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HOUSE JOINT RESOLUTION NO. 567

House Amendments in [] — February 4, 1995

Continuing the Joint Subcommittee Studying the Issues, Policies, and Programs Relating to Infection with Human Immunodeficiency Viruses.

Patrons—Van Landingham, Almand, Cooper, Cunningham, Darner, Jones, J.C., Plum, Scott and Van Yahres; Senators: Earley, Holland, E.M. and Miller, Y.B.

Referred to Committee on Rules

WHEREAS, the Joint Subcommittee Studying the Issues, Policies, and Programs Relating to Infection with Human Immunodeficiency Viruses (HIV) has, since 1988, been the arbiter of AIDS issues, providing a careful and balanced approach to the many emotional problems created by the AIDS epidemic; and

WHEREAS, over the years, the joint subcommittee has become knowledgeable about HIV and AIDS and has recommended many measures relating to HIV early intervention; education of providers and the public; insurance; testing of sexual offenders; training of public safety personnel; deemed consent to testing for health care providers, good Samaritans, and patients; a procedure for blood-borne pathogen testing and disclosure for public safety personnel; training of foster parents; public school education and attendance; higher education programs; premium assistance; isolation; confidentiality; informed consent; multiple drug-resistant tuberculosis; corrections policy; anonymous testing; testing of prostitutes; and many other matters, among which only two bills have not been approved; and

WHEREAS, during 1994, testing of pregnant women and testing of gamete donors and funding have been issues, while the known emerging issues for 1995 relate to the unregulated "viatical" industry and home collection kits; and

WHEREAS, increasingly, HIV-positive individuals and persons living with AIDS are heterosexual young people, women, adolescents, and children, many of them poor or homeless; and

WHEREAS, because of the continuous emergence of new and unexpected issues related to the evolving demography and characteristics of the AIDS epidemic and AIDS testing and treatments, there is now, more than ever, a need for a forum to design reasonable mechanisms for resolving these controversies; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee Studying the Issues, Policies, and Programs Relating to Infection with Human Immunodeficiency Viruses be hereby continued until adjournment sine die of the 1997 Session of the General Assembly. The current membership of the joint subcommittee shall continue to serve. Any vacancies shall be filled by the Governor, the Speaker of the House, and the Senate Committee on Privileges and Elections, as appropriate in accordance with the provisions of House Joint Resolution No. 31 and Senate Joint Resolution No. 28 of 1988 and House Joint Resolution No. 692 of 1993, which revised the original membership to provide for the gubernatorial appointment of an HIV-infected citizen or a person living with AIDS.

In its deliberations, the joint subcommittee shall: (i) examine the need to regulate viatical settlements after receiving a report from the Bureau of Insurance; (ii) reexamine health and other insurance issues in the coming year, particularly vis-?-vis the impact of managed care systems on AIDS patients; (iii) reexamine HIV issues related to institutional settings, particularly the corrections system and the projections for the future, institutional health care, the handling of difficult situations and exposure-prone incidents, and employee and client safety; (iv) continue to examine issues related to testing of pregnant women; (v) examine methods to more efficiently transmit information to foster parents and others; (vi) continue to study the funding of current programs; (vii) examine issues related to home collection kits, confidentiality, informed consent, face-to-face disclosure of test results, and counseling; (viii) examine issues related to the increasing numbers of poor people, women, adolescents, and children with HIV infection; (ix) monitor the impact of current fiscal and work-force policy changes on the Commonwealth's response to this epidemic and the effectiveness of the programs established as a result of the joint subcommittee's recommendations; and (x) study such other issues the joint subcommittee deems relevant.

The Division of Legislative Services shall continue to provide staff support for the study.

All agencies of the Commonwealth shall assist the joint subcommittee as it deems necessary. Further, the joint subcommittee shall seek advice from individuals providing care and assistance to HIV-infected individuals and persons living with AIDS, including representatives of the AIDS service organizations.

The joint subcommittee shall be limited to holding three meetings per year; thereafter, members shall

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60 serve without compensation and reimbursement for their expenses

61 The joint subcommittee shall [~~submit its~~ be continued for one year only and shall submit its final]
62 findings and recommendations to the Governor and the 1996 and 1997 Sessions of the General
63 Assembly and shall present a 1997 report in accordance with the procedures of the Division of
64 Legislative Automated Systems for the processing of legislative documents.

65 The direct costs of this study shall not exceed \$5,250 per year.

66 Implementation of this resolution is subject to subsequent approval and certification by the Joint
67 Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the
68 study.