

HOUSE BILL 24-1456

BY REPRESENTATIVE(S) Marvin and Daugherty, Amabile, Bacon, Bird, Boesenecker, Brown, Duran, Froelich, Garcia, Hamrick, Hernandez, Herod, Jodeh, Joseph, Kipp, Lieder, Lindsay, Lindstedt, Mabrey, Marshall, Mauro, McCormick, McLachlan, Rutinel, Sirota, Snyder, Vigil, Woodrow, Young, McCluskie;

also SENATOR(S) Michaelson Jenet, Bridges, Buckner, Cutter, Exum, Fields, Ginal, Hinrichsen, Jaquez Lewis, Marchman, Mullica, Priola.

CONCERNING TESTING FOR SYPHILIS DURING THE PERINATAL PERIOD.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Legislative declaration. (1) The general assembly finds and declares that:

- (a) Syphilis is a bacterial infection that, if untreated, can progress to severe infection of the brain, eyes, and other body organs;
- (b) Congenital syphilis occurs when the infection is passed to a fetus during pregnancy and can cause miscarriage, stillbirth, severe congenital abnormalities, or death. The department of health care policy and financing estimates that the cost of care for a baby born with syphilis is approximately

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

\$30,000 in the baby's first year of life.

- (c) According to the federal centers for disease control and prevention, over ten times as many babies were born with syphilis in 2022 than in 2012, the highest number of infected babies reported in a single year since 1992;
- (d) Colorado has experienced a 900 percent increase in congenital syphilis cases since 2017, based on 2023 provisional data;
- (e) During the first quarter of 2024, there have already been 22 reported congenital syphilis cases, including five stillbirths and two fetal deaths;
- (f) Congenital syphilis disproportionately impacts Hispanic and Black communities;
- (g) The spread of syphilis and congenital syphilis is preventable when caught early and treated in a timely manner with routine and inexpensive antibiotics like penicillin;
- (h) Currently, Colorado requires only one syphilis test during the prenatal period: In the first trimester or when initiating prenatal care;
- (i) Reinfection or inadequate treatment can result in a syphilis infection being present after the first trimester, putting the baby at risk of congenital syphilis;
- (j) Additional syphilis testing in the third trimester and at delivery provides additional opportunities to identify and treat an infection;
- (k) At least 17 other states require testing later in pregnancy in addition to testing during the first trimester, including North Carolina, Texas, Georgia, and Arizona, which have laws that require testing during the first trimester, during the third trimester, and at delivery of the baby; and
- (1) Therefore, to reduce the rapidly increasing rates of syphilis and congenital syphilis infection in Colorado, it is necessary and appropriate to require additional testing throughout the prenatal period, including during the third trimester and at delivery of the baby.

SECTION 2. In Colorado Revised Statutes, **amend** 25-4-201 as follows:

- 25-4-201. Blood testing during pregnancy HIV syphilis rules - repeal. (1) (a) Every EACH licensed health-care provider authorized to provide care to a pregnant woman PERSON WHO IS PREGNANT in this state for conditions relating to her THE pregnancy during the period of gestation or at delivery shall take or cause to be taken a sample of blood of the woman PERSON at the time of the first professional visit or during the first trimester for testing pursuant to this section. The blood specimen obtained shall be submitted to an approved laboratory for a standard serological test for syphilis and HIV. Every other person permitted by law to attend TO A PERSON WHO IS pregnant women in this state but not permitted by law to take blood samples shall cause a sample of blood of each PERSON UNDER THE ATTENDANT'S CARE WHO IS pregnant woman to be taken by a licensed health-care provider authorized to take blood samples and shall have the sample submitted to an approved laboratory for a standard serological test for syphilis and HIV. A PERSON WHO IS pregnant woman may decline to be tested as specified in this subsection (1) (1)(a), in which case the licensed health-care provider shall document that fact in her THE PERSON'S medical record.
 - (b) This subsection (1) is repealed, effective January 1, 2025.
- (2) (a) If a PERSON WHO IS pregnant woman entering ENTERS a hospital for delivery AND has not been tested for HIV during her THE pregnancy OR THERE IS NO AVAILABLE RECORD OF TESTING, the hospital shall notify the woman PERSON WHO IS PREGNANT that she THE PERSON will be tested for HIV unless she THE PERSON objects and declines the test. If the woman PERSON declines to be tested, the hospital shall document that fact in the pregnant woman's PERSON'S medical record.
- (b) EACH LICENSED HEALTH-CARE PROVIDER AUTHORIZED TO PROVIDE CARE TO A PERSON WHO IS PREGNANT IN THIS STATE SHALL, FOR ALL PERSONS WHO ARE PREGNANT UNDER THE CARE OF THE LICENSED HEALTH-CARE PROVIDER, TAKE, OR CAUSE TO BE TAKEN, A BLOOD SAMPLE AND SUBMIT THE BLOOD SAMPLE TO AN APPROVED LABORATORY FOR A STANDARD SEROLOGICAL TEST FOR HIV. IF THE PERSON DECLINES TO BE TESTED, THE LICENSED HEALTH-CARE PROVIDER SHALL DOCUMENT THAT FACT IN THE PERSON'S MEDICAL RECORD.

- (3) (a) On or before January 1, 2025, the state board of Health created in section 25-1-103 shall promulgate rules concerning prenatal testing standards for syphilis, including frequency of testing.
- (b) At least once every three years, the department of public health and environment shall review the rules promulgated pursuant to this section for alignment with national prenatal testing recommendations for sexually transmitted infections as well as the department of public health and environment's infection control duties established in section 25-4-408. Before each review of the rules, the department of public health and environment shall make relevant stakeholders aware of the review, including health-care providers and local public health agencies.

SECTION 3. In Colorado Revised Statutes, 25-4-406, **amend** (1) introductory portion; and **add** (1.5) as follows:

- **25-4-406.** Reports confidentiality. (1) The public health reports required pursuant to section 25-4-405 and any records resulting from compliance with that section held by the state department and local COUNTY AND DISTRICT public health agencies, or any health-care provider, facility, third-party payer, physician, clinic, laboratory, blood bank, health records database, or other agency, are confidential information. The information may SHALL only be released, shared with any agency or institution, or made public, upon subpoena, search warrant, discovery proceedings, or otherwise, under the following circumstances:
- (1.5) IN ACCORDANCE WITH SUBSECTION (1)(a) OF THIS SECTION, FOR STATISTICAL PURPOSES, THE STATE DEPARTMENT SHALL MAKE AVAILABLE TO COUNTY AND DISTRICT PUBLIC HEALTH AGENCIES DE-IDENTIFIED CASE RATE DATA FOR SYPHILIS THAT IS SPECIFIC TO THE COUNTY OR DISTRICT, WHICH DATA MUST REMAIN CONFIDENTIAL PURSUANT TO THIS SECTION.
- **SECTION 4.** Safety clause. The general assembly finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety or for appropriations for

the support and maintenance of the departments of the state and state institutions.

Julie McCluskie

SPEAKER OF THE HOUSE

OF REPRESENTATIVES

Steve Fenberg PRESIDENT OF THE SENATE

Robin Jones

CHIEF CLERK OF THE HOUSE OF REPRESENTATIVES

Circle & Markwell

Cindi L. Markwell **SECRETARY OF** THE SENATE

APPROVED Wednesday Jun 5 2024 (Date and Time)

Jared S. Polis

GOVERNOR OF THE STATE OF COLORADO