

By the Committee on Health Policy; and Senator Montford

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1                                   A bill to be entitled  
2       An act relating to laboratory screening; amending s.  
3       381.004, F.S.; clarifying that certain requirements  
4       related to the reporting of positive HIV test results  
5       to county health departments apply only to testing  
6       performed in a nonhealth care setting; amending s.  
7       381.0202, F.S.; authorizing the Department of Health  
8       to perform laboratory testing for other states;  
9       amending s. 381.983, F.S.; redefining the term  
10      "elevated blood-lead levels"; amending s. 381.984,  
11      F.S.; revising requirements of a public information  
12      initiative on lead-based-paint hazards; revising  
13      requirements on the distribution of information on  
14      childhood lead poisoning developed by the State  
15      Surgeon General or his or her designee; amending s.  
16      381.985, F.S.; revising requirements for the State  
17      Surgeon General's program for early identification of  
18      persons at risk of having elevated blood-lead levels;  
19      requiring the department to maintain records showing  
20      elevated blood-lead levels; requiring that health care  
21      providers report to the individual who was screened  
22      the results that indicate elevated blood-lead levels;  
23      amending s. 383.14, F.S.; authorizing the State Public  
24      Health Laboratory to release the results of a  
25      newborn's hearing and metabolic tests to certain  
26      individuals; requiring the department to promote the  
27      availability of services to promote detection of  
28      genetic conditions; clarifying that the membership of  
29      the Genetics and Newborn Screening Advisory Council

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30 must include one member each from four of the medical  
31 schools in this state; providing an effective date.  
32

33 Be It Enacted by the Legislature of the State of Florida:  
34

35 Section 1. Paragraph (a) of subsection (2) of section  
36 381.004, Florida Statutes, is amended to read:

37 381.004 HIV testing.—

38 (2) HUMAN IMMUNODEFICIENCY VIRUS TESTING; INFORMED CONSENT;  
39 RESULTS; COUNSELING; CONFIDENTIALITY.—

40 (a) Before performing an HIV test:

41 1. In a health care setting, the person to be tested shall  
42 be notified orally or in writing that the test is planned and  
43 that he or she has the right to decline the test. If the person  
44 to be tested declines the test, such decision shall be  
45 documented in the medical record. A person who has signed a  
46 general consent form for medical care is not required to sign or  
47 otherwise provide a separate consent for an HIV test during the  
48 period in which the general consent form is in effect.

49 2. In a nonhealth care setting, a provider shall obtain the  
50 informed consent of the person upon whom the test is to be  
51 performed. Informed consent shall be preceded by an explanation  
52 of the right to confidential treatment of information  
53 identifying the subject of the test and the results of the test  
54 as provided by law. The provider shall also inform the test  
55 subject that a positive HIV test result will be reported to the  
56 county health department with sufficient information to identify  
57 the test subject and provide him or her with information on the  
58 availability and location of sites where anonymous testing is

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59 performed. As required in paragraph (3) (c), each county health  
60 department shall maintain a list of sites where anonymous  
61 testing is performed which includes site locations, telephone  
62 numbers, and hours of operation.

63  
64 ~~The test subject shall also be informed that a positive HIV test~~  
65 ~~result will be reported to the county health department with~~  
66 ~~sufficient information to identify the test subject and of the~~  
67 ~~availability and location of sites at which anonymous testing is~~  
68 ~~performed. As required in paragraph (3) (c), each county health~~  
69 ~~department shall maintain a list of sites at which anonymous~~  
70 ~~testing is performed, including the locations, telephone~~  
71 ~~numbers, and hours of operation of the sites.~~

72 Section 2. Section 381.0202, Florida Statutes, is amended  
73 to read:

74 381.0202 Laboratory services.—

75 (1) The department shall establish and maintain, in  
76 suitable and convenient places in the state, laboratories for  
77 microbiological and chemical analyses and any other purposes it  
78 determines necessary for the protection of the public health.

