

**SENATE . . . . . No. 2416**

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**The Commonwealth of Massachusetts**

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**In the Year Two Thousand Ten**  
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An Act promoting routine HIV screening in the Commonwealth.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 111 of the General Laws is hereby amended by striking out Section  
2   70F and inserting in place thereof the following section:-

3           No health care facility, as defined in section 70E, physician, or health care provider shall  
4   test any person for the presence of the HIV antibody or antigen without first verbally informing  
5   the patient that the test is planned and that he or she has the right to decline the test.

6           No health care facility, as so defined, physician or health care provider shall (1) disclose  
7   the results of an HIV test to any person other than the subject thereof without first obtaining the  
8   subject’s written informed consent, or (2) identify the subject of such test to any person without  
9   first obtaining the subject’s written informed consent; provided that the notation in the patient’s  
10   medical record of test results, the ordering of a test, or a patient’s decision to decline a test shall  
11   not constitute a violation of this section.

12           No employer shall require an HIV test as a condition for employment.

13           Whoever violates the provision of this section shall be deemed to have violated section  
14 two of chapter 93A.

15           SECTION 2. Chapter 111 of the General Laws is hereby amended by inserting after  
16 section 70F, the following section:-

17           Section 70F 1/2. The board of registration in medicine, established pursuant to section 10  
18 of Chapter 13, in collaboration with the commissioner of public health, shall promulgate  
19 regulations relative to the education and training of health care providers in the administration of  
20 HIV testing and post test counseling, including, but not limited to, continuing medical education  
21 requirements. For the purpose of this section, continuing medical education credits shall include  
22 only those earned through continuing medical education programs approved by the office of  
23 HIV/AIDS within the department of public health and accepted by the board. Nothing in this  
24 section shall affect the total hours of continuing medical education required by the board.

25           SECTION 3. Notwithstanding any general or special law to the contrary, the  
26 commissioner of public health shall convene a task force to study the promotion of widespread,  
27 routine, integrated HIV testing in medical settings and factors that contribute to the late entrance  
28 into care for persons living with HIV. The study shall include, but not be limited to, the  
29 identification of current best practices and recommendations for improving testing and treatment  
30 access for both at-risk populations and populations that are disproportionately undiagnosed and  
31 the identification of best practices for linking people to care.

32           The task force shall be comprised of the following members: the commissioner of public  
33 health or a designee, who shall serve as chair; the director of the Bureau of Infectious Disease or  
34 a designee; the director of the Office of HIV/AIDS; the director of the HIV/AIDS Surveillance

35 program or a designee; at least one member of the MDPH Statewide Consumer Advisory Board;  
36 at least one member of the Massachusetts HIV Prevention Planning Group ; the directors of three  
37 HIV and AIDS Community Based Organizations in Massachusetts or their designees; three  
38 Massachusetts-licensed physicians with research or clinical expertise in HIV; and at least one  
39 representative each from the; the Massachusetts Medical Society; the Massachusetts Nurses  
40 Association; the Massachusetts Hospital Association; the Massachusetts Council of Community  
41 Hospitals; and the Massachusetts League of Community Health Centers.

42           The commissioner shall convene the task force not later than 30 days after the passage of  
43 this act. The commissioner shall submit the task force’s findings and legislative  
44 recommendations, if any, to the joint committee on public health and the joint committee on  
45 health care financing not later than 6 months following their first meeting.