

/\* MISSOURI has passed law dealing with testing, education and discrimination, as well as notifying schools of infected students. \*/

191.653. HIV testing performed by whom, how-consultation with subject required, when

1. No person shall perform or conduct HIV testing except physicians, hospitals, and those persons authorized by the department of health. No person shall be authorized by the department of health to perform or conduct HIV testing unless such person provides suitable verification to the department that such testing shall be performed in accordance with departmental regulations governing the types of tests performed and the manner in which they are administered. The department may monitor the continued compliance of such persons with departmental regulations. Hospitals licensed pursuant to chapter 197, RSMo, shall be deemed to be in compliance with departmental regulations governing HIV testing.
2. All HIV testing shall be performed in accordance with the department rules governing HIV testing procedures.
3. Except as provided in sections 191.671 and 191.686, all physicians, hospitals, or other persons authorized by the department of health who perform or conduct HIV blood sampling shall provide consultation with the subject prior to taking the sample and during the reporting of the test results and shall report to the department of health the identity of any individual confirmed to be infected with HIV.

191.656. Confidentiality of reports and records, exceptions-violation, civil action for injunction, damages, costs and attorney fees-health care provider participating in judicial proceeding, immune from civil liability

1. (1) All information known to and records containing any information held or maintained by any person, or by any agency, department, or political subdivision of the state concerning an individual's HIV infection status or the results of any individual's HIV testing shall be strictly confidential and shall not be disclosed except to:
  - (a) Public employees within the agency, department, or political subdivision who need to know to perform their public duties;
  - (b) Public employees of other agencies, departments, or political subdivisions who need to know to perform their public duties;
  - (c) Persons other than public employees who are entrusted with the regular care of those under the care and custody of a state agency, including but not limited to operators of day care facilities, group homes, residential care facilities and adoptive

or foster parents;

(d) As authorized by subsection 2 of this section;

(2) Further disclosure by public employees shall be governed by subsections 2 and 3 of this section;

(3) Disclosure by a public employee or any other person in violation of this section may be subject to civil actions brought under subsection 6 of this section.

2. (1) Unless the person acted in bad faith or with conscious disregard, no person shall be liable for violating any duty or right of confidentiality established by law for disclosing the results of an individual's HIV testing:

(a) To the department of health;

(b) To health care personnel working directly with the infected individual who have a reasonable need to know the results for the purpose of providing direct patient health care;

(c) Pursuant to the written authorization of the subject of the test result or results;

(d) To the spouse of the subject of the test result or results;

(e) To the subject of the test result or results;

(f) To the parent or legal guardian or custodian of the subject of the testing, if he is an unemancipated minor;

(g) To the victim of any sexual offense defined in chapter 566, RSMo, which includes sexual intercourse as an element of the crime;

(2) Paragraphs (b) and (d) of subdivision (1) of this subsection shall not be construed in any court to impose any duty on a person to disclose the results of an individual's HIV testing to a spouse or health care professional or other potentially exposed person, parent or guardian;

(3) No person to whom the results of an individual's HIV testing has been disclosed pursuant to paragraphs (b) and (c) of subdivision (1) of this subsection shall further disclose such results;

(4) When the results of HIV testing, disclosed pursuant to paragraph (b) of subdivision (1) of this subsection, are included in the medical record of the patient who is subject to the test, the inclusion is not a disclosure for purposes of such paragraph so long as such medical record is afforded the same confidentiality protection afforded other medical records.

3. All communications between the subject of HIV testing and a physician, hospital, or other person authorized by the department of health who performs or conducts HIV blood sampling shall be privileged communications.

4. The identity of any individual participating in a research project approved by an institutional review board shall not be reported to the department of health by the physician conducting

the research project.

5. The subject of HIV testing who is found to have HIV infection shall disclose such information to any health care professional from whom such person receives health care services. Said notification shall be made prior to receiving services from such health care professional.

