**South Carolina General Assembly**

125th Session, 2023-2024

**S. 455**

**STATUS INFORMATION**

General Bill

Sponsors: Senator Verdin

Document Path: SR-0229KM23.docx

Introduced in the Senate on January 26, 2023

Introduced in the House on March 15, 2023

Currently residing in the Senate

Summary: Bloodborne Disease

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

1/26/2023 Senate Introduced and read first time ([Senate Journal‑page 2](h:\sj\20230126.docx))

1/26/2023 Senate Referred to Committee on **Medical Affairs** ([Senate Journal‑page 2](h:\sj\20230126.docx))

3/2/2023 Senate Committee report: Favorable **Medical Affairs** ([Senate Journal‑page 15](h:\sj\20230302.docx))

3/9/2023 Senate Read second time ([Senate Journal‑page 32](h:\sj\20230309.docx))

3/9/2023 Senate Roll call Ayes-38 Nays-0 ([Senate Journal‑page 32](h:\sj\20230309.docx))

3/14/2023 Senate Read third time and sent to House ([Senate Journal‑page 16](h:\sj\20230314.docx))

3/15/2023 House Introduced and read first time ([House Journal‑page 11](h:\hj\20230315.docx))

3/15/2023 House Referred to Committee on **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 11](h:\hj\20230315.docx))

4/25/2024 House Committee report: Favorable **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 23](h:\hj\20240425.docx))

5/2/2024 House Debate adjourned until Tues., 5-7-24 ([House Journal‑page 32](h:\hj\20240502.docx))

5/7/2024 House Requests for debate-Rep(s). MM Smith, Hiott, Carter, Davis, B Newton, Sessions, Guffey, McCravy, West, Hewitt, Anderson, Long ([House Journal‑page 110](h:\hj\20240507.docx))

5/8/2024 House Read second time ([House Journal‑page 244](h:\hj\20240508.docx))

5/8/2024 House Roll call Yeas-109 Nays-0 ([House Journal‑page 244](h:\hj\20240508.docx))

View the latest  [legislative information](https://www.scstatehouse.gov/billsearch.php?billnumbers=455&session=125&summary=B)  at the website

**VERSIONS OF THIS BILL**

[01/26/2023](https://www.scstatehouse.gov/sess125_2023-2024/prever/455_20230126.docx)

[03/02/2023](https://www.scstatehouse.gov/sess125_2023-2024/prever/455_20230302.docx)

[04/25/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/455_20240425.docx)

Indicates Matter Stricken

Indicates New Matter

Committee Report

April 25, 2024

S. 455

Introduced by Senator Verdin

S. Printed 04/25/24--H.

Read the first time March 15, 2023

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The committee on House Medical, Military, Public and Municipal Affairs

To whom was referred a Bill (S. 455) to amend the South Carolina Code of Laws by amending Section 44‑29‑230, relating to testing required when a health care worker is exposed to bloodborne disease, etc., respectfully

Report:

That they have duly and carefully considered the same, and recommend that the same do pass:

S.H. DAVIS for Committee.

statement of estimated fiscal impact

Explanation of Fiscal Impact

State Expenditure

This bill changes testing requirements following exposure to bloodborne diseases and related definitions for health care facilities and professionals. Currently, if a health care worker or emergency response employee is involved in an incident resulting in possible exposure to bloodborne diseases, and a health care professional reasonably believes that the incident may pose a significant risk, the health care professional may require the person, health care worker, or emergency response employee to be tested without consent. The bill expands the tests to include Hepatitis C in addition to Hepatitis B, Human Immunodeficiency Virus infection, including acquired immunodeficiency syndrome. This bill replaces references to physician with health care professionals, includes dentists in the definition of health care professionals, and adds Hepatitis C to the list of bloodborne diseases defined in Section 44-29-230 of the SC Code of Laws.

**Department of Health and Environmental Control.** DHEC is responsible for licensing health care facilities, which includes health care professionals’ offices. The bill will not impact these oversight responsibilities and will not impact expenditures for DHEC.

**Department of Labor, Licensing and Regulation.** LLR is responsible for licensing various health care professionals as defined in the bill. The bill will not impact these licensing responsibilities. Therefore, there is no expenditure impact on LLR.

**Department of Health and Human Services.** DHHS houses Healthy Connections, the state’s Medicaid program. This bill will not impact Medicaid provider rates or reimbursements. Therefore, there will be no impact on the agency.

