

CHAPTER 271

HEALTH AND ENVIRONMENT

HOUSE BILL 99-1118

BY REPRESENTATIVES Johnson, Alexander, Clarke, Coleman, Gordon, Gotlieb, Hoppe, Kaufman, Kester, Larson, Leyba, Mace, Plant, Saliman, Scott, Smith, Taylor, Tochtrop, Tool, Tupa, Veiga, Witwer, and Zimmerman; also SENATORS Teck, Anderson, Blickensderfer, Dennis, Hernandez, Martinez, Perlmutter, Powers, Reeves, Rupert, Tanner, Wattenberg, and Wham.

AN ACT

CONCERNING IMPLEMENTATION OF A PUBLIC HEALTH PROGRAM TO ADDRESS HEPATITIS C, AND MAKING AN APPROPRIATION THEREFOR.

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

SECTION 1. Article 4 of title 25, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW PART to read:

**PART 20
HEPATITIS C EDUCATION AND SCREENING PROGRAM**

25-4-2001. Short title. THIS PART 20 SHALL BE KNOWN AND MAY BE CITED AS THE "HEPATITIS C PROGRAM ACT".

25-4-2002. Legislative declaration. (1) THE GENERAL ASSEMBLY HEREBY FINDS, DETERMINES, AND DECLARES THAT:

(a) HEPATITIS C IS A SILENT KILLER, BEING LARGELY ASYMPTOMATIC UNTIL IRREVERSIBLE LIVER DAMAGE MAY HAVE OCCURRED;

(b) HEPATITIS C HAS BEEN CHARACTERIZED BY THE WORLD HEALTH ORGANIZATION AS A DISEASE OF PRIMARY CONCERN TO HUMANITY;

(c) CURRENTLY, APPROXIMATELY FOUR MILLION FIVE HUNDRED THOUSAND AMERICANS ARE INFECTED WITH HEPATITIS C, AND THERE ARE APPROXIMATELY THIRTY THOUSAND NEW INFECTIONS OCCURRING EACH YEAR IN THE UNITED STATES;

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

(d) THE CENTER FOR DISEASE CONTROL ESTIMATES THAT APPROXIMATELY TWELVE THOUSAND INDIVIDUALS DIE EACH YEAR DUE TO THE CONSEQUENCES OF HEPATITIS C, AND THIS NUMBER CONTINUES TO GROW EACH YEAR;

(e) HEPATITIS C IS CONSIDERED SUCH A PUBLIC HEALTH THREAT THAT THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS LAUNCHED A COMPREHENSIVE PLAN TO ADDRESS IT, BEGINNING WITH THE IDENTIFICATION AND NOTIFICATION OF THE HUNDREDS OF THOUSANDS OF PERSONS INADVERTENTLY EXPOSED TO HEPATITIS C THROUGH BLOOD TRANSFUSION; AND

(f) IN THE ABSENCE OF A VACCINE FOR HEPATITIS C, EMPHASIS MUST BE PLACED ON OTHER MEANS OF DISEASE AWARENESS AND PREVENTION, INCLUDING BUT NOT LIMITED TO EDUCATION OF POLICE OFFICERS, FIREFIGHTERS, HEALTH CARE PROFESSIONALS, AND THE GENERAL PUBLIC. THIS APPROACH MAY BE THE ONLY MEANS OF HALTING THE SPREAD OF THIS DEVASTATING DISEASE.

(2) THE GENERAL ASSEMBLY FURTHER DECLARES THAT THE PURPOSE OF THIS PART 20 IS TO CREATE AND DEVELOP A PROGRAM THAT WILL:

(a) HEIGHTEN AWARENESS AND ENHANCE KNOWLEDGE AND UNDERSTANDING OF HEPATITIS C BY DISSEMINATING EDUCATIONAL MATERIALS AND INFORMATION ABOUT SERVICES AND STRATEGIES FOR DETECTION AND TREATMENT TO PATIENTS AND THE GENERAL PUBLIC;

(b) PROMOTE PUBLIC AWARENESS AND KNOWLEDGE ABOUT THE RISK FACTORS, THE VALUE OF EARLY DETECTION, AND THE OPTIONS AVAILABLE FOR THE TREATMENT OF HEPATITIS C;

(c) UTILIZE ANY AVAILABLE TECHNICAL ASSISTANCE FROM AND ANY EDUCATIONAL AND TRAINING RESOURCES AND SERVICES THAT HAVE BEEN DEVELOPED BY ORGANIZATIONS WITH APPROPRIATE EXPERTISE AND KNOWLEDGE OF HEPATITIS C;