6. Any individual aggrieved by a violation of this section or regulations promulgated by the department of health may bring a civil action for damages. If it is found in a civil action that:

(1) A person has negligently violated this section, the person is liable for, each violation, for:

(a) The greater of actual damages or liquidated damages of one thousand dollars; and

(b) Court costs and reasonable attorney's fees incurred by the person bringing the action; and

(c) Such other relief, including injunctive relief, as the court may deem appropriate; or

(2) A person has willfully or intentionally or recklessly violated this section, the person is liable, for each violation, for:

(a) The greater of actual damages or liquidated damages of five thousand dollars; and

(b) Exemplary damages; and

(c) Court costs and reasonable attorney's fees incurred by the person bringing the action; and

(d) Such other relief, including injunctive relief, as the court may deem appropriate.

7. No civil liability shall accrue to any health care provider as a result of making good faith report to the department of health about a person reasonably believed to be infected with HIV, or cooperating in good faith with the department in an investigation determining whether a court order directing an individual to undergo HIV testing will be sought, or in participating in good faith in any judicial proceeding resulting from such report or investigations and any person making such a report, or cooperating with such an investigation or participating in such a judicial proceeding shall be immune from civil liability as a result of such actions so long as taken in good faith.

191.659. Department of corrections, HIV testing without right of refusal-exception

1. Except as provided in subsection 2 of this section, all individuals who are delivered to the department of corrections and all individuals who are released or discharged from any correctional facility operated by the department of corrections,

before such individuals are released or discharged, shall undergo HIV testing without the right of refusal. In addition, the department of corrections may perform or conduct HIV testing on all individuals required to undergo annual or biannual physical examinations by the department of corrections at the time of such examinations.

2. The department of corrections shall not perform HIV testing on an individual delivered to the department if similar HIV testing has been performed on the individual subsequent to trial and if the department is able to obtain the results of the prior HIV test

3. The department shall inform the victim of any sexual offense defined in chapter 566, RSMo, which includes sexual intercourse as an element of the crime, of any confirmed positive results of HIV testing on an offender within the custody of the department.

191.662. Department of mental health, permissive HIV testing without right of refusal, when-results of testing not to be reported to department of health, when

1. The department of mental health may perform or conduct HIV testing or HIV sampling without the right of refusal on:

(1) Any individual participating in a methadone treatment program for the treatment of intravenous drug abuse and who has refused to undergo such testing whenever there are reasonable grounds to believe that the individual is infected with HIV and is a reasonable health threat to others;

(2) Any individual under the care and custody of the department of mental health who has refused to undergo testing whenever there are reasonable grounds to believe that the individual is infected with HIV and is a reasonable health threat to others, unless such testing is otherwise prohibited by law.

2. The department of mental health shall not report to the department of health the identity of any individual for whom HIV testing pursuant to this section confirms HIV infection if such reporting is prohibited by federal law or regulation.

191.663. HIV testing, defined--court order to test certain sexual offenders-costs-bond-disclosure of results of test

1. As used in this section and section 191.659, the term "HIV testing" means serological tests upon a sample of venous blood to determine the presence of the human immunodeficiency virus that causes acquired immunodeficiency syndrome.

2. Any person who is convicted or who pleads guilty or nolo contendere to any sexual offense defined in chapter 566, RSMo, which includes sexual intercourse as an element of the crime, shall be ordered by the court to undergo HIV testing prior to

incarceration without the right of refusal.

3. Costs of such HIV testing shall be taxed to the defendant as costs in the criminal proceeding. Such testing costs may be retained by the court from the bond filed by the defendant under subsection 4 of this section.

4. Any defendant charged with a sexual offense defined in chapter 566, RSMo, which includes sexual intercourse as an element of the crime, shall be required to post a minimum bond amount for his release prior to trial. The minimum bond amount shall be sufficient to cover the cost of any post-trial HIV testing ordered by the court.

