
DIGEST

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HB 194 Original

2015 Regular Session

Moreno

Abstract: Creates standards and procedures for the examination and treatment of victims of a sexually-oriented criminal offense and the subsequent billing for the services rendered as a result of the offense.

Present law requires the coroner or his designee to examine all alleged victims of rape, carnal knowledge, sexual battery, and crime against nature when such cases are under police investigation.

Proposed law expands present law to victims of any sexually-oriented criminal offense and removes the requirement that the case be under police investigation.

Present law requires all licensed hospitals to adhere to the procedures set forth in present law in the event that a person presents himself or is presented for treatment as a victim of rape, attempted rape, carnal knowledge, or crime against nature.

Proposed law expands present law to apply to healthcare providers and provides that the procedures constitute minimum standards of care for healthcare providers and failure to comply with the standards shall constitute grounds for denial, suspension, or revocation of license by the appropriate licensing board or commission.

Proposed law prohibits a hospital or healthcare provider from directly billing a victim for services rendered in conducting a forensic medical examination or for any healthcare services rendered to a victim as a result of the sexually-oriented criminal offense.

Proposed law requires the Dept. of Health and Hospitals (DHH) to make available to hospitals and healthcare providers a pamphlet containing an explanation of the billing process for services rendered in conducting a forensic medical examination and for healthcare services rendered to a victim of a sexually-oriented criminal offense pursuant to the Crime Victims Reparations Act (R.S. 46:1801 et seq.). Further requires hospitals and healthcare providers to provide a copy of the pamphlet to any person presented for treatment as a victim of a sexually-oriented crime.

Present law requires any examination and treatment to include the preservation, in strict confidentiality, for a period of 30 days from the time the victim is presented for treatment, of tests or procedures, or both, and samples that may serve as potential evidence.

Proposed law expands the minimum period of preservation to a period of at least one year.

Present law requires that any evidence collected be assigned a code number and code records be maintained for a period of 30 days from the date the victim is presented for treatment.

Proposed law expands the minimum retention period to a period of at least one year and further requires the hospital or healthcare provider to assign the code number by affixing to the evidence container a barcode to be used in lieu of the victim's identifying information to maintain confidentiality.

Proposed law requires DHH, through the medical directors of each of its nine regional health service districts, to coordinate an annual sexual assault response plan for each district. Further requires each district to submit a proposed plan for review by the secretary of DHH no later than Oct. 1 of each year. An approved plan shall become effective Jan. 1 of the following year.

Proposed law requires each district, when developing the annual response plan, to incorporate a Sexual Assault Response Team protocol to the extent possible. At a minimum, proposed law requires each district to develop the annual plan to do all of the following:

- (1) Provide an inventory of all available resources and existing infrastructure in the region and clearly outline how the resources and infrastructure will be incorporated in the most effective manner.
- (2) Clearly outline the entity responsible for the purchase of sexual assault collection kits and the standards and procedures for the storage of the kits prior to use in a forensic medical examination.
- (3) Clearly outline the standards and procedures for a victim to receive a forensic medical examination to ensure access to such an examination in every parish, including the designation of a hospital or healthcare provider to be the lead entity for sexual assault examinations for adult victims and a hospital or healthcare provider to be the lead entity for sexual assault examinations for pediatric victims.
- (4) Clearly outline the standards and procedures for the handling and payment of medical bills related to the forensic medical examination.
- (5) Clearly outline the standards and procedures for the transfer of sexual assault collection kits for both reported and unreported crimes to the appropriate criminal justice agency or the local law enforcement agency having jurisdiction in the parish in which the hospital or healthcare provider is located, including the maximum time period for the transfer to occur not to exceed seven days after the criminal justice agency or local law enforcement agency receives a request for the transfer from the hospital or healthcare provider.

Proposed law requires DHH, when developing the annual response plan, to solicit the input of interested stakeholders in the region including but not limited to all of the following:

- (1) The sheriff for each parish within the region.

- (2) The police chief for any political subdivision located within the region.
- (3) All hospitals located within the region.
- (4) The coroner for each parish within the region.
- (5) First responder organizations located within the region.
- (6) Higher education institutions located within the region.
- (7) The school board for each parish located within the region.
- (8) Sexual assault advocacy organizations providing services within the region.

To assist in the coordination of services and the standardization of procedures for treating victims of a sexually-oriented criminal offense, proposed law requires all hospitals and healthcare providers to use for billing purposes the definition of a forensic medical examination as provided in present law (R.S. 15:622).

Proposed law requires all hospitals and healthcare providers to adhere to the following maximum allowable costs schedule:

- (1) Costs for a forensic medical examination shall not exceed the maximum allowable cost promulgated by DHH.
- (2) Costs for healthcare services provided to a victim as a result of a sexually-oriented criminal offense shall not exceed the maximum allowable costs promulgated by the Crime Victims Reparations Board.

Proposed law requires all sexual assault collection kits used in a forensic medical examination to meet the standards developed by DHH and Dept. of Public Safety.

Effective upon signature of governor or lapse of time for gubernatorial action.

(Amends R.S. 13:5713(F) and R.S. 40:2109.1)