(d) DESIGN A MODEL SCREENING PROCESS TO PROVIDE GUIDELINES FOR HEALTH CARE PROFESSIONALS TO USE TO PREVENT FURTHER TRANSMISSION OF THE HEPATITIS C VIRUS AND PREVENT ONSET OF CHRONIC LIVER DISEASE CAUSED BY HEPATITIS C BY DETECTING AND TREATING CHRONIC HEPATITIS C VIRUS INFECTION;

(e) EVALUATE EXISTING HEPATITIS C SUPPORT SERVICES IN THE COMMUNITY AND ASSESS THE NEED FOR IMPROVING THE QUALITY AND ACCESSIBILITY OF THESE SERVICES; AND

(f) PROVIDE EASY ACCESS TO CLEAR, COMPLETE, AND ACCURATE HEPATITIS C AND PATIENT REFERRAL SERVICES INFORMATION.

(3) THE GENERAL ASSEMBLY FURTHER FINDS, DETERMINES, AND DECLARES THAT IT IS THE INTENT OF THE GENERAL ASSEMBLY TO PROVIDE FUNDING FOR THE HEPATITIS C PROGRAM CREATED IN THIS PART 20 FOR THE FISCAL YEAR BEGINNING JULY 1, 1999, AND TO REVIEW THE EFFECTIVENESS OF AND THE NECESSITY FOR THE HEPATITIS C PROGRAM IN DETERMINING THE REASONABLENESS AND THE AMOUNT OF FUTURE FUNDING, IF ANY.

25-4-2003. Definitions. AS USED IN THIS PART 20, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "CDC" MEANS THE CENTERS FOR DISEASE CONTROL AND PREVENTION.

(2) "DEPARTMENT" MEANS THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT.

(3) "HEALTH CARE PROFESSIONAL" MEANS ANY PERSON LICENSED IN THIS STATE OR ANY OTHER STATE TO PRACTICE MEDICINE, CHIROPRACTIC, NURSING, PHYSICAL THERAPY, PODIATRY, DENTISTRY, PHARMACY, OPTOMETRY, OR OTHER HEALING ARTS. THE TERM INCLUDES ANY PROFESSIONAL CORPORATION OR OTHER PROFESSIONAL ENTITY COMPRISED OF SUCH HEALTH CARE PROVIDERS AS PERMITTED BY THE LAWS OF THIS STATE, AS WELL AS CERTIFIED SUBSTANCE ABUSE COUNSELORS.

(4) "HEPATITIS C" MEANS A LIVER DISEASE CAUSED BY THE HEPATITIS C VIRUS AND IS ALSO KNOWN AS NON-A-NON-B HEPATITIS.

(5) "OUTREACH SERVICE" MEANS SERVICES INCLUDING, BUT NOT LIMITED TO, PROVISION OF EDUCATIONAL MATERIALS AND INFORMATION ON SCREENING AND PROVISION OF COUNSELING SERVICES.

(6) "PROGRAM" MEANS THE HEPATITIS C PROGRAM CREATED IN THIS PART 20.

(7) "SCREENING" MEANS ADMINISTRATION OF AN EXAMINATION OR TEST EXCLUSIVELY FOR THE PURPOSE OF ASCERTAINING THE EXISTENCE OF ANY PHYSIOLOGICAL ABNORMALITY THAT MIGHT BE INDICATIVE OF THE PRESENCE OF DISEASE.

25-4-2004. Powers and duties of the executive director - hepatitis C program.

(1) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT SHALL DESIGN AND IMPLEMENT A HEPATITIS C PROGRAM TO:

(a) COORDINATE WITH LOCAL PUBLIC HEALTH OFFICIALS, HEALTH CARE PROFESSIONALS, PUBLIC INSTITUTIONS, AND COMMUNITY ORGANIZATIONS TO IDENTIFY HIGH RISK POPULATIONS, INCLUDING THOSE ASSOCIATED WITH CURRENTLY UNDERSTOOD MEANS OF TRANSMISSION, TO ASSIST IN IMPLEMENTING A MODEL SCREENING PROCESS, AND TO PROVIDE INFORMATION ON REFERRAL SERVICES OR TO OTHERWISE ASSIST IN OBTAINING TREATMENT FOR THOSE WITH HEPATITIS C INFECTION;

(b) EDUCATE AND PROVIDE OUTREACH SERVICES RELATED TO HEPATITIS C TO THE GENERAL PUBLIC. AT A MINIMUM, PUBLIC EDUCATION ON THESE ISSUES SHALL BE DESIGNED TO:

(I) PROVIDE BASIC INFORMATION ABOUT THE PREVALENCE, TRANSMISSION, RISKS, CARE, AND TREATMENT OF HEPATITIS C;