5. Notwithstanding any provision of section 191.656, or any other law to the contrary, the victim of any crime defined in chapter 566, RSMo, which includes sexual intercourse as an element, shall have a right to access to the results of any HIV testing performed pursuant to the provisions of this section, and the victim shall be informed of any confirmed positive results of the HIV testing. The administrator of the jail or correctional facility in which the defendant is confined shall also have access to the test results.

191.665. Discrimination prohibited, exceptions

1. Provisions of chapter 213, RSMo, shall apply to individuals with HIV infection, acquired immunodeficiency syndrome and acquired immunodeficiency syndrome-related complex; provided that such protection shall not include an individual who has a currently contagious disease or infection and who, by reason of such disease or infection, would constitute a direct threat to the health or safety of other individuals or who, by reason of the currently contagious disease or infection, is unable to perform the duties of their employment.

2. Subsection 1 of this section shall not be construed to mean that any action taken by the Missouri commission on human rights prior to June 1, 1988, concerning discrimination against any individual on the basis that such individual has HIV infection or is perceived to have HIV infection to be an improper exercise of authority by the commission.

191.668. Department of health and department of elementary and secondary education to prepare education programs, contents

1. The department of health shall prepare public education and awareness plans and programs for the general public, and the department of elementary and secondary education shall prepare educational programs for public schools, regarding means of transmission and prevention and treatment of the HIV virus. The plans and program shall include, but not be limited to:

- (1) Medically correct, age specific, transmission and prevention programs for use at the discretion of the public schools beginning with students at the sixth grade level. The educational programs shall stress moral responsibility in and restraint from sexual activity and avoidance of controlled substance use whereby HIV can be transmitted
- (2) Risk reduction programs for specific populations at high risk of HIV infection
- (3) Educational programs on transmission and prevention of HIV infection in the workplace for use by employers;
- (4) Personal protection procedures for use by health care providers and others in close contact with potentially infected individuals;
- (5) General public information programs and circulars containing factual information that will allow the public at large to assess its risk and develop informed individual judgment and behavior. The department shall prepare for free distribution among the residents of the state printed information concerning the means of transmission of the HIV virus, the dangers from HIV infection, means of prevention, and the necessity for testing; and
- (6) Develop presentations for community service and school organizations describing the medical and psychosocial aspects of HIV infection, including information on how infection is transmitted and can be prevented.

2. None of the plans, programs or printed information prepared or provided under this section shall promote behavior that is an offense in violation of chapter 566, RSMo, concerning sexual offenses; is an offense involving the use of a controlled substance as defined in chapter 195, RSMo; is an offense in violation of section 568.020, RSMo, concerning incest; or is an offense in violation of any city, county or state law prohibiting prostitution or patronizing prostitution.

191.671. Insurance companies, HMO's or health service corporations, HIV testing by, regulation by division of insurance-disclosure of test results, confidentiality

1. No other section of this act 'shall apply to any insurer, health services corporation, or health maintenance organization licensed by the division of insurance which conducts HIV testing only for the purposes of assessing a person's fitness for insurance coverage offered by such insurer, health services corporation, or health maintenance corporation, except that nothing in this section shall be construed to exempt any insurer, health services corporation or health maintenance organization in their capacity as employers from the provisions of section 191.665 relating to employment practices.

2. Upon renewal of any individual or group insurance policy, subscriber contractor health maintenance organization contract covering medical expenses, no insurer, health services corporation or health maintenance organization shall deny or alter coverage to any previously covered individual who has been diagnosed as having HIV infection or any HIV-related condition during the previous policy or contract period only because of such diagnosis, nor shall any such insurer, health services corporation or health maintenance organization exclude coverage for treatment of such infection or condition with respect to any such individual.

3. The director of the division of insurance shall establish by regulation standards for the use of HIV testing by insurers, health services corporations and health maintenance organizations.

