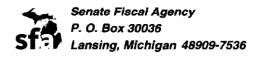
**PUBLIC ACTS 63 to 70 of 2016** 



BILL

ANALYSIS

Telephone: (517) 373-5383

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Senate Bills 374 through 381 (as enacted)

Sponsor: Senator Curtis Hertel, Jr. (S.B. 374)

Senator Peter MacGregor (S.B. 375) Senator David Knezek (S.B. 376) Senator Wayne Schmidt (S.B. 377) Senator Margaret E. O'Brien (S.B. 378) Senator Rebekah Warren (S.B. 379) Senator Jim Marleau (S.B. 380)

Senator Coleman Young II (S.B. 381)

Senate Committee: Health Policy House Committee: Health Policy

Date Completed: 12-29-16

# **RATIONALE**

The Public Health Code contains a number of provisions aimed at controlling and preventing infections transmitted primarily through sexual contact. According to the World Health Organization (WHO), there are more than 30 sexually transmissible bacteria, viruses, and parasites. Historically, these infections have been known as "venereal diseases". Over time, however, this terminology has evolved within the medical community--gradually, "sexually transmitted disease" became more widely used, and today "sexually transmitted infection" is the preferred language. Thus, it was suggested that various references to "venereal disease" in State statute should be changed to "sexually transmitted infection".

# **CONTENT**

Senate Bills 374 through 381 amended the Public Health Code to refer to "sexually transmitted infection" rather than "venereal disease" in a number of provisions regarding disease prevention and control.

Each bill took effect on July 4, 2016.

<u>Senate Bill 374</u> amended several definitions used in Article 5 (Prevention and Control of Diseases and Disabilities) of the Code.

<u>Senate Bill 375</u> amended provisions pertaining to a requirement that the Department of Health and Human Services maintain a list of reportable diseases, infections, and disabilities that designates and classifies these conditions as communicable, serious communicable, chronic, or noncommunicable.

<u>Senate Bill 376</u> amended a requirement that a local health department immediately furnish the necessary care for an individual whom the health department knows has a serious communicable disease or infection and is in its jurisdiction.

<u>Senate Bill 377</u> amended provisions related to a county clerk's provision of educational materials regarding venereal disease transmission, prevention, and testing to an applicant for a marriage license.

Page 1 of 2 sb374/1516

<u>Senate Bill 378</u> amended a provision designating as a misdemeanor the unauthorized disclosure of the fact that a marriage license applicant had taken a test for venereal disease (sexually transmitted infection, under the bill) and/or the results of the test.

The bill also deleted a provision designating as a misdemeanor a false statement by a physician in a certificate given to a marriage license applicant as documentation that the applicant received mandatory counseling on venereal disease transmission, prevention, and testing. (Public Act 209 of 2000 eliminated the counseling requirement and instead requires the county clerk to give this information to applicants in written form.)

<u>Senate Bill 379</u> amended provisions regarding the testing of pregnant women for venereal disease.

<u>Senate Bill 380</u> amended a section providing that consent to the provision of medical or surgical care, treatment, or services executed by a minor who is or professes to be infected with a venereal disease (sexually transmitted infection, under the bill) is valid and binding as if the minor had achieved the age of majority.

<u>Senate Bill 381</u> amend provisions regarding venereal disease (sexually transmitted infection) testing, information, reporting, and counseling and treatment referrals for individuals arrested and charged with crimes related to prostitution, solicitation of a child for an immoral purpose, gross indecency, criminal sexual conduct, and illegal intravenous use of a controlled substance.

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MCL 333.5101 (S.B. 374)
333.5111 (S.B. 375)
333.5117 (S.B. 376)
333.5119 (S.B. 377)
333.5121 (S.B. 378)
333.5123 (S.B. 379)
333.5127 (S.B. 380)
333.5129 (S.B. 381)
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### **ARGUMENTS**

(Please note: The arguments contained in this analysis originate from sources outside the Senate Fiscal Agency. The Senate Fiscal Agency neither supports nor opposes legislation.)

## **Supporting Argument**

The bills eliminated outdated language from the Public Health Code in favor of the more comprehensive and medically accurate terminology used currently within the health care profession. A pathogen can be present in a person's body without causing any symptoms of disease. Furthermore, "venereal disease" may be seen as a euphemism. For these reasons, the medical community gradually has adopted the more clinical term "sexually transmitted infection". Notably, the WHO made this change in the 1990s, and organizations such as the Centers for Disease Control and Prevention, as well as many individual health care professionals, have followed suit.

Legislative Analyst: Julie Cassidy

#### **FISCAL IMPACT**

The bills will have no fiscal impact on State or local government.

Fiscal Analyst: Steve Angelotti

John Maxwell Elizabeth Pratt

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.

Page 2 of 2 sb374/1516