79 (2) The department may contract or agree with any person or  
80 public or private agency to provide laboratory services relating  
81 to or having potential impact on the public health or relating  
82 to the health of clients directly under the care of the state.

83 (3) The department is authorized to establish and collect  
84 reasonable fees and charges for laboratory services provided.  
85 Such fees and charges shall be deposited in a trust fund  
86 administered by the department and shall be used solely for this  
87 purpose.

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88           (4) The department may perform laboratory testing related  
89 to public health for other states on a fee-for-service basis.

90           Section 3. Subsection (3) of section 381.983, Florida  
91 Statutes, is amended to read:

92           381.983 Definitions.—As used in this act, the term:

93           (3) "Elevated blood-lead level" means a quantity of lead in  
94 the whole venous blood, measured from a venous or capillary draw  
95 expressed in micrograms per deciliter (ug/dL), which exceeds the  
96 cutpoint specified in department rule. The determination of  
97 elevated blood-lead level must be based on national  
98 recommendations developed by the Council of State and  
99 Territorial Epidemiologists and the Centers for Disease Control  
100 and Prevention. 10 ug/dL or such other level as specifically  
101 provided in this act.

102           Section 4. Subsections (2) and (3) of section 381.984,  
103 Florida Statutes, are amended to read:

104           381.984 Educational programs.—

105           (2) PUBLIC INFORMATION INITIATIVE.—The Governor, in  
106 conjunction with the State Surgeon General and his or her  
107 designee, shall sponsor a series of public service announcements  
108 on radio, television, or the Internet, or in ~~and~~ print media  
109 about the nature of lead-based-paint hazards, the importance of  
110 standards for lead poisoning prevention in properties, and the  
111 purposes and responsibilities set forth in this act. In  
112 developing and coordinating this public information initiative,  
113 the sponsors shall seek the participation and involvement of  
114 private industry organizations, including those involved in real  
115 estate, insurance, mortgage banking, or ~~and~~ pediatrics.

116           (3) DISTRIBUTION OF INFORMATION LITERATURE ~~LITERATURE~~ ABOUT CHILDHOOD

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117 LEAD POISONING. ~~By January 1, 2007,~~ The State Surgeon General or  
 118 his or her designee shall develop culturally and linguistically  
 119 appropriate information and distribution methods ~~pamphlets~~  
 120 regarding childhood lead poisoning, the importance of testing  
 121 for elevated blood-lead levels, prevention of childhood lead  
 122 poisoning, treatment of childhood lead poisoning, and, as where  
 123 appropriate, the requirements of this act. This ~~These~~  
 124 information ~~pamphlets~~ shall be distributed to parents or ~~the~~  
 125 ~~other~~ legal guardians of children 6 years of age or younger on  
 126 the following occasions:

127 (a) By a health care provider at the time of a child's  
 128 birth and at the time of any childhood immunization or  
 129 vaccination unless it is established that such information  
 130 ~~pamphlet~~ has been provided ~~previously~~ to the parent or legal  
 131 guardian by the health care provider within the prior 12 months.

132 (b) By the owner or operator of any child care facility or  
 133 preschool or kindergarten class on or before each October 15 ~~of~~  
 134 ~~the calendar year~~.

135 Section 5. Section 381.985, Florida Statutes, is amended to  
 136 read:

137 381.985 Screening program.—

138 (1) The State Surgeon General shall establish guidelines a  
 139 ~~program~~ for early identification of persons at risk of having  
 140 elevated blood-lead levels and for the systematic screening of ~~-~~  
 141 ~~Such program shall systematically screen~~ children under 6 years  
 142 of age in the target populations identified in subsection (2)  
 143 for the presence of elevated blood-lead levels. Children within  
 144 the specified target populations shall be screened with a blood-  
 145 lead test at age 12 months and age 24 months, or between the