4. A laboratory certified by the U.S. Department of Health and Human Services under the Clinical Laboratory Improvement Act of 1967, permitting testing of specimens obtained in interstate commerce, and which subjects itself to ongoing proficiency testing by the College of American Pathologists, the American Association of Bio Analysts, or an equivalent program approved by the Centers for Disease Control shall be authorized to perform or conduct HIV testing for an insurer, health services corporation or health maintenance organization pursuant to this section.

5. The result or results of HIV testing of an applicant for insurance coverage shall not be disclosed by an insurer, health services corporation or health maintenance organization, except as specifically authorized by such applicant in writing. Such result or results shall however, be disclosed to a physician designated by the subject of the test. If there is no physician designated, the insurer, health services corporation, or health maintenance organization shall disclose the identity of individuals residing in Missouri having a confirmed positive HIV test result to the department of health. Provided, further, that no such insurer, health services corporation or health maintenance organization shall be liable for violating any duty or right of confidentiality established by law for disclosing such identity of individuals having a confirmed positive HIV test result to the department of health. Such disclosure shall be in a manner that ensures confidentiality. Disclosure of test results in violation of this section shall constitute a violation of sections 375.930 to 375.948, RSMo, regulating trade practices in the business of insurance. Nothing in this subsection shall be construed to foreclose any remedies existing on June 1, 1988.

191.674. Court-ordered HIV testing without right of refusal,

department of health may seek, when--court record closed, proceeding to be in camera, when

1. The department of health may seek in its own name in a court of competent jurisdiction a court order directing an individual to undergo HIV testing without the right of refusal after reasonable efforts have been made by the department to obtain informed consent to HIV testing. The court shall grant such order whenever there are reasonable grounds to believe that an individual is infected with HIV and there is clear and convincing evidence of a serious and present health threat to others posed by the individual if infected.

2. The record of any suit filed pursuant to this section shall be closed to the public and, at the request of the individual, any hearing shall be held in camera.

191.677. Prohibited acts, criminal penalties

1. It shall be unlawful for any individual knowingly infected with HIV to:

(1) Be or attempt to be a blood, organ, sperm or tissue donor except as deemed necessary for medical research; or

(2) Deliberately create a grave and unjustifiable risk of infecting another with HIV through sexual or other contact when an individual knows that he is creating that risk

2. Violation of the provisions of subsection 1 of this section is a class D felony.

3. The department of health may file a complaint with the prosecuting attorney of a court of competent jurisdiction alleging that an individual has violated a provision of subsection 1 of this section. The department of health shall assist the prosecutor in preparing such case.

191.680. Maintaining a nuisance, abatement to be ordered, when

1. Any person who shall erect, establish, continue, maintain, use, own, or lease any building, structure, or place used for the purpose of lewdness, assignation, or illegal purpose involving sexual or other contact through which transmission of HIV infection can occur is guilty of maintaining a nuisance.

2. The building, structure, or place, or the ground itself, in or upon which any such lewdness, assignation, or illegal purpose is conducted, permitted, carried on, continued, or exists, and the furniture, fixtures, musical instruments, and movable property used in conducting or maintaining such nuisance, are hereby declared to be a nuisance and shall be enjoined and abated as provided in subsection 3 of this section.

3. If the existence of a nuisance is admitted or established in an action pursuant to this section or in a criminal proceeding in



any court, an order of abatement shall be entered as part of the judgment in the case. The order shall direct the effectual closing of the business for any purpose, and so keeping it closed for a period of one year.

4. The department of health shall file suit in its own name in any court of competent jurisdiction to enforce the provisions of this section.

191.683. Reports to general assembly by department of health  
The department of health shall regularly report to the appropriate committees of both houses of the general assembly:

(1) The number of individuals with HIV infection for whom a health care plan has been developed detailing the form and impact of such health care plans in a manner that does not identify or provide identifying characteristics of an individual infected with HIV;

(2) The nature and extent to which the department has utilized judicial proceedings in a manner that does not identify or provide identifying characteristics of any individual subject to such proceedings;

(3) The form and extent of the handling of federal funds available to the department of health for disbursement;

(4) The form and extent of programs and efforts funded by state funds; and

(5) Any other information such committees shall seek.