**Department of Mental Health.** DMH supports the recovery of people with mental illness though a network of community mental health centers, clinics, hospitals, and nursing homes that provide a complete array of medical and support services. DMH already follows the protocols outlined in this bill. Therefore, there will be no fiscal impact to the agency.

**Medical University of South Carolina.** MUSC educates and employs physicians who may be required to conduct blood tests in cases of possible exposure to bloodborne diseases. We are still awaiting a response from MUSC. However, based on responses from all other agencies with health care professionals that come in contact with bodily fluids, we expect the bill will have no fiscal impact on the university. We will update this fiscal impact statement if the agency responds otherwise.

**University of South Carolina.** The USC School of Medicine educates and employs physicians who may be required to conduct blood tests in cases of possible exposure to bloodborne diseases. USC indicates that this bill will have no impact on the institution.

**Department of Corrections.** The implementation of this bill will have no expenditure impact to SCDC because the department currently provides health care service to all employees who are in contact with blood or bodily fluids.

Local Expenditure

The Revenue and Fiscal Affairs Office (RFA) surveyed all forty-six counties and the Municipal Association of South Carolina (MASC) and received responses from three counties and the MASC. Neither the three counties nor the MASC expect the bill to have a significant fiscal impact on local government.

Frank A. Rainwater, Executive Director

Revenue and Fiscal Affairs Office

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A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS BY AMENDING SECTION 44‑29‑230, RELATING TO TESTING REQUIRED WHEN A HEALTH CARE WORKER IS EXPOSED TO BLOODBORNE DISEASE, SO AS TO Replace references to physician with health care professionals, to INCLUDE DENTISTS IN THE DEFINITION OF HEALTH CARE PROFESSIONALS, AND TO ADD HEPATITIS C TO THE LIST OF BLOODBORNE DISEASES.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Section 44‑29‑230 of the S.C. Code is amended to read:

Section 44‑29‑230. (A) While working with a person or a person's blood or body fluids, if a health care worker or emergency response employee is involved in an incident resulting in possible exposure to bloodborne diseases, and a health care professional based on reasonable medical judgment has cause to believe that the incident may pose a significant risk to the health care worker or emergency response employee, the health care professional may require the person, the health care worker, or the emergency response employee to be tested without his consent.

(B) The test results must be given to the health care professional who shall report the results and assure the provision of post‑test counseling to the health care worker or emergency response employee, and the person who is tested. The test results also shall be reported to the Department of Health and Environmental Control in a manner prescribed by law.

(C) No physician, hospital, or other health care provider may be held liable for conducting the test or the reporting of test results under this section.

(D) For purposes of this section:

(1) “Person” means a patient at a health care facility or physician's health care professional’s office, an inmate at a state or local correctional facility, an individual under arrest, or an individual in the custody of or being treated by a health care worker or an emergency response employee.

(2) “Emergency response employee” means firefighters, law enforcement officers, paramedics, emergency medical technicians, medical residents, medical trainees, trainees of an emergency response employee as defined herein, and other persons, including employees of legally organized and recognized volunteer organizations without regard to whether these employees receive compensation, who in the course of their professional duties respond to emergencies.

(3) “Bloodborne diseases” means Hepatitis B, Hepatitis C, or Human Immunodeficiency Virus infection, including Acquired Immunodeficiency Syndrome.

(4) “Significant risk” means a finding of facts relating to a human exposure to an etiologic agent for a particular disease, based on reasonable medical judgments given the state of medical knowledge, about the:

(a) nature of the risk;

(b) duration of the risk;

(c) severity of the risk;

(d) probabilities the disease will be transmitted and will cause varying degrees of harm.

(5) “Health care professional” means a physician, a dentist, an epidemiologist, or infection control practitioner.

(6) “Health care worker” means a person licensed as a health care provider under Title 40, a person registered under the laws of this State to provide health care services, an employee of a health care facility as defined in Section 44‑7‑130(10), or an employee in a physician's health care professional’s office.

(E) The cost of any test conducted under this section must be paid by the:

(1) person being tested;

(2) State in the case of indigents; or

(3) public or private entity employing the health care worker or emergency response employee if the cost is not paid pursuant to subitems (1) and (2) above.

SECTION 2. This act takes effect upon approval by the Governor.

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