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146 ages of 36 months and 72 months if they have not previously been  
147 screened. The State Surgeon General shall, after consultation  
148 with recognized professional medical groups and such other  
149 sources as the State Surgeon General deems appropriate, adopt  
150 rules to follow established national guidelines or  
151 recommendations such as those issued by the Council of State and  
152 Territorial Epidemiologists and the Centers for Disease Control  
153 and Prevention related to reporting elevated blood-lead levels  
154 and screening results to the department pursuant to this  
155 section. ~~promulgate rules establishing:~~

156 ~~(a) The means by which and the intervals at which such~~  
157 ~~children under 6 years of age shall be screened for lead~~  
158 ~~poisoning and elevated blood-lead levels.~~

159 ~~(b) Guidelines for the medical followup on children found~~  
160 ~~to have elevated blood-lead levels.~~

161 (2) In developing screening programs to identify persons at  
162 risk with elevated blood-lead levels, priority shall be given to  
163 persons within the following categories:

164 (a) All children enrolled in the Medicaid program at ages  
165 12 months and 24 months, or between the ages of 36 months and 72  
166 months if they have not previously been screened.

167 (b) Children under the age of 6 years exhibiting delayed  
168 cognitive development or other symptoms of childhood lead  
169 poisoning.

170 (c) Persons at risk residing in the same household, or  
171 recently residing in the same household, as another person at  
172 risk with an elevated a blood-lead level ~~of 10 ug/dL or greater.~~

173 (d) Persons at risk residing, or who have recently resided,  
174 in buildings or geographical areas in which significant numbers

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175 of cases of lead poisoning or elevated blood-lead levels have  
176 recently been reported.

177 (e) Persons at risk residing, or who have recently resided,  
178 in an affected property contained in a building that during the  
179 preceding 3 years has been subject to enforcement for violations  
180 of lead-poisoning-prevention statutes, ordinances, rules, or  
181 regulations ~~as specified by the State Surgeon General.~~

182 (f) Persons at risk residing, or who have recently resided,  
183 in a room or group of rooms contained in a building whose owner  
184 also owns a building containing affected properties which,  
185 during the preceding 3 years, has been subject to an enforcement  
186 action for a violation of lead-poisoning-prevention statutes,  
187 ordinances, rules, or regulations.

188 (g) Persons at risk residing in other buildings or  
189 geographical areas in which the State Surgeon General reasonably  
190 determines there is to be a significant risk of affected  
191 individuals having an elevated blood-lead level. ~~a blood-lead~~  
192 ~~level of 10 ug/dL or greater.~~

193 (3) The department ~~State Surgeon General~~ shall maintain  
194 comprehensive records of all screenings indicating an elevated  
195 blood-lead level. ~~conducted pursuant to this section. Such~~  
196 ~~records shall be indexed geographically and by owner in order to~~  
197 ~~determine the location of areas of relatively high incidence of~~  
198 ~~lead poisoning and other elevated blood-lead levels.~~

199  
200 ~~All cases or probable cases of lead poisoning found in the~~  
201 ~~course of screenings conducted pursuant to this section shall be~~  
202 ~~reported to the affected individual, to his or her parent or~~  
203 ~~legal guardian if he or she is a minor, and to the State Surgeon~~

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204 ~~General.~~

205 (4) The results of screenings conducted pursuant to this  
206 section shall be reported by the health care provider who  
207 conducted or ordered the screening to the individual who was  
208 screened, or to the individual's parent or legal guardian if he  
209 or she is a minor.

210 Section 6. Paragraph (c) of subsection (1), paragraph (f)  
211 of subsection (3), and subsection (5) of section 383.14, Florida  
212 Statutes, are amended to read:

213 383.14 Screening for metabolic disorders, other hereditary  
214 and congenital disorders, and environmental risk factors.-