191.686. Department testing sites in Kansas City, Springfield and St. Louis, anonymous testing-reports of results, use of coded system-contact notification required, when

1. The department of health shall designate one HIV testing site in the St. Louis area, one in the Kansas City area, and one in the Springfield area where those persons not required to undergo HIV testing without the right of refusal may be tested anonymously.

2. All physicians, hospitals, or other persons authorized by the department of health who perform or conduct HIV blood sampling may refuse to perform or conduct anonymous HIV blood sampling for an individual and may refer such person to the designated HIV testing sites.

3. A coded system that does not link individual identity with the request or result shall be used to report the results of such testing to the department of health.

4. All designated HIV testing sites shall be required to initiate contact notification when submitting test results to individuals who request anonymous testing and who test positive for HIV infection.

191.689. Schools to be given notice of identity of child with HIV infection, when, by whom-identity of infected child may be released to whom by school

1. Only after a school has adopted a policy consistent with recommendations of the Centers for Disease Control on school children who test positive for HIV shall the department of health give prompt and confidential notice of the identity of any child reported to the department to have HIV infection and the parent or guardian of any child confirmed by the department of health standards to have HIV infection shall also give prompt and confidential notice of the identity of such child to the superintendent of the school district in which the child resides, and if the child attends a nonpublic elementary or secondary school, to the chief administrative officer of such school.
2. The superintendent or chief administrative officer may disclose the identity of an infected child to those persons:
  - (1) Who are designated by the school district to determine the fitness of an individual to attend school; and
  - (2) Who have a reasonable need to know the identity of the child in order to provide proper health care.

191.692. Premarital HIV testing, rulemaking authorized, when  
The department of health may promulgate rules providing for mandatory premarital HIV testing if the Centers for Disease Control so indicates.

191.694. Infection control procedure"- requirements and training for health care facilities and professionals

1. All health care professionals and health care facilities shall adhere to universal precautions, as defined by the Centers for Disease Control of the United States Public Health Service, including the appropriate use of hand washing, protective barriers, and care in the use and disposal of needles and other sharp instruments, to minimize the risk of transmission of HIV, HBV and other blood-borne infections to patients. Health care professionals and health care facilities shall comply with current guidelines, established by the Centers for Disease Control, for disinfection and sterilization of reusable devices used in invasive procedures.
2. Health care professionals who have exudative lesions or weeping dermatitis of the hands, forearms, or other locations that may contact patients, particularly on exposed areas such as hands or forearms, shall refrain from performing all invasive procedures, and from handling patient-care equipment and devices used in performing invasive procedures until the condition

resolves.

3. As a condition for renewal of a certificate of registration or authority, permit, or license, all health care facilities shall provide satisfactory evidence that periodic training in infection control procedures, including universal precautions, is provided to all personnel who perform patient care services at or from such facilities. Regulations for such training shall be promulgated by the state regulatory authorities or bodies responsible for licensing the respective health care facilities.

4. All health care professionals who perform invasive procedures shall receive training on infection control procedures relevant to HIV and related diseases, including universal precautions and prevention of percutaneous injuries, appropriate for their specialty and approved by the department of health. The department of health, in cooperation with appropriate state regulatory authorities responsible for licensing the respective health care professionals and in cooperation with professional societies, shall develop regulations for such training. The requirements set forth in this subsection shall be deemed satisfied if the health care professional completes the training provided in accordance with the provisions of subsection 3 of this section.

