

/* Kansas's administrative code follows. */

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

A. General Regulations.

Article 1.-DISEASES

28.1.1. Definitions. (a) "Carrier" means an infected person (or animal) that harbors a specific infectious agent in the absence of discernible clinical disease and serves as a potential source of infection for humans.

(b) "Chemoprophylaxis" means the administration of a chemical, including antibiotics, to prevent the development of an infection or the progression of an infection to active manifest disease.

(c) "Infectious or contagious (communicable) disease" means a disease of humans or animals resulting from an infection or an illness due to a specific agent or its toxic products which arises through transmission of that agent or its products from a reservoir to a susceptible host, either directly, or indirectly.

(d) "Communicable period" means the time or times during which an infectious agent may be transferred directly or indirectly from an infected person to another person, from an infected animal to a person, or from an infected person to an animal, including arthropods.

(e) "Contact" means a person or animal that has been in association with an infected person or animal or a contaminated environment so as to have had opportunity to acquire the infection.

(f) "Contamination" means the presence of an infectious agent on a body surface, or on or in clothes, bedding, toys, surgical instruments or dressings, or other inanimate articles or substances including water, milk, and food.

(g) "Disinfection" means killing of infectious agents outside the body by chemical or physical means. Concurrent disinfection is the application of disinfective measures as soon as possible after the discharge of infectious material from the body of an infected person, or after the soiling of articles with this infectious discharge, all personal contact with these discharges or articles being minimized before that disinfection. Terminal disinfection is the application of disinfective measures after an infected person or animal has ceased to be a source of infection, has been removed from a specific site, or has died and been removed.

(h) "Disease" means a definite morbid process having a characteristic train of symptoms.

(i) "Epidemic (or outbreak)" means the occurrence in a community or region of cases of an illness clearly in excess of normal expectancy and derived from a common or propagated source.

9) "Incubation period" means the time interval between exposure to an infectious agent and appearance of the first sign or Symptom of the disease in question.

(k) "Infection" means the entry and development or multiplication of an infectious agent in the body of humans or animals.

Infection is not synonymous with infectious disease; the result may be inapparent or manifest.

(l) "Infectious agent" means an organism, chiefly a microorganism but including helminths, that is capable of producing infection or infectious disease.

(m) "Infestation" means, for persons or animals, the lodgement, development and reproduction of arthropods on the surface of the body or in clothing.

(n) "Isolation" means the separation, ~r the period of communicability, of infected persons or animals from others, in places and under conditions that prevent the direct or indirect conveyance of the infectious agents from those infected to those who are susceptible or who may spread the agent to others.

(1) when "Respiratory isolation" is specified, it shall consist of a private room with door kept closed, handwashing upon entering and leaving the room, and disinfection of articles contaminated with patient secretions. Persons susceptible to the specific disease must wear masks.

(2) "Enteric precautions" shall consist of handwashing upon entering and leaving the patient room, wearing of gloves by all persons having direct contact with the patient or with articles contaminated with fecal material, and wearing of gowns by all persons having direct contact with the patient. Articles contaminated with the patient's urine or feces shall be disinfected or discarded; masks are not necessary.

(3) "Blood precautions" shall consist of use of disposable needles and syringes, disposal of used needles and syringes by incineration, and decontamination and sterilization of all non-disposable equipment which is contaminated by blood.

(o) "Local health officer" means the person appointed as local health officer by the board of county commissioners in accordance with K.S.A. 65~201.

(p) "Nosocomial infection" means an infection originating in a medical facility. This includes infections acquired in the hospital but appearing after discharge; it also includes infections among staff.

(q) "Quarantine" means the limitation of freedom of movement of well persons or domestic animals that have been exposed to a communicable disease.

