to retain such person's license on the basis of, but not limited to, a report by:
  - (1) Any certified peace officer;
- (2) Any physician, physical therapist or occupational therapist licensed pursuant to chapter 334; any chiropractic physician licensed pursuant to chapter 331; any registered nurse licensed

pursuant to chapter 335; any psychologist, social worker or professional counselor licensed pursuant to chapter 337; any optometrist licensed pursuant to chapter 336; <u>any emergency medical technician</u> licensed pursuant to chapter 190; or

- (3) Any member of the operator's family within three degrees of consanguinity, or the operator's spouse, who has reached the age of eighteen, except that no person may report the same family member pursuant to this section more than one time during a twelve-month period. The report must state that the person reasonably and in good faith believes the driver cannot safely operate a motor vehicle and must be based upon personal observation or physical evidence which shall be described in the report, or the report shall be based upon an investigation by a law enforcement officer. The report shall be a written declaration in the form prescribed by the department of revenue and shall contain the name, address, telephone number, and signature of the person making the report.
- 4. Any physician, physical therapist or occupational therapist licensed pursuant to chapter 334, any chiropractor licensed pursuant to chapter 331, any registered nurse licensed pursuant to chapter 335, any psychologist, social worker or professional counselor licensed pursuant to chapter 337, or any optometrist licensed pursuant to chapter 336, or any emergency medical technician licensed pursuant to chapter 190 may report to the department any patient diagnosed or assessed as having a disorder or condition that may prevent such person from safely operating a motor vehicle. Such report shall state the diagnosis or assessment and whether the condition is permanent or temporary. The existence of a physician-patient relationship shall not prevent the making of a report by such medical professionals.
- 5. Any person who makes a report in good faith pursuant to this section shall be immune from any civil liability that otherwise might result from making the report. Notwithstanding the provisions of chapter 610 to the contrary, all reports made and all medical records reviewed and maintained by the department of revenue pursuant to this section shall be kept confidential except upon order of a court of competent jurisdiction or in a review of the director's action pursuant to section 302.311.
- 6. The department of revenue shall keep records and statistics of reports made and actions taken against driver's licenses pursuant to this section.
- 7. The department of revenue shall, in consultation with the medical advisory board established by section 302.292, develop a standardized form and provide guidelines for the reporting of cases and for the examination of drivers pursuant to this section. The guidelines shall be published and adopted as required for rules and regulations pursuant to chapter 536. The department of revenue shall also adopt rules and regulations as necessary to carry out the other provisions of this section. The director of revenue shall provide health care professionals and law enforcement officers with information about the procedures authorized in this section. The guidelines and regulations implementing this section shall be in compliance with the federal Americans with Disabilities Act of 1990.
- 8. Any person who knowingly violates a confidentiality provision of this section or who knowingly permits or encourages the unauthorized use of a report or reporting person's name in violation of this section shall be guilty of a class A misdemeanor and shall be liable for damages

which proximately result.

- 9. Any person who intentionally files a false report pursuant to this section shall be guilty of a class A misdemeanor and shall be liable for damages which proximately result.
- 10. All appeals of license revocations, suspensions, denials and restrictions shall be made as required pursuant to section 302.311 within thirty days after the receipt of the notice of revocation, suspension, denial or restriction.
- 11. Any individual whose condition is temporary in nature as reported pursuant to the provisions of subsection 4 of this section shall have the right to petition the director of the department of revenue for total or partial reinstatement of his or her license. Such request shall be made on a form prescribed by the department of revenue and accompanied by a statement from a health care provider with the same or similar license as the health care provider who made the initial report resulting in the limitation or loss of the driver's license. Such petition shall be decided by the director of the department of revenue within thirty days of receipt of the petition. Such decision by the director is appealable pursuant to subsection 10 of this section."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.