191.695. Rulemaking authority, department of health

1. No rule or portion of a rule promulgated under the authority of sections 191.650 to 191.698 shall become effective until it has been approved by the joint committee or administrative rules. Upon filing any proposed rule with the secretary of state, the department of health shall concurrently submit such proposed rule to the committee which may hold hearings upon any proposed rule and may disapprove any proposed rule or portion thereof at any time. In the event the committee disapproves any proposed rule or portion thereof, the committee shall notify the department of health and the secretary of state. If any proposed rule or portion thereof is disapproved by the committee, the secretary of state shall publish in the Missouri register, as soon as practicable, an order that such rule or portion thereof has been disapproved.

2. The department of health shall not file any final order of rulemaking with the secretary of state until twenty days after such final order of rulemaking has been received by the committee. The committee may hold one or more hearings upon such final order of rulemaking during the twenty day period. If the committee neither approves or disapproves any order of rulemaking within the twenty day period, the department of health may file such order of rulemaking with the secretary of state and the

order of rule making shall be deemed approved, subject to subsequent suspension by the committee. In the event the committee disapproves any order of rulemaking or portion thereof, the committee shall notify the department of health and the secretary of state. If any final order of rulemaking or portion thereof is disapproved by the committee, the department of health shall not file any disapproved provision in an order of rulemaking and the secretary of state shall not publish any disapproved provision in the Missouri register.

3. Any rule or portion of a rule promulgated under this authority of sections 191.65( to 191.698 may be suspended by the committee at any time after a hearing conducted thereon. If any rule is suspended by the committee, the secretary of state shall publish in the Missouri register, as soon as practicable, an order withdrawing the rule.

4. No other provision of chapter 536, RSMo, regarding notice, publication or nonjudicial review of any rule promulgated by the department of health shall be applicable to such rules. Any person seeking judicial review of any such rule shall be deemed to have exhausted all administrative review procedures. Notwithstanding the provisions of section 1.140, RSMo, the provisions of this section are nonseverable and the grant of rulemaking authority is essentially dependent on the review power vested with the committee. If the review power is held unconstitutional or invalid, the grant of rulemaking authority and any rule promulgated under such rulemaking authority shall also be invalid or void.

191.698. Repealed

191.699. Disciplinary action for health care professionals who discriminate or require HIV testing before treatment  
Any health care professional who, after disclosure has been made by a patient of HIV infection, discriminates against the patient on the basis of that HIV infection or who, prior to such disclosure, makes HIV testing a condition of treatment shall be subject to administrative disciplinary action for violation of a professional trust or confidence or the commission of an act of unprofessional conduct as those terms are used in sections 330.160, RSMo, 332.321, RSMo, 334.100, PSMo, and 335.066, RSMo.

191.700. Testing of health care professionals not justified -- voluntary and confidential evaluation of infected professional, procedure -- expert review panel qualifications, powers and duties, practice restrictions, when-health care facilities informed only of restrictions-violations, complaints

made to appropriate boards

1. The current assessment by the Centers for Disease Control of the risk that infected health care professionals will transmit HIV or HBV to patients during invasive procedures does not justify mandatory testing to detect infection with those viruses. Health care professionals who perform invasive procedures are advised, however, to know their HIV antibody status and their hepatitis B antigen status.

2. (1) The department of health shall establish and oversee a voluntary evaluation process for health care professionals infected with HIV or HBV who perform invasive procedures. This evaluation process may be accessed directly by an infected health care professional, or by the director of a health care facility with the consent of the infected health care professional and after consultation with his private physician.

(2) The confidential and individualized evaluation shall be conducted by an expert review panel appointed by the department of health. Each panel shall include at least such individuals as:

(a) The health care professional's private physician;

(b) An infectious disease specialist with expertise in the epidemiology of HIV and HBV transmission who is not involved in the care of the health care professional;

(c) A health care professional with expertise in the procedures performed by the infected health care professional; and

(d) A state or local public health official.