28.1.2. Designation of infectious or contagious diseases. (a)
The following diseases shall be designated as infectious or contagious in their nature and shall be reported, in accordance with K.S.A. 65-118, K.S.A. 1989 Supp. 65-128 and K.S.A. 1989 Supp. 65-6002, as amended by L. 1990, Ch. 234, sec. 2:

- (1) Acquired immune deficiency syndrome (AIDS);
- (2) anthrax;
- (3) botulism;
- (4) brucellosis;
- (5) campylobacter infections;
- (6) chancroid;
- (7) chickenpox;
- (8) Chlamydia species infections;
- (9) cholera;
- (10) diphtheria;
- (11) encephalitis, infectious (indicate infectious agent whenever possible);
- (12) epidemic diarrhea of the newborn;
- (13) food poisoning (indicate causative agent, if known);
- (14) giardiasis;
- (15) granuloma inguinale;
- (16) hepatitis, viral;
- (17) herpes simplex infections, genital;
- (18) histoplasmosis;
- (19) Kawasaki disease;
- (20) legionellosis;
- (21) Lyme disease;
- (22) lymphogranuloma venereum;
- (23) malaria;
- (24) meningitis (indicate causative agent, if known);
- (25) meningococemia;
- (26) mumps;
- (27) Neisseria gonorrhoea infections;
- (28) pertussis (whooping cough);
- (29) plague;
- (30) poliomyelitis;
- (31) Q fever;
- (32) rabies;
- (33) rickettsialpox;
- (34) Rocky Mountain spotted fever (see also typhus);
- (35) rubella, including congenital rubella syndrome;
- (36) rubeola (measles);
- (37) salmonellosis, including typhoid fever;
- (38) shigellosis;
- (39) staphylococcal disease, hospital acquired;
- (40) streptococcal infections, group A beta-hemolytic;
- (41) syphilis;

- (42) taeniasis and cysticercosis (beef or pork tapeworm);
- (43) tetanus;
- (44) trichinosis;
- (45) tuberculosis;
- (46) tularemia;
- (47) typhus fever;
- (48) urethritis, other than gonococcal or chlamydial;
- (49) vaginitis, non-specific; and
- (50) yellow fever.

(b) This designation shall also include any exotic or newly recognized disease, and any disease unusual in incidence or behavior, known or suspected to be infectious or contagious and constituting a risk to the public health.

28.1.4. Registration of disease prevalence. (a) The administrator of each hospital licensed in the state shall report the following diseases to the secretary of health and environment for registration, on forms provided by the department of health and environment:

- (1) Cancer;
- (2) Congenital malformations in infants under one year of age;
- (3) Reyes syndrome;
- (4) Toxic shock syndrome;
- (5) Guillain Barre syndrome;
- (6) Acquired immune deficiency syndrome; and
- (7) Fetal alcohol syndrome.

(b) All reports pursuant to this regulation shall be confidential medical information.

28.1.5. General provisions for isolation or quarantine of persons afflicted with infectious or contagious disease; examination of persons; collection of specimens. (a) When conditions of isolation and quarantine are not otherwise specified by regulation, the local health officer or the secretary of health and environment shall order and enforce isolation and quarantine of persons afflicted with or exposed to infectious or contagious diseases. The duration and manner of isolation or quarantine so ordered shall be based upon the incubation period, communicable period, and usual mode of transmission of the infectious agent of the disease for which isolation or quarantine is ordered.

(b) Isolation or quarantine shall be ordered in conjunction with investigation of infectious or contagious disease cases and outbreaks for the examination of persons reasonably suspected of having these diseases, and to obtain specimens from these persons for laboratory evidence suggestive of infectious or contagious disease.

28.33.11. Approval of laboratories performing human immunodeficiency virus testing. (a) Definitions.

(1) "Department" means the department of health and environment.

(2) "Division" means the division of laboratories and research of the Kansas department of health and environment.

(3) "Laboratory director" means the person responsible for the professional, administrative, organizational and educational duties of a laboratory.

(4) "Screening test" means a sensitive, rapid test designed to eliminate a true negative from further consideration.

(5) "Confirmatory test" means a specific, supplemental test using western blot or immunofluorescent techniques.

(6) "Confirmed positive test" means a test performed on a repeatedly positive screening test specimen which gives positive results on the confirmatory test.

(7) "Risk-evaluation test" means a test utilized to determine if a screening test should be performed. This includes latex agglutination tests, immunoassays performed on body fluids other than sera or other test methodologies not specifically identified in (C) (1) (A). Risk evaluation tests are not considered as a test for human immunodeficiency virus and shall not be reported as such.

(b) Approval procedure. Each laboratory seeking approval of the department to perform tests for human immunodeficiency virus shall:

(1) submit an application on forms prepared by the division;

(2) successfully meet the criteria of inspection; and

(3) successfully participate in an approved proficiency program.

