

Wisconsin

Introduction and Table of Contents

August 24, 2009

To the Reader:

The *Compendium of State HIV Testing Laws* describes key state HIV testing laws and policies. Each state's HIV testing laws are unique and many have undergone revision or supplementation since the release of the [CDC's 2006 HIV testing recommendations](#). The *Compendium* is designed to help clinicians understand HIV testing laws and to implement sound HIV testing policies. It should not, however, be used as an official legal document.

The NCCC provides clinical consultation for healthcare providers as part of the HRSA [AIDS Education and Training Centers](#) program. Clinicians with questions about HIV testing are encouraged to call the *National HIV Telephone Consultation Service (Warmline)* at **(800) 933-3413**. The Warmline also provides advice on HIV management, including antiretroviral treatment. Other NCCC consultation services include: the National Clinicians' Post-Exposure Prophylaxis Hotline ([PEPline](#)) at **(888) 448-4911** for advice on managing occupational exposures to HIV and hepatitis; and the National Perinatal Consultation and Referral Service ([Perinatal HIV Hotline](#)) at **(888) 448-8765** for consultation on preventing mother-to-child transmission of HIV.

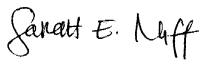
We update the *Compendium* periodically, but it is beyond the scope of the project to perform ongoing verification of every section frequently. We encourage readers to send comments, corrections, and updates (with citations when possible) to Sarah Neff at neffs@nccc.ucsf.edu.

Thank you,



Ronald H. Goldschmidt, MD
Director

&



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The Warmline, PEPline, and Perinatal Hotline are part of the National HIV/AIDS Clinicians' Consultation Center (NCCC) based at San Francisco General Hospital/ UCSF. The NCCC is a component of the **AIDS Education and Training Centers (AETC) Program** funded by the Ryan White CARE Act of the **Health Resources and Services Administration (HRSA)** HIV/AIDS Bureau in partnership with the **Centers for Disease Control and Prevention (CDC)**.

Table of Contents	i
Definitions and Helpful Resources	ii
Quick Reference Guide for Clinicians to Wisconsin HIV Testing Laws	iii
Perinatal Quick Reference Guide for Clinicians	iv
State Policies Relating to HIV testing, 2009	WI-1 – WI-46

Definitions and Helpful Resources

August 24, 2009

Definitions Commonly Used Nationally

- **Anonymous Testing** – Patient's name is not recorded with test results.
- **Confidential** – Patient's name is recorded with test results.
- **HIV Prevention Counseling** – Refers to an interactive process of assessing risk, recognizing specific behaviors that increase the risk for acquiring or transmitting HIV and developing a plan to take specific steps to reduce risks.¹
 - **Pre-test counseling** can include: (1) discussing HIV, risk factors and prevention methods; (2) explaining the meaning of positive and negative test results and their implications; (3) assessing the patient's personal and social supports; (4) determining the patient's readiness to cope with test results; (5) discussing disclosure of test results to others; and (6) advising the patient if reporting positive test results to health authorities is required.
 - **Post-test counseling** can include: (1) informing the patient of the results and meaning of the test results; (2) providing education about avoiding risks of sexual and injection drug exposures; and, for patients who test positive, (3) assessing the impact of test results for the patient and family; (3) explaining treatment options; (4) discussing partner counseling and disclosure of test results to others; and (5) initiating a support and treatment plan.
- **General Consent** – Consent for HIV screening is included in the general medical consent.
- **HIV** – Human Immunodeficiency Virus.
- **Informed Consent** – A process of communication between patient and provider through which an informed patient can choose whether to undergo HIV testing or decline to do so. Elements of informed consent typically include providing oral or written information regarding HIV, the risks and benefits of testing, the implications of HIV test results, how test results will be communicated, and the opportunity to ask questions.¹
- **Name-based reporting** – Cases are reported by patient name (required in all states except HI and VT).
- **Opt-in** – Patients typically are provided pre-HIV test counseling and must consent specifically to an HIV-antibody test, either orally or in writing.²
- **Opt-out** – Performing HIV screening after notifying the patient that: the test will be performed; and the patient may elect to decline or defer testing. Assent is inferred unless the patient declines testing.¹
- **Routine Testing** – HIV screening that is performed routinely during health-care encounters.
- **Rapid Testing** – Testing with any of the six FDA-approved rapid HIV tests that produce results in 30 minutes or less.³
- **Specific Consent** – Consent for the HIV screening is separate from the general medical consent.

