
HOUSE BILL 1672

State of Washington

56th Legislature

1999 Regular Session

By Representatives O'Brien, Ballasiotes and Radcliff

Read first time 02/02/1999. Referred to Committee on Criminal Justice & Corrections.

1 AN ACT Relating to screening, counseling, and treatment of
2 hepatitis C in correctional facilities; adding a new section to chapter
3 72.09 RCW; and creating new sections.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature finds that:

6 (1) Hepatitis C is the most prevalent infectious disease in prison,
7 infecting approximately forty percent of United States prison inmates;

8 (2) Hepatitis C is a silent killer, being largely asymptomatic
9 until irreversible liver damage may have occurred;

10 (3) Hepatitis C often leads to expensive medical treatment for
11 chronic liver disease, cirrhosis, liver cancer, liver transplants, or
12 liver failure;

13 (4) Hepatitis C currently infects approximately four million five
14 hundred thousand Americans and there are approximately thirty thousand
15 new infections each year in the United States;

16 (5) Rates of hepatitis C infection in prisons are significantly
17 higher than the estimated 1.8 percent infection rate in the general
18 population;

1 (6) Inmates infected with hepatitis C present a risk of
2 transmission through blood-to-blood contact with fellow inmates,
3 corrections officers, and the broader community upon release;

4 (7) With longer prison sentences, increasing portions of the prison
5 population with untreated hepatitis C infections may generate
6 significant medical expenditures for correctional systems for treatment
7 of end stage liver disease; and

8 (8) Screening, counseling, and early treatment of hepatitis C can
9 be a cost-effective alternative to the expensive treatment of chronic
10 liver disease and liver failure.

11 NEW SECTION. **Sec. 2.** A new section is added to chapter 72.09 RCW
12 to read as follows:

13 The department shall:

14 (1) Provide appropriate hepatitis C testing, counseling, and
15 treatment for inmates and personnel, including:

16 (a) Hepatitis C testing of all blood samples collected from
17 incoming inmates upon incarceration;

18 (b) Hepatitis C testing upon request to current inmates and prison
19 personnel, and provision of notice of its availability along with
20 information on the disease to all prison inmates;

21 (c) Testing using an initial screening test, and in cases where the
22 initial test is positive, one or more confirmatory tests;

23 (d) Development of criteria for eligibility of inmates for
24 hepatitis C treatment;

25 (e) Development of protocols for hepatitis C treatment based on
26 guidelines developed by prison health care organizations and the
27 community standard of care, including provision of federal food and
28 drug administration approved combination therapy;

29 (f) Notification of any inmate confirmed positive with hepatitis C
30 virus of their infection and provision to the inmate of information on
31 criteria for treatment and on availability of treatment;

32 (g) Provision of treatment where appropriate based on the
33 department's protocols; and

34 (h) Provision of ongoing follow-up testing to determine the impact
35 of treatment on the hepatitis C infection and to determine, after no
36 less than three months of treatment, whether to continue a full course
37 of treatment or suspend treatment.

1 (2) Provide professional training programs for corrections officers
2 and other prison personnel on currently understood risk factors, means
3 of transmission, detection, and treatment of hepatitis C.

4 (3) Report detected hepatitis C cases to the department of health.

5 (4) Report periodically to the department of health on the status
6 of hepatitis C infection for inmates likely to be released within two
7 years to the community.

8 (5) Provide to the legislature an annual statistical report on the
9 prevalence of hepatitis C infection by correctional facility and trends
10 in incidence and prevalence of hepatitis C infection in the
11 correctional system.

12 NEW SECTION. **Sec. 3.** The department of corrections shall submit
13 to the house of representatives criminal justice and corrections
14 committee and the senate human services and corrections committee, by
15 December 15, 1999, a report on how the department manages hepatitis C
16 in the inmate population. Included in the report will be how inmates
17 are educated about the disease, how and when they are offered testing,
18 how the disease is managed if an inmate is determined to have hepatitis
19 C, and an estimate of the number of inmates in the Washington prison
20 system with hepatitis C. The report must also include recommendations
21 to the legislature on ways to improve hepatitis C disease management
22 and what level of funding would be necessary to appropriately test for
23 and treat the disease.

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