215 (1) SCREENING REQUIREMENTS.-To help ensure access to the  
216 maternal and child health care system, the Department of Health  
217 shall promote the screening of all newborns born in Florida for  
218 metabolic, hereditary, and congenital disorders known to result  
219 in significant impairment of health or intellect, as screening  
220 programs accepted by current medical practice become available  
221 and practical in the judgment of the department. The department  
222 shall also promote the identification and screening of all  
223 newborns in this state and their families for environmental risk  
224 factors such as low income, poor education, maternal and family  
225 stress, emotional instability, substance abuse, and other high-  
226 risk conditions associated with increased risk of infant  
227 mortality and morbidity to provide early intervention,  
228 remediation, and prevention services, including, but not limited  
229 to, parent support and training programs, home visitation, and  
230 case management. Identification, perinatal screening, and  
231 intervention efforts shall begin prior to and immediately  
232 following the birth of the child by the attending health care

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233 provider. Such efforts shall be conducted in hospitals,  
234 perinatal centers, county health departments, school health  
235 programs that provide prenatal care, and birthing centers, and  
236 reported to the Office of Vital Statistics.

237 (c) *Release of screening results.*—Notwithstanding any law  
238 to the contrary, the State Public Health Laboratory may release,  
239 directly or through the Children’s Medical Services program, the  
240 results of a newborn’s hearing and metabolic tests or screenings  
241 to the newborn’s health care practitioner, the newborn’s parent  
242 or legal guardian, the newborn’s personal representative, or a  
243 person designated by the newborn’s parent or legal guardian. As  
244 used in this paragraph, the term “health care practitioner”  
245 means a physician or physician assistant licensed under chapter  
246 458; an osteopathic physician or physician assistant licensed  
247 under chapter 459; an advanced registered nurse practitioner,  
248 registered nurse, or licensed practical nurse licensed under  
249 part I of chapter 464; a midwife licensed under chapter 467; a  
250 speech-language pathologist or audiologist licensed under part I  
251 of chapter 468; or a dietician or nutritionist licensed under  
252 part X of chapter 468.

253 (3) DEPARTMENT OF HEALTH; POWERS AND DUTIES.—The department  
254 shall administer and provide certain services to implement the  
255 provisions of this section and shall:

256 (f) Promote the availability of genetic studies, services,  
257 and counseling in order that the parents, siblings, and affected  
258 newborns may benefit from detection and available knowledge of  
259 the condition.

260  
261 All provisions of this subsection must be coordinated with the

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262 provisions and plans established under this chapter, chapter  
263 411, and Pub. L. No. 99-457.

264 (5) ADVISORY COUNCIL.—There is established a Genetics and  
265 Newborn Screening Advisory Council made up of 15 members  
266 appointed by the State Surgeon General. The council shall be  
267 composed of two consumer members, three practicing  
268 pediatricians, at least one of whom must be a pediatric  
269 hematologist, one member ~~representative from~~ each from ~~of the~~  
270 four of the medical schools in this ~~the~~ state, the State Surgeon  
271 General or his or her designee, one representative from the  
272 Department of Health representing Children's Medical Services,  
273 one representative from the Florida Hospital Association, one  
274 individual with experience in newborn screening programs, one  
275 individual representing audiologists, and one representative  
276 from the Agency for Persons with Disabilities. All appointments  
277 shall be for a term of 4 years. The chairperson of the council  
278 shall be elected from the membership of the council and shall  
279 serve for a period of 2 years. The council shall meet at least  
280 semiannually or upon the call of the chairperson. The council  
281 may establish ad hoc or temporary technical advisory groups to  
282 assist the council with specific topics which come before the  
283 council. Council members shall serve without pay. Pursuant to  
284 the provisions of s. 112.061, the council members are entitled  
285 to be reimbursed for per diem and travel expenses. It is the  
286 purpose of the council to advise the department about:

287 (a) Conditions for which testing should be included under  
288 the screening program and the genetics program.

289 (b) Procedures for collection and transmission of specimens  
290 and recording of results.

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291 (c) Methods whereby screening programs and genetics  
292 services for children now provided or proposed to be offered in  
293 the state may be more effectively evaluated, coordinated, and  
294 consolidated.

295 Section 7. This act shall take effect July 1, 2017.