Helpful Resources

CDC Recommendations and Guidelines: <http://www.cdc.gov/hiv/topics/testing/guideline.htm>

Emergency Department Implementation Guide: <http://edhivtestguide.org/>

Prenatal HIV Testing Website: <http://www.cdc.gov/hiv/topics/perinatal/1test2lives/>

For questions or comments about the compendium, contact NCCC: NCCCTemp@nccc.ucsf.edu

Clinicians with questions about HIV testing can call the Warmline at 800-933-3413.

¹ Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. MMWR Recomm Rep. 2006 Sep 22;55(RR-14):1-17; quiz CE1-4. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

² <http://www.cdc.gov/mmwr/PDF/wk/mm5145.pdf>

³ <http://www.cdc.gov/hiv/topics/testing/resources/factsheets/rt-lab.htm>

Wisconsin

A Quick Reference Guide for Clinicians to Wisconsin HIV Testing Laws

August 24, 2009

This Quick Reference Guide for clinicians is a summary of relevant Wisconsin state HIV testing laws. Note that if a section in this Quick Reference Guide reads “no specific provisions were found,” provisions actually might exist for this topic within the state’s statutes, codes, or rules and regulations, but probably are not essential to clinicians.

For a more complete synopsis of Wisconsin HIV testing laws, please refer to the section of the Compendium that follows this Quick Reference Guide.

Informed Consent

- Specific informed consent required; must be in writing (see *State Policies Relating to HIV Testing, 2009*, below, for exceptions).

Counseling

- Counseling is required.

Provisos of Testing

- **Anonymous**
 - Anonymous testing is available at designated anonymous testing sites.
- **Rapid**
 - No specific provisions regarding rapid testing were found.
- **Routine**
 - No specific provisions regarding routine testing were found.

Disclosure

- Notification of sexual partners of a possible exposure to HIV is encouraged but not required.

Minor/Adolescent Testing

- Persons 14 years or older may consent to HIV testing.

Wisconsin

Perinatal Quick Reference Guide:

A Guide to Wisconsin Perinatal HIV Testing Laws for Clinicians

August 24, 2009

This Perinatal Quick Reference Guide for clinicians is a summary of relevant Wisconsin perinatal state HIV testing laws. Note that if a section in this Quick Reference Guide reads “no specific provisions were found,” provisions actually might exist for this topic within the state’s statutes, codes, or rules and regulations, but probably are not essential to clinicians.

For a more complete synopsis of Wisconsin HIV testing laws, please refer to the corresponding section of the *State HIV Testing Laws Compendium* (www.nccc.ucsf.edu), “Testing of pregnant women and/or newborns.”

Prenatal

- **Initial visit**
 - No specific provisions regarding initial visit prenatal testing were found.
- **Third trimester**
 - No specific provisions regarding third trimester prenatal testing were found.

Labor & Delivery

- No specific provisions regarding labor & delivery testing were found.

Neonatal

- No specific provisions regarding neonatal testing were found.

Other

- N/A

**Wisconsin
State Policies Relating to HIV Testing, 2009**

Table of Contents

Wisconsin Statutes [WS]

Chapter 48: Children’s Code..... Pages 4-5
Chapter 103: Employment Regulations..... Page 6
Chapter 252: Communicable Diseases..... Pages 7-26
Chapter 631: Insurance Contracts Generally..... Page 27
Chapter 901: Evidence – General Proceedings..... Page 28
Chapter 938: Juvenile Justice Code..... Pages 29-36
Chapter 968: Commencement of Criminal Proceedings.....Pages 37-39

Wisconsin Administrative Code [WAC]

Chapter HFS: Health and Family Services..... Pages 40-43
Chapter Ins: Insurance Commissioner..... Pages 44-45
Chapter RL: Regulation and Licensing..... Page 46

	Policy Category	Type	Section Code(s)
RESTRICTIONS/ MANDATES	Restrictions on use of HIV test	Testing not required for employment/hiring purposes for state agencies	WS §103.15
		Testing prohibited for determining group insurance eligibility	WS §631.90
		Prohibited sale of tests or test kits not approved by the state epidemiologist	WS §252.15(5r)
	Mandatory testing within the criminal justice system	Persons charged with a sex offense	WS §968.38
		Juveniles charged with a sex offense	WS §938.296
		Potential transmission to victims	WS §938.346
		Occupational exposure – any employee may request testing of source patient in cases of exposure	WS §252.15(2)(a)7
	Mandatory testing outside of the criminal justice system	Occupational exposure – health care workers, EMS, corrections, schools may request testing of source patient in cases of exposure	WS §252.15(2)(a)7

