

HCS HB 257 -- TUBERCULOSIS TESTING

SPONSOR: Frederick

COMMITTEE ACTION: Voted "Do Pass" by the Committee on Health Care Policy by a vote of 11 to 0.

This substitute changes the laws regarding the requirements for the testing of persons with tuberculosis (TB). In its main provisions, the substitute:

(1) Allows the local health agency to institute proceedings by petition for directly-observed therapy (DOT) or commitment when a person with TB violates state rules and regulations. A general allegation that the public health requires therapy or commitment of the person with TB is sufficient;

(2) Allows the Department of Health and Senior Services to contract for the care of a person with TB. The contract must provide state payment will be available for the treatment and care of the patients only after benefits from all third-party payers have been exhausted;

(3) Specifies that a person with TB cannot be required to submit to medical or surgical treatment without his or her consent unless a circuit court authorizes treatment by a written order or as otherwise permitted by law;

(4) Specifies that if a person with TB is committed to a facility for treatment and leaves the facility without a proper discharge, he or she can be prosecuted if appropriate;

(5) Allows a patient with TB or the patient's next of kin to petition the circuit court that originally issued the commitment order if he or she believes the contagious TB no longer exists and that discharging the patient from the facility is not a public health danger;

(6) Prohibits any person who is knowingly infected with TB from acting in a reckless manner to expose another person who has not consented to being exposed, reporting to work with active contagious TB, or violating the requirements of a commitment order. A person who violates these provisions is guilty of a class B misdemeanor unless the victim contracts TB in which case it is a class A misdemeanor;

(7) Authorizes the department to respond to TB cases, outbreaks, and disease investigations; and

(8) Requires all volunteers and employees of health care facilities to receive a tuberculin skin test or interferon gamma release assay test upon employment as recommended in the most recent version of the Centers for Disease Control and Prevention guidelines. All institutions of higher education in the state must implement testing for all faculty and on-campus students upon matriculation and any student who does not comply with the testing cannot be permitted to maintain enrollment in the subsequent semester. If an institution does not have a student health center or similar facility, any person considered to be at high risk for TB must be referred to a local public health agency.

PROPOSERS: Supporters say that the number of people infected with TB is on the rise and it is imperative that current public health policy address the rise in the number of cases of TB. There were 89 reported TB cases in Missouri last year and TB is the third most prevalent killer of people worldwide. TB has a very high mortality rate and drug resistance to current TB antibiotics is increasing. The bill helps to strengthen control efforts against TB, also called the "captain of death." The University of Missouri has been screening and testing students from high-risk areas and has experienced great success in targeting students who are prone to getting TB.

Testifying for the bill were Representative Neeley for Representative Frederick; Department of Health and Senior Services; Bert Malone, Kansas City Health Department and Missouri Association of Local Public Health Agencies; Brenda Selman, University of Missouri; and Missouri Association of Osteopathic Physicians and Surgeons.

OPPOSERS: There was no opposition voiced to the committee.