(c) Inspection.

(1) Upon receipt of a laboratory's application for approval, the laboratory shall be inspected at a permanent address by a representative of the division. Approval is not transferable to another address. The laboratory shall be evaluated to determine compliance with following criteria:

(A) Each laboratory shall use only test methods for human immunodeficiency virus approved in the January 8, 1988, Mortality and Morbidity Weekly Report, U.S. Department of Health and Human Services, HHS Publication No. (CDC) 88017, which is hereby adopted by reference.

(B) Each test procedure shall be performed in accordance with a written test protocol. The protocol shall be approved by the laboratory director and be consistent with the manufacturer's written instructions. The protocol shall outline a quality assurance program and shall include at least the following:

(i) A procedure to ensure proper identification of specimens;

(ii) confirmation of all repeatably positive screening tests;

(iii) a policy that only confirmed positive tests shall be

reported as positive except when the screening test is performed on a specimen obtained from a cadaver being considered as a donor for organ transplantation and the organ would not remain viable for the time period required for a confirmatory test;

(iv) an internal quality control program that monitors the accuracy and precision of laboratory performance on a daily basis;

(v) an instrument maintenance program;

(vi) provisions for retention of all confirmed positive specimens for at least one year;

(vii) disposal of all medical wastes in accordance with K.A.R. 28-29.27; and

(viii) documentation of adherence to the foregoing policies.

(C) Equipment required by the test procedure shall be maintained to the manufacturer's specifications.

(D) Reagents, control sera and any other required materials for procedures being performed shall be available and shall be stored according to a manufacturer's specifications.

(E) Sufficient work space shall be provided to safely perform tests.

(F) Reports shall be done as required by K.S.A. 1989 Supp. 65-6002, as amended by L. 1990, Ch. 234, sec. 2.

(2) During any inspection, one or more persons may be required to demonstrate performance of procedures for which approval is requested.

(3) Follow-up inspections of approved laboratories may be conducted at any time.

(4) Each laboratory director shall:

(A) Be a physician who:

(i) is qualified according to 42 CFR 405.1312(b)(1), (b)(2)(i) and (b)(2)(ii) as in effect October 1, 1984, which is hereby adopted by reference; or

(ii) subsequent to graduation, has obtained four or more years of full-time general clinical laboratory training and experience of which at least two years were spent acquiring proficiency in one of the laboratory specialties in an approved clinical laboratory or the specialty of public health; or

(B) hold an earned doctoral degree from an accredited institution with chemical, physical, or biological science as a major subject; and

(i) be qualified according to 42 CFR 405.1312(b)(4)(i), as in effect on October 1, 1984, which is hereby adopted by reference; or

(ii) subsequent to a graduation, have obtained four or more years of full-time general clinical laboratory training and experience of which at least two years were spent acquiring proficiency in one of the laboratory specialties in an approved clinical or

public health laboratory.

(5) If the laboratory director does not have training and experience in serology, direct supervision of the analysts shall be provided by a supervisor who shall have at least a bachelors degree in chemistry, biological sciences or medical technology and at least six years of subsequent laboratory experience in one or more of these fields. At least two years of this experience shall be in serology.

(6) The laboratory director shall evaluate each analyst performing procedures for which approval is sought to assure that each analyst is trained in each test procedure being performed. The laboratory shall maintain documentation of training and the records shall be available at all times.

(7) Records of each test result shall be maintained for a minimum of two years.

(d) Proficiency program. Each laboratory shall subscribe to and participate in an approved external proficiency program that encompasses human immunodeficiency virus tests as defined by 42 CFR 405.1310(c), as in effect on October 1, 1984, which is hereby adopted by reference. A list of approved pro-grams shall be available from the division.

(1) Each laboratory seeking initial approval shall have successfully participated in one challenge of proficiency tests before approval is granted.

(2) The results of each laboratory's performance in its proficiency program shall be sent directly from the approved external proficiency program to the division.

(3) Unsatisfactory performance in an approved external proficiency program as determined by the division, or failure to participate in an approved external proficiency program shall constitute reason for denying or revoking the approval of a laboratory to perform human immunodeficiency virus testing. Criteria for acceptable performance in a proficiency program shall be available from the division.