		Procedures for refused consent – court orders	WS §252.15(2)(a)7b,c
		Blood, organ, anatomical, semen donations	WS §252.13 WS §252.15(2)(a)
		Department of regulation and licensing may require boxer to submit to HIV examination	WAC RL 114.09
PRE-TESTING	Mandatory offering of HIV/AIDS information and/or testing	Insurance companies must provide printed factual materials on HIV/AIDS before testing	WAC Ins 3.53
		Substance abuse services must provide patients with HIV information	WAC HFS 75.03
		Residents of residential care centers for youth must be provided HIV information	WAC HFS 52.41
	Informed consent	Specific informed consent required - written	WS §252.15(2)(a)
		Exceptions to required consent	WS §252.15(2)(a)
		Consent required for insurance testing	WAC Ins 3.53
	Counseling requirements	Testers must provide counseling about HIV and referral for care and services as necessary	WS §252.14 (3)
Anonymous testing	State department of health must sponsor anonymous testing sites	WS §252.12	
POST-TESTING	Disclosure/confidentiality	HIV test results as confidential	WS §252.12
		Exceptions to confidentiality	WS §252.15
		Partner notification – provider to counsel test subject to notify any possible exposed contacts	WS §252.12 WS §252.15(7m)
		Disclosure to any alleged exposed individual in cases of requested source patient testing	WS §252.15(2)(a)7
		Disclosure to temporary caretaker of HIV status of children in temporary protective custody	WS §48.371
		Disclosure to funeral directors	WS §252.15(5)(a)7
		Penalties for unauthorized disclosure of HIV results – discharge or suspension	WS §252.15(10)

	Reporting	Name-based reporting	WS §252.15(7) WAC HFS 145.04
OTHER	Testing of pregnant women and/or newborns	No related laws found	
	Testing of minors/adolescents	Minors may consent to STD services	WS §252.11
		Minors 14 years or older may consent to HIV testing and treatment	WS §252.15
	Rapid HIV testing	No related laws found	
	Training and education of health care providers	New employees of residential care centers for youth must be HIV educated before working independently with residents	WAC HFS 52.12

Recommended Resources

The Updated Wisconsin Statutes and Annotations

<http://www.legis.state.wi.us/rsb/stats.html>

Wisconsin Administrative Code

<http://nxt.legis.state.wi.us/link.asp?code/top>

Wisconsin Department of Health and Family Services

<http://www.dhfs.state.wi.us/>

Chapter 48: Children's Code

WI Title 48 Code §	Code Language
§ 48.371	<p>Access to certain information by substitute care provider.</p> <p>(1) If a child is placed in a foster home, treatment foster home, group home, or residential care center for children and youth or in the home of a relative other than a parent, including a placement under s. 48.205 or 48.21, the agency, as defined in s. 48.38 (1) (a), that placed the child or arranged for the placement of the child shall provide the following information to the foster parent, treatment foster parent, relative, or operator of the group home or residential care center for children and youth at the time of placement or, if the information has not been provided to the agency by that time, as soon as possible after the date on which the agency receives that information, but not more than 2 working days after that date:</p> <p>(a) Results of a test or a series of tests of the child to determine the presence of HIV, as defined in s. 968.38 (1) (b), antigen or nonantigenic products of HIV, or an antibody to HIV, as provided under s. 252.15 (5) (a) 19., including results included in a court report or permanency plan. At the time that the test results are provided, the agency shall notify the foster parent, treatment foster parent, relative, or operator of the group home or residential care center for children and youth of the confidentiality requirements under s. 252.15 (6).</p> <p>(b) Results of any tests of the child to determine the presence of viral hepatitis, type B, including results included in a court report or permanency plan.</p> <p>(c) Any other medical information concerning the child that is necessary for the care of the child.</p> <p>(3) At the time of placement of a child in a foster home, treatment foster home, group home, or residential care center for children and youth or in the home of a relative other than a parent or, if the information is not available at that time, as soon as possible after the date on which the court report or permanency plan has been submitted, but no later than 7 days after that date, the agency, as defined in s. 48.38 (1) (a), responsible for preparing the child's permanency plan shall provide to the foster parent, treatment foster parent, relative, or operator of the group home or residential care center for children and youth information contained in the court report submitted under s. 48.33 (1), 48.365 (2g), 48.425 (1), 48.831 (2) or 48.837 (4) (c) or permanency plan submitted under s. 48.355 (2e), 48.38, 48.43 (1) (c) or (5) (c), 48.63 (4) or (5) (c) or 48.831 (4) (e) relating to findings or opinions of the court or agency that prepared the court report or permanency plan relating to any of the following:</p> <p>(a) Any mental, emotional, cognitive, developmental, or behavioral disability of the child.</p>