(II) PROVIDE INFORMATION ABOUT CO-INFECTION WITH HEPATITIS C AND THE IMPLICATIONS OF CO-INFECTION FOR OTHER SIMILARLY TRANSMITTED DISEASES;

(III) PROVIDE INFORMATION ON SCREENING SERVICES AVAILABLE IN THE COMMUNITY;

(IV) COORDINATE WITH NATIONAL PUBLIC EDUCATION EFFORTS RELATED TO THE IDENTIFICATION AND NOTIFICATION OF RECIPIENTS OF BLOOD FROM HEPATITIS C VIRUS POSITIVE DONORS;

(V) STIMULATE INTEREST AMONG AND COORDINATE WITH COMMUNITY-BASED ORGANIZATIONS TO SPONSOR COMMUNITY FORUMS AND TO UNDERTAKE OTHER APPROPRIATE COMMUNITY OUTREACH ACTIVITIES; AND

(VI) EMPLOY PUBLIC COMMUNICATION STRATEGIES, INCLUDING THE PRINT MEDIA, RADIO, TELEVISION, VIDEO, INTERNET, AND ANY OTHER APPROPRIATE FORM OF COMMUNICATION.

(2) THE PROGRAM DESCRIBED IN SUBSECTION (1) OF THIS SECTION SHALL BE IMPLEMENTED WITHIN AVAILABLE APPROPRIATIONS. IF AVAILABLE APPROPRIATIONS ARE INADEQUATE TO FUND THE ENTIRE PROGRAM DESCRIBED IN SUBSECTION (1) OF THIS SECTION, THE PROGRAM SHALL BE IMPLEMENTED IN STAGES, COMMENCING WITH THE COORDINATION WITH LOCAL PUBLIC HEALTH OFFICIALS, HEALTH CARE PROFESSIONALS, PUBLIC INSTITUTIONS AND COMMUNITY ORGANIZATIONS, AS DESCRIBED IN PARAGRAPH (a) OF SUBSECTION (1) OF THIS SECTION, AND FOLLOWED BY THE EDUCATION OF THE GENERAL PUBLIC, AS DESCRIBED IN PARAGRAPH (b) OF SUBSECTION (1) OF THIS SECTION.

(3) THE DEPARTMENT IS AUTHORIZED TO ENTER INTO CONTRACTS THAT ARE NECESSARY FOR THE IMPLEMENTATION AND OPERATION OF THE PROGRAM.

(4) AFTER IMPLEMENTATION OF SUBSECTION (1) OF THIS SECTION, IF FUNDING IS AVAILABLE, THE EXECUTIVE DIRECTOR OF THE DEPARTMENT SHALL HAVE THE AUTHORITY TO IMPLEMENT A SYSTEM TO:

(a) COLLECT AND ANALYZE REPORTS OF CASES OF HEPATITIS C, WITHOUT REGARD TO THE DISTINCTION BETWEEN CHRONIC AND ACUTE;

(b) INVESTIGATE ALL REPORTED CASES OF HEPATITIS C AND MAINTAIN RECORDS OF POSSIBLE SOURCES OF TRANSMISSION;

(c) PREPARE A STATISTICAL REPORT ON THE NUMBERS AND TYPES OF REPORTED HEPATITIS C CASES; AND

(d) REPORT CASES TO THE CDC TO THE EXTENT PERMITTED BY THE CDC.

(5) ON OR BEFORE JANUARY 1, 2000, THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT SHALL REPORT TO THE JOINT BUDGET COMMITTEE OF THE GENERAL ASSEMBLY ON THE EFFECTIVENESS OF AND THE NECESSITY FOR THE HEPATITIS C PROGRAM IN ORDER FOR SUCH COMMITTEE TO CONSIDER THE REASONABLENESS AND AMOUNT OF ANY FUTURE FUNDING TO THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT FOR THE HEPATITIS C PROGRAM.

SECTION 2. Appropriation - adjustment in 1999 long bill. (1) In addition to

any other appropriation, there is hereby appropriated, out of any moneys in the general fund not otherwise appropriated, to the department of public health and environment, for the fiscal year beginning July 1, 1999, the sum of two hundred thousand dollars (\$200,000), or so much thereof as may be necessary, for the implementation of this act.

(2) For the implementation of this act, appropriations made in the annual general appropriations act for the fiscal year beginning July 1, 1999, shall be adjusted as follows:

(a) The general fund appropriation to the capital construction fund outlined in section 3 (1) (f) is reduced by two hundred thousand dollars (\$200,000).

(b) The capital construction fund exempt appropriation to the department of transportation, construction projects, is reduced by two hundred thousand dollars (\$200,000).

SECTION 3. Effective date. This act shall take effect July 1, 1999.

SECTION 4. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: June 1, 1999