(3) The department of health, in cooperation with appropriate state regulatory authorities or bodies responsible for licensing the respective health care professionals and with professional societies, shall develop uniform evaluation criteria which shall be used in determining whether, and under what circumstances, any restrictions or limitations should be placed on an individual health care professional's medical practice. These criteria shall, consistent with guidelines from the Centers for Disease Control, include at least the following inquiries:

(a) Whether the health care professional performs procedures in which injury could result in that individual's blood contamination of a patient's body cavity, subcutaneous tissues, or mucous membranes;

(b) The nature of the invasive procedures performed by the health care professional and the techniques used, skill and experience, and compliance with infection control practices demonstrated by that individual; and

(c) Whether the presence of physical or mental impairments may interfere with the health care professional's ability to perform such invasive procedures safely.

(4)(a) The individualized evaluation and the recommendations of the panel shall be based on the premise that HI<sup>100</sup> or HBV infection alone does not justify limiting the health care professional's duties.

(b) The panel may determine which procedures the health care professional may or may not perform, or perform with modifications. If the panel is uncertain about whether a procedure may pose some risk of HI<sup>100</sup> or HBV transmission, it may recommend that such procedures be performed only after the patients have been informed of the health care professional's infection status.

(5)(a) Information obtained during the evaluation process shall be confidential and shall not be disclosed except to health care facilities where the health care professional provides patient care. The department of health may only notify or disclose to such facilities the practice restrictions and limitations imposed on the health care professional. Such restrictions and limitations shall be disclosed only to those employed by such health care facilities who have a reasonable need to know the information.

(b) Practice restrictions or limitations recommended by the department of health shall be monitored by the health care facilities in which the infected health care professional is employed. If practice restrictions or limitations are placed on community based health care professionals, periodic monitoring to ensure compliance shall be performed by the department of health.

(c) Health care professionals whose practices are restricted or limited because of their HI<sup>100</sup> or HBV infection status shall, whenever possible, be provided opportunities to continue appropriate patient care activities.

(d) Health care facilities regulated under sections 197.010 to 197.120, RSMo, may maintain or establish peer review panels that operate under the regulations developed by the department of health and the recommendations of the Centers for Disease Control of the United States Public Health Service.

(e) Any violation of practice restrictions or limitations by a health care professional shall constitute either an act violative of professional trust and confidence, or failure or refusal to properly guard against contagious infections or communicable diseases or the spread thereof, or both, as these terms are used in sections 330.160, RSMo, 332.321, RSMo, 334.100, RSMo, and 335.066, RSMo. Complaints of possible violations of practice restrictions or limitations may be made to the appropriate state board, as provided under chapter 330, RSMo, 332, RSMo, 334, RSMo, or 335, RSMo.

3. The department of health shall, from time to time, review

established standards for preventing the transmission of HIV or HBV from health care professionals to patients and, consistent with current medical knowledge and revised or updated guidelines from the Centers for Disease Control, modify existing standards and require additional minimum standards, as appropriate.

4. Notwithstanding the provisions of sections 191.650 to 191.698, the department of health may exercise the general authority and power under section 192.020, RSMo, to intervene in instances where there is reason to believe that a health care professional is practicing in a manner that creates a grave and unjustifiable risk of injury to others.

376.817. Adopted children, coverage, exception to requirement, children with AIDS

1. No individual or group insurance policy providing coverage on an expense-incurred basis, no individual or group service or indemnity contract issued by a not for profit health services corporation nor any self-insured group health benefit plan of any type or description shall be offered, issued or renewed in this state on or after August 28, 1991, unless the policy, plan or contract covers adopted children of the insured, subscriber or enrollee on the same basis as other dependents.

2. The coverage required by this section is effective from the date of placement for the purpose of adoption and continues unless the placement is disrupted prior to legal adoption and the child is removed from placement. Coverage shall include the necessary care and treatment of medical conditions existing prior to the date of placement provided that no coverage shall be required for any child placed for adoption, if the prospective adoptive parents knew or should have known that the child had an HIV- or AIDS-related illness at the time of placement.

3. As used in this section, "placement" means in the physical custody of the adoptive parent.