WI Title 48 Code §	Code Language
	<p>(b) Any involvement of the child in any criminal gang, as defined in s. 939.22 (9), or in any other group in which any child was traumatized as a result of his or her association with that group.</p> <p>(c) Any involvement of the child in any activities that are harmful to the child's physical, mental, or moral well-being.</p> <p>(d) Any involvement of the child, whether as victim or perpetrator, in sexual intercourse or sexual contact in violation of s. 940.225, 948.02, 948.025, or 948.085, prostitution in violation of s. 944.30, sexual exploitation of a child in violation of s. 948.05, or causing a child to view or listen to sexual activity in violation of s. 948.055, if the information is necessary for the care of the child or for the protection of any person living in the foster home, treatment foster home, group home, or residential care center for children and youth.</p>

Chapter 103: Employment Regulations
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WI Chap 103 Code §	Code Language
§ 103.15	<p>Restrictions on use of a test for HIV.</p> <p>(1) In this section:</p> <p>(a) "Employer" includes the state, its political subdivisions and any office, department, independent agency, authority, institution, association, society or other body in state or local government created or authorized to be created by the constitution or any law, including the legislature and the courts.</p> <p>(am) "HIV" means any strain of human immunodeficiency virus, which causes acquired immunodeficiency syndrome.</p> <p>(b) "HIV infection" means the pathological state produced by a human body in response to the presence of HIV.</p> <p>(c) "State epidemiologist" means the individual designated by the secretary of health and family services as the individual in charge of communicable disease control for this state.</p> <p>(2) Notwithstanding ss. 227.01 (13) and 227.10 (1), unless the state epidemiologist determines and the secretary of health and family services declares under s. 250.04 (1) or (2) (a) that individuals who have HIV infections may, through employment, provide a significant risk of transmitting HIV to other individuals, no employer or agent of an employer may directly or indirectly:</p> <p>(a) Solicit or require as a condition of employment of any employee or prospective employee a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p> <p>(b) Affect the terms, conditions or privileges of employment or terminate the employment of any employee who obtains a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p> <p>(3) Any agreement by an employer or agent of the employer and an employee or prospective employee offering employment or any pay or benefit to an employee or prospective employee in return for taking a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV is prohibited, except as provided under sub. (2) (intro.).</p>

Chapter 252: Communicable Diseases

WI Chap 252 Code §	Code Language
§ 252.11	<p>Sexually transmitted disease.</p> <p>(1) In this section, "sexually transmitted disease" means syphilis, gonorrhea, chlamydia and other diseases the department includes by rule.</p> <p>(1m) A physician or other health care professional called to attend a person infected with any form of sexually transmitted disease, as specified in rules promulgated by the department, shall report the disease to the local health officer and to the department in the manner directed by the department in writing on forms furnished by the department. A physician may treat a minor infected with a sexually transmitted disease or examine and diagnose a minor for the presence of such a disease without obtaining the consent of the minor's parents or guardian. The physician shall incur no civil liability solely by reason of the lack of consent of the minor's parents or guardian.</p>
§ 252.12	<p>HIV and related infections, including hepatitis C virus infections; services and prevention.</p> <p>(1) DEFINITIONS.</p> <p>In this section:</p> <p>(c) "Nonprofit corporation" means a nonstock corporation organized under ch. 181 that is a nonprofit corporation, as defined in s. 181.0103 (17).</p> <p>(d) "Organization" means a nonprofit corporation or a public agency which proposes to provide services to individuals with acquired immunodeficiency syndrome.</p> <p>(e) "Public agency" means a county, city, village, town or school district or an agency of this state or of a county, city, village, town or school district.</p> <p>(2) DISTRIBUTION OF FUNDS.</p> <p>(a) HIV and related infections, including hepatitis C virus infections; services. From the appropriations under s. 20.435 (1) (a) and (5) (am), the department shall distribute funds for the provision of services to individuals with or at risk of contracting HIV infection, as follows:</p> <p>1. 'Partner referral and notification.</p> <p>The department shall contact an individual known to have received an HIV infection and encourage him or her to refer for counseling, HIV testing, and, if appropriate, testing for hepatitis C virus infection any person with whom the individual has had sexual relations or has shared intravenous equipment.</p> <p>2. 'Grants to local projects.</p> <p>The department shall make grants to applying organizations for the provision of HIV and related infection prevention information, the establishment of counseling support groups and the provision of direct care</p>

