
HOUSE BILL 1638

State of Washington

58th Legislature

2003 Regular Session

By Representatives Schual-Berke, Darneille, Conway, Hankins, McIntire, Pflug, Kenney, Kessler, Moeller, Edwards, Simpson, Morrell, Skinner, Upthegrove, Rockefeller and Wood

Read first time 02/03/2003. Referred to Committee on Health Care.

1 AN ACT Relating to hepatitis C; amending RCW 49.60.172 and
2 49.60.174; adding a new section to chapter 70.54 RCW; and creating a
3 new section.

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

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 70.54 RCW
6 to read as follows:

7 (1) The secretary of health shall design a state plan for the
8 prevention and management of hepatitis C by July 1, 2004. In
9 developing the plan, the secretary shall consider the recommendations
10 of:

11 (a) The University of Washington medical center;

12 (b) The public;

13 (c) Patient groups and organizations;

14 (d) The department of social and health services, the department of
15 corrections, the department of labor and industries, and the board of
16 health;

17 (e) Local health departments;

18 (f) Public health and clinical laboratories;

19 (g) Providers of services to persons with hepatitis C;

1 (h) Research scientists; and

2 (i) The centers for disease control and prevention, or other
3 advisory body that addresses issues related to hepatitis C.

4 (2) The plan shall include but not be limited to:

5 (a) Assessment and development of standards for educational
6 programs, including public school education, to heighten awareness and
7 enhance knowledge and understanding of hepatitis C;

8 (b) Assessment and development of standards for education curricula
9 for health and health-related providers covered by the uniform
10 disciplinary act, chapter 18.130 RCW;

11 (c) Assessment and development of standards for a training course
12 for persons providing hepatitis C counseling, which shall include
13 information relating to the special needs of persons with positive
14 hepatitis C test results, including the importance of early
15 intervention and treatment and recognition of psychosocial needs;

16 (d) Assessment and development of standards for a training course
17 for public health clinic staff regarding the treatment, detection, and
18 methods of transmission of hepatitis C;

19 (e) Assessment of capacity for voluntary hepatitis C testing
20 programs to be performed at facilities providing voluntary HIV testing
21 under chapter 70.24 RCW, with anonymous and confidential hepatitis C
22 testing, and pretest and posttest counseling available;

23 (f) Strategies for the prevention and management of hepatitis C in
24 injection drug users and persons incarcerated in Washington
25 correctional institutions;

26 (g) Guidelines for health care professionals to use to prevent
27 further transmission of the hepatitis C virus and to prevent the onset
28 of chronic liver disease caused by hepatitis C by detecting and
29 managing chronic hepatitis C infection;

30 (h) A comprehensive model, developed by the University of
31 Washington medical center, for an evidence-based process for the
32 prevention and management of hepatitis C and applicable to other
33 diseases; and

34 (i) Recommendations that would facilitate the prevention and
35 management of hepatitis C in Washington.

36 (3) The department of health may seek and accept contributions from
37 agencies of the federal government, private sources, and any other

1 available funds, and may expend the funds to carry out the purposes of
2 this section.

3 (4) The board of health shall adopt rules necessary to implement
4 this section.

5 (5) The department of health shall submit the completed state plan
6 to the legislature before implementation and by July 1, 2004. After
7 the initial state plan is submitted, the department shall update the
8 state plan biennially and shall submit a report on the progress on
9 implementation to the governor, lieutenant governor, and speaker of the
10 house of representatives by October 1st of each even-numbered year.

11 (6) The state plan described in subsection (2) of this section
12 shall be implemented within available appropriations. If available
13 appropriations are inadequate to fund the entire plan, then the plan
14 shall be implemented in stages. The legislature intends by enacting
15 this act that educational efforts regarding hepatitis C be a priority.

16 **Sec. 2.** RCW 49.60.172 and 1988 c 206 s 903 are each amended to
17 read as follows:

18 (1) No person may require an individual to take an HIV test, as
19 defined in chapter 70.24 RCW, or hepatitis C test, as a condition of
20 hiring, promotion, or continued employment unless the absence of HIV or
21 hepatitis C infection is a bona fide occupational qualification for the
22 job in question.

23 (2) No person may discharge or fail or refuse to hire any
24 individual, or segregate or classify any individual in any way which
25 would deprive or tend to deprive that individual of employment
26 opportunities or adversely affect his or her status as an employee, or
27 otherwise discriminate against any individual with respect to
28 compensation, terms, conditions, or privileges of employment on the
29 basis of the results of an HIV test or hepatitis C test unless the
30 absence of HIV or hepatitis C infection is a bona fide occupational
31 qualification of the job in question.

32 (3) The absence of HIV or hepatitis C infection as a bona fide
33 occupational qualification exists when performance of a particular job
34 can be shown to present a significant risk, as defined by the board of
35 health by rule, of transmitting HIV or hepatitis C infection to other
36 persons, and there exists no means of eliminating the risk by
37 restructuring the job.

1 (4) For the purpose of this chapter, any person who is actually
2 infected with HIV or hepatitis C, but is not disabled as a result of
3 the infection, shall not be eligible for any benefits under the
4 affirmative action provisions of chapter 49.74 RCW solely on the basis
5 of such infection.

6 (5) Employers are immune from civil action for damages arising out
7 of transmission of HIV or hepatitis C to employees or to members of the
8 public unless such transmission occurs as a result of the employer's
9 gross negligence.

10 **Sec. 3.** RCW 49.60.174 and 1997 c 271 s 6 are each amended to read
11 as follows:

12 (1) For the purposes of determining whether an unfair practice
13 under this chapter has occurred, claims of discrimination based on
14 actual or perceived HIV or hepatitis C infection shall be evaluated in
15 the same manner as other claims of discrimination based on sensory,
16 mental, or physical disability; or the use of a trained dog guide or
17 service animal by a disabled person.

18 (2) Subsection (1) of this section shall not apply to transactions
19 with insurance entities, health service contractors, or health
20 maintenance organizations subject to RCW 49.60.030(1)(e) or 49.60.178
21 to prohibit fair discrimination on the basis of actual HIV or actual
22 hepatitis C infection status when bona fide statistical differences in
23 risk or exposure have been substantiated.

24 (3) For the purposes of this chapter((~~7~~)):

25 (a) "HIV" means the human immunodeficiency virus, and includes all
26 HIV and HIV-related viruses which damage the cellular branch of the
27 human immune system and leave the infected person immunodeficient; and

28 (b) "Hepatitis C" means the hepatitis C virus of any genotype.

29 NEW SECTION. **Sec. 4.** This act does not create a private right of
30 action.

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