(e) Laboratories located outside of the state of Kansas shall be approved if the laboratory is certified or approved by a federal, state, or independent agency having equivalent or more stringent standards and meets all the requirements of this regulation. The laboratories shall submit the following documentation for evaluation by the department:

(1) the report of the most recently completed on-site evaluation;

(2) the proficiency test results from the most recently completed proficiency challenge;

(3) the personnel qualifications;

(4) the analytical methods utilized;

(5) the standards on which current certification is based; and

(6) Any other documentation as deemed necessary by the department.

(f) List of approved laboratories. A current list of approved laboratories shall be maintained by the department. Laboratories shall be approved annually.

(g) Removal from approved list.

(1) A laboratory shall be removed from the approved list after voluntarily requesting removal from the list or after notice and an opportunity for a hearing. All orders of termination shall become final 15 days after service unless an appeal is filed in writing. All appeals shall be conducted according to K.S.A. 77-501 et seq.

(2) Notice of a laboratory's removal from the approved list shall be made by certified mail.

PUBLIC HEALTH

Article 1.-SECRETARY OF HEALTH AND ENVIRONMENT, ACTIVITIES, CENTRAL POWERS AND FUNCTIONS

65.101. Health supervision; investigation of causes of disease, sickness and death; sanitation inspections; prevention of spread of disease; outreach services; rules and regulations; injunction.

(a) The secretary of health and environment shall exercise general supervision of the health of the people of the state and may:

(1) Where authorized by any other statute, require reports from appropriate persons relating to the health of the people of the state so a determination of the causes of sickness and death among the people of the state may be made through the use of these reports and other records;

(2) investigate the causes of disease, including especially, epidemics and endemics, the causes of mortality and effects of locality, employments, conditions, food, water supply, habits and other circumstances affecting the health of the people of this state and the causes of sickness and death;

(3) advise other offices and agencies of government concerning location, drainage, water supply, disposal of excreta and heating and ventilation of public buildings;

(4) make sanitary inspection and survey of such places and localities as the secretary deems advisable;

(5) take action to prevent the introduction of infectious or contagious disease into this state and to prevent the spread of infectious or contagious disease within this state;

(6) provide public health outreach services to the people of the state including educational and other activities designed to increase the individual's awareness and appropriate use of public and other preventive health services.

(b) The secretary of health and environment may adopt rules and

regulations necessary to carry out the provisions of paragraphs (1) through (6), inclusive, of subsection (a). In addition to other remedies provided by law, the secretary is authorized to apply to the district court, and such court shall have jurisdiction upon a hearing and for cause shown to grant a temporary or permanent injunction to compel compliance with such rules and regulations.

65.128. Rules and regulations of secretary for isolation and quarantine; publication; definition. (a) For the protection of the public health and for the control of infectious or contagious diseases, the secretary of health and environment by rules and regulations shall designate such diseases as are infectious or contagious in their nature, and the secretary of health and environment is authorized to adopt rules and regulations for the isolation and quarantine of such diseases and persons afflicted with or exposed to such diseases as may be necessary to prevent the spread and dissemination of diseases dangerous to the public health.

(b) As used in K.S.A. 65-118, 65-119, 65-122, 6~123, 65-126 and 65-129, and amendments thereto, "infectious or contagious disease" means any disease designated by the secretary of health and environment as an infectious or contagious disease in accordance With subsection (a) but the infectious or contagious disease acquired immune deficiency syndrome or any causative agent thereof shall not constitute an infectious or contagious disease for the purposes of K.S.A. 65-118, 65-119, 6~122, 65-123, 65-126 and 65-129, and amendments thereto, because such disease is subject to the provisions of K.S.A. 1988 Supp. 65-6001 through 65-6007 and amendments thereto.

05.2438. Notification of person transporting dead body for disposition that deceased had an infectious or contagious disease; form; notification of embalmer, funeral director or other person taking possession of body; confidential information; penalties for violations; "infectious or contagious disease" defined. (a) When a person who has been diagnosed as having an infectious or contagious disease dies, the attending physician or, if there is no attending physician, a family member or person making arrangements for the disposition of the dead body who knows of such diagnosis, shall indicate, on a form promulgated by the secretary, that the deceased person had an infectious or contagious disease. The completed form shall accompany the body when it is transported for disposition.

(b) Any person who transports a dead body for disposition and who has been notified pursuant to the provisions of subsection (a) that the, deceased person had been diagnosed as having an

infectious or contagious disease shall present notification thereof accompanying the dead body to any embalmer, funeral director or other person taking possession of the dead body.

(c) Any person who completes the form required in subsection (a) in good faith and without malice shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed in an action resulting from such report.

(d) Any information relating to an infectious or contagious disease which is required to be disclosed or communicated under subsections (a) and (b) shall be confidential and shall not be disclosed or made public beyond the disclosure necessary under subsections (a) and (b).

(e) Any person required to perform duties specified under subsection (a) or (b) who knowingly refuses or omits to perform such duties is guilty of a class C misdemeanor. Any person who violates any provision of subsection (d) shall be guilty of a class C misdemeanor.

(I) As used in,, this section, "infectious or contagious disease" means the disease acquired immune deficiency syndrome, human immunodeficiency virus and any other causative agent of acquired immune deficiency syndrome and any disease designated as infectious or contagious by the secretary of health and environment by rules and regulations under K.S.A. 65-128 and amendments thereto.

Article 60.-ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)

05.0001. Definitions. As used in K.S.A. 1989 Supp. 65-6001 to 65-6007, inclusive, and amendments thereto, unless the context clearly requires otherwise:

(a) "AIDS" means the disease acquired immune deficiency syndrome.

(b) "HIV" means the human immunodeficiency virus.

(c) "Positive reaction to an AIDS test" means a positive screening test, approved by the secretary, indicating infection by HIV, with a positive specific test as specified by the secretary comprising confirmed analytical results which are evidence of HIV infection.

(d) "Secretary" means the secretary of health and environment.

(e) "Physician" means any person licensed to practice medicine and surgery.

(I) "Laboratory director" means the person responsible for the professional, administrative, organizational and educational duties of a laboratory.

(g) "HIV infection" means the presence of HIV in the body.

(h) "Racial/ethnic group" shall be designated as either white, black, Hispanic, Asian Pacific/Islander or American Indian/Alaskan Native.

(i) "Law enforcement officer" means police officer or law enforcement officer as such terms are defined under K.S.A. 74-5602 and amendments thereto.

05.0002. Reporting to secretary of health and environment information concerning AIDS; information reported, when; persons reporting; immunity from liability; confidentiality of information; disclosure; use of information to discriminate prohibited. (a) Whenever any physician has information indicating that a person is suffering from or has died from AIDS, such knowledge or information shall be reported immediately to the secretary, together with the name and address of the person who has AIDS, or the name and former address of the deceased individual who had such disease. Any laboratory director shall report all positive reactions to an AIDS test to the secretary. Any physician who is in receipt of a report indicating a positive reaction to a test for HIV infection resulting from the examination of any specimen provided to a laboratory by such physician shall report all such positive reactions to the secretary. Reports by physicians and laboratory directors shall be provided within one week of receipt or interpretation of the positive test results and shall designate the type of test or tests performed, the date of performance of the test or tests, the results of the test or tests, the sex, date of birth, county of residence and racial/ethnic group of the person tested. For the purpose of reporting HIV infection only, the name of the patient shall not be reported. The provisions of this subsection shall not apply to a physician who, while performing services, other than the direct rendition of medical services, for an insurance company, health maintenance organization or nonprofit medical and hospital service corporation, becomes aware that a person has tested positive for HIV or is suffering from or has died from AIDS.

(b) Any physician or laboratory director who reports the information required to be reported under subsection (a) in good faith and without malice to the secretary shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed in an action resulting from such report. Any such physician or laboratory director shall have the same immunity with respect to participation in any judicial proceeding resulting from such report.

(c) Information required to be reported under subsection (a) and information obtained through laboratory tests conducted by the department of health and environment relating to HIV or AIDS and persons suffering therefrom or infected therewith shall be confidential and shall not be disclosed or made public, upon subpoena or otherwise, beyond the disclosure necessary under

subsection (a) or under subsection (a) of K.S.A. 1989 Supp. 65-6003 and amendments thereto or the usual reporting of laboratory test results to persons specifically designated by the secretary as authorized to obtain such information, except such information may be disclosed:

- (1) If no person can be identified in the information to be disclosed and the disclosure is for statistical purposes;
- (2) if all persons who are identifiable in the information to be disclosed consent in writing to its disclosure;
- (3) if the disclosure is necessary, and only to the extent necessary, as specified by rules and regulations of the secretary, to protect the public health;
- (4) if a medical emergency exists and the disclosure is to medical personnel qualified to treat AIDS or HIV infection, except that any information disclosed pursuant to this paragraph shall be disclosed only to the extent necessary to protect the health or life of a named party; or
- (5) if the information to be disclosed is required in a court proceeding involving a minor and the information is disclosed in camera.

(d) Information regarding cases of AIDS or HIV infection reported in accordance with this section shall be used only as authorized under this act. Such information shall not be used in any form or manner which would lead to the discrimination against any individual or, group with regard to employment, to provision of medical care or acceptance into any facilities or institutions for medical care, housing, education, transportation, or for the provision of any other goods or services.

05.0003. Investigation of cases of AIDS; rules and regulations; protection of public health; disclosure of information; confidentiality; agreements with local boards of health authorized. (a) The secretary shall investigate cases of persons who have AIDS and maintain a supervision over such cases during their continuance. The secretary may adopt and enforce rules and regulations for the prevention and control of AIDS and for such other matters relating to cases of persons who have AIDS as may be necessary to protect the public health.

(b) Any information relating to persons who have AIDS which is required to be disclosed or communicated under subsection (a) shall be confidential and shall not be disclosed or made public beyond the disclosure necessary under subsection (a) or under subsection (a) of K.S.A. 1988 Supp. 65-6002 and amendments thereto to persons specifically designated by the secretary as authorized to obtain such information, except as otherwise permitted by subsection (c) of K.S.A. 1988 Supp. 65-6002 and amendments thereto.

(c) The secretary may enter into agreements with any county or joint board of health to perform duties required to be performed by the secretary under subsection (a) as specified by such agreement. The confidentiality requirements of subsection (b) shall apply to any duties performed pursuant to such an agreement.

05.0004. Physician authorized to disclose to certain persons information about patient who has AIDS or who has had a positive reaction to an AIDS test; confidentiality of information; immunity in judicial proceedings.

(a) Notwithstanding any other law to the contrary, a physician performing medical or surgical procedures on a patient who the physician knows has AIDS or has had a positive reaction to an AIDS test may disclose such information to other health care providers. emergency personnel. correctional officers employed by the department of corrections or law enforcement officers who have been or will be placed in contact with bodily fluids of such patient. The information shall be confidential and shall not be disclosed by such health care providers, emergency personnel. correctional officers employed by the department of corrections or law enforcement officers except as may be necessary in providing treatment for such patient.

(b) Notwithstanding any other law to the contrary, a physician who has reason to believe that the spouse or partner of a person who has had a positive reaction to an AIDS test or who has AIDS may have been exposed to HIV and is unaware of such exposure may inform the spouse or partner of the risk of exposure. The information shall be confidential and shall not be disclosed by such spouse or partner to other persons except to the spouse or partner who has had a positive reaction to an AIDS test or who has AIDS.

(c) Nothing in this section shall be construed to create a duty to warn any person of possible exposure to HIV.

(d) Any physician who discloses information in accordance with the provisions of this section in good faith and without malice shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed in an action resulting from such disclosure. Any such physician shall have the same immunity with respect to participation in any judicial proceeding resulting from such disclosure.

05.0005. Unlawful acts; penalties. Any person violating, refusing or neglecting to obey any provision of K.S.A. 1988 Supp. 65-6001 through 65-6004 or of the rules and regulations adopted by the secretary for the prevention and control of AIDS shall be guilty of a class 1 misdemeanor.

05.006. Educational material explaining AIDS; distribution to district courts; copies provided to parties applying for marriage license. The secretary shall prepare for distribution to the district courts of the state educational material explaining the nature, causes and effects of AIDS and other information relating to AIDS as may be appropriate. The clerks of the district courts or judges thereof, when applied to for a marriage license, shall provide copies of such educational material to the parties to the proposed marriage.

05.0007. Establishment and maintenance of sites for anonymous testing for HIV. The secretary shall establish and maintain test sites throughout the state where the anonymous testing for HIV may be undertaken.