WI Chap 252 Code §	Code Language
	<p>to persons with HIV infection, including those persons with hepatitis C virus infection.</p> <p>3. 'Statewide public education campaign.</p> <p>The department shall promote public awareness of the risk of contracting HIV and related infections and measures for HIV and related infections protection by development and distribution of information through clinics providing family planning services, as defined in s. 253.07 (1) (b), offices of physicians and clinics for sexually transmitted diseases and by newsletters, public presentations or other releases of information to newspapers, periodicals, radio and television stations and other public information resources. The information shall be targeted at individuals whose behavior puts them at risk of contracting HIV and related infections and shall encompass the following topics:</p> <p>a. HIV infection and related infections.</p> <p>b. Means of identifying whether or not individuals may be at risk of contracting HIV and related infections.</p> <p>c. Measures individuals may take to protect themselves from contracting HIV and related infections.</p> <p>d. Locations for procuring additional information or obtaining testing services.</p> <p>4. 'Information network.</p> <p>The department shall establish a network to provide information to local health officers and other public officials who are responsible for HIV infection and related infection prevention and training.</p> <p>5. 'HIV seroprevalence studies.</p> <p>The department shall perform tests for the presence of HIV and, if appropriate, related infections and shall conduct behavioral surveys among population groups determined by the department to be highly at risk of becoming infected with or transmitting HIV and related infections. Information obtained shall be used to develop targeted HIV infection and related infection prevention efforts for these groups and to evaluate the states prevention strategies.</p> <p>6. 'Grants for targeted populations and intervention services.</p> <p>The department shall make grants to those applying organizations that the department determines are best able to contact individuals who are determined to be highly at risk of contracting HIV for the provision of HIV and related infection information and intervention services.</p>

WI Chap 252 Code §	Code Language
	<p>7. 'Contracts for counseling and laboratory testing services.</p> <p>The department shall distribute funding in each fiscal year to contract with organizations to provide, at alternate testing sites, anonymous or confidential counseling services for HIV and laboratory testing services for the presence of HIV and, if appropriate, related viruses.</p> <p>8. 'Mike Johnson life care and early intervention services grants.</p> <p>The department shall award not more than 2,569,900 in fiscal year 2005-06 and each fiscal year thereafter in grants to applying organizations for the provision of needs assessments; assistance in procuring financial, medical, legal, social and pastoral services; counseling and therapy; homecare services and supplies; advocacy; and case management services. These services shall include early intervention services. The department shall also award not more than 74,000 in each year from the appropriation under s. 20.435 (7) (md) for the services under this subdivision. The state share of payment for case management services that are provided under s. 49.45 (25) (be) to recipients of medical assistance shall be paid from the appropriation under s. 20.435 (5) (am)</p> <p>9. 'Grant for family resource center.</p> <p>The department shall award a grant to develop and implement an African-American family resource center in the city of Milwaukee that targets activities toward the prevention and treatment of HIV infection and related infections, including hepatitis C virus infection, of minority group members, as defined in s. 560.036 (1) (f)</p> <p>(c) HIV prevention grants.</p> <p>1. From the appropriation under s. 20.435 (3) (md), the department shall award to applying nonprofit corporations or public agencies up to 75,000 in each fiscal year, on a competitive basis, as grants for services to prevent HIV. Criteria for award of the grants shall include all of the following:</p> <p>a. The scope of proposed services, including the proposed targeted population and numbers of persons proposed to be served.</p> <p>b. The proposed methodology for the prevention services, including distribution and delivery of information and appropriateness of the message provided.</p> <p>c. The qualifications of the applicant nonprofit corporation or public agency and its staff.</p> <p>d. The proposed allocation of grant funds to the nonprofit corporation or public agency staff and services.</p> <p>e. The proposed method by which the applicant would evaluate the impact</p>

WI Chap 252 Code §	Code Language
	<p>of the grant funds awarded.</p> <p>2. From the appropriation under s. 20.435 (5) (am), the department shall award 75,000 in each fiscal year as grants for services to prevent HIV infection and related infections, including hepatitis C virus infection. Criteria for award of the grants shall include the criteria specified under subd. 1. The department shall award 60% of the funding to applying organizations that receive funding under par. (a) 8. and 40% of the funding to applying community-based organizations that are operated by minority group members, as defined in s. 560.036 (1) (f)</p> <p>3. From the appropriation under s. 20.435 (5) (am), the department shall award to the African American AIDS task force of the Black Health Coalition of Wisconsin, Inc., 25,000 in each fiscal year as grants for services to prevent HIV infection and related infections, including hepatitis C infection.</p> <p>(3) CONFIDENTIALITY OF INFORMATION.</p> <p>The results of any test performed under sub. (2) (a) 5. are confidential and may be disclosed only to the individual who receives a test or to other persons with the informed consent of the test subject. Information other than that released to the test subject, if released under sub. (2) (a) 5., may not identify the test subject.</p>
§ 252.13	<p>Blood tests for HIV.</p> <p>(1) In this section, "autologous transfusion" means the receipt by an individual, by transfusion, of whole blood, blood plasma, a blood product or a blood derivative, which the individual has previously had withdrawn from himself or herself for his or her own use.</p> <p>(1m) Except as provided under sub. (3), any blood bank, blood center or plasma center in this state that purchases or receives whole blood, blood plasma, a blood product or a blood derivative shall, prior to its distribution or use and with informed consent under the requirements of s. 252.15 (2) (b), subject that blood, plasma, product or derivative to a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under sub. (1r) (a) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. This subsection does not apply to a blood bank that purchases or receives whole blood, blood plasma, a blood product or a blood derivative from a blood bank, blood center or plasma center in this state if the whole blood, blood plasma, blood product or blood derivative has previously been subjected to a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under sub. (1r) (a) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p> <p>(1r) For the purposes of this section, the state epidemiologist shall make separate findings of medical significance and sufficient reliability for a test or a series of tests to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV for each of the following purposes:</p>

WI Chap 252 Code §	Code Language
	<p>(a) Subjecting whole blood, blood plasma, a blood product or a blood derivative to a test prior to distribution or use of the whole blood, blood plasma, blood product or blood derivative.</p> <p>(b) Providing disclosure of test results to the subject of the test.</p> <p>(2) If performance of a test under sub. (1m) yields a validated test result positive for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV, the whole blood, blood plasma, blood product or blood derivative so tested with this result may not be distributed or used except for purposes of research or as provided under sub. (5)</p> <p>(3) If a medical emergency, including a threat to the preservation of life of a potential donee, exists under which whole blood, blood plasma, a blood product or a blood derivative that has been subjected to testing under sub. (1m) is unavailable, the requirement of sub. (1m) shall not apply.</p> <p>(4) Subsections (1m) and (2) do not apply to the extent that federal law or regulations require that a blood bank, blood center or plasma center test whole blood, blood plasma, a blood product or a blood derivative.</p> <p>(5) Whole blood, blood plasma, a blood product or a blood derivative described under sub. (2) that is voluntarily donated solely for the purpose of an autologous transfusion may be distributed to or used by the person who has donated the whole blood, blood plasma, blood product or blood derivative. No person other than the person who has donated the whole blood, blood plasma, blood product or blood derivative may receive or use the whole blood, blood plasma, blood product or blood derivative unless it has been subjected to a test under sub. (1m) and the test has yielded a negative result for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p>
§ 252.14	<p>Discrimination related to acquired immunodeficiency syndrome.</p> <p>(2) No health care provider, peace officer, fire fighter, correctional officer, state patrol officer, jailer or keeper of a jail or person designated with custodial authority by the jailer or keeper, home health agency, inpatient health care facility or person who has access to a validated test result may do any of the following with respect to an individual who has acquired immunodeficiency syndrome or has a positive test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV, solely because the individual has HIV infection or an illness or medical condition that is caused by, arises from or is related to HIV infection:</p> <p>(a) Refuse to treat the individual, if his or her condition is within the scope of licensure or certification of the health care provider, home health agency or inpatient health care facility.</p> <p>(am) If a peace officer, fire fighter, correctional officer, state patrol officer,</p>

WI Chap 252 Code §	Code Language
	<p>jailer or keeper of a jail or person designated with custodial authority by the jailer or keeper, refuse to provide services to the individual.</p> