

SESSION OF 2019

**SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2198**

As Recommended by House Committee on  
Health and Human Services

**Brief\***

HB 2198 would allow for the use of expedited partner therapy.

As defined in the bill, “expedited partner therapy” would mean to prescribe, administer, dispense, or otherwise provide antimicrobial drugs to a sexual partner of a patient clinically diagnosed by a healthcare provider as infected with a sexually transmitted disease without a physical examination of such sexual partner. The bill would define “sexually transmitted disease” to mean any disease transmitted through sexual contact defined by rules and regulations adopted by the Secretary of Health and Environment (Secretary) as reportable infectious diseases set forth in Kansas statute, and designated as appropriate for expedited partner therapy by rules and regulations adopted by the Secretary.

The bill would allow a healthcare provider who clinically diagnoses a patient with a sexually transmitted disease to provide expedited partner therapy if the healthcare provider determines the patient’s sexual partner is unlikely or unable to present for examination, testing, and treatment. The bill would require a healthcare provider who provides expedited partner therapy to provide counseling to the patient, including distributing written materials developed and provided by the Kansas Department of Health and Environment (KDHE) to be given by the patient to the patient’s sexual partner. The bill

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\*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <http://www.kslegislature.org>

would require the following information be included in the written materials:

- A warning that a woman who is pregnant or might be pregnant should not take certain antibiotics and should immediately contact a healthcare provider for an examination;
- Information about the antimicrobial drug and dosage provided or prescribed, including a warning that a sexual partner who has a history of allergy to the drug or the pharmaceutical class of drug should not take the drug and should immediately contact a healthcare provider for examination;
- Information about the treatment and prevention of sexually transmitted diseases;
- The requirement of sexual abstinence until a period of time after treatment to prevent infecting other sexual partners;
- Notification of the importance of the sexual partner's receiving examination and testing for human immunodeficiency virus and other sexually transmitted diseases and information about available resources;
- Notification of the risk to the patient, the patient's sexual partner, and the general public if the sexually transmitted disease is not completely and successfully treated;
- The responsibility of the sexual partner to inform the sexual partner's own sexual partners of the risk of sexually transmitted disease and the importance of prompt examination and treatment by a healthcare provider; and

- Such other information deemed necessary by the Secretary.

A healthcare provider would use expedited partner therapy only for a patient's sexual partner who could have been exposed to a sexually transmitted disease within 60 days immediately prior to the patient's clinical diagnosis and who could be contacted and identified by the patient.

The bill would provide no healthcare provider or pharmacist would be liable for civil damages resulting from any act or omission in good faith compliance with the provisions in the bill, including civil damages for refusing to provide expedited partner therapy, other than an act or omission constituting gross negligence or willful or wanton misconduct. The bill would also provide no healthcare provider or pharmacist would be subject to disciplinary action by the State Board of Healing Arts, the Board of Nursing, or the State Board of Pharmacy resulting from an act or omission in good faith compliance with the provisions of the bill, other than an act or omission constituting gross negligence or willful or wanton misconduct.

## **Background**

The bill was introduced by the House Committee on Health and Human Services at the request of Representative Eplee on behalf of the American College of Obstetricians and Gynecologists.

In the House Committee hearing, proponent testimony was provided by three obstetrician and gynecologists, and a representative from the KDHE Bureau of Disease Control and Prevention. The proponents generally stated the bill would be a benefit to the public health by helping prevent the spread and repeated contraction of sexually transmitted diseases. Proponent written-only testimony was provided from a representative of the Kansas Medical Society.

No opponent or neutral testimony was provided

According to the fiscal note prepared by the Division of the Budget, KDHE indicates enactment of the bill would have no fiscal effect. The Board of Healing Arts indicates the bill could increase responsibilities and workload for staff, but it is unable to estimate the precise fiscal effect of the bill. The Board of Pharmacy indicates there could be additional staff time to ensure compliance with the bill, but it is unable to estimate the precise fiscal effect. Any fiscal effect associated with enactment of the bill is not reflected in *The FY 2020 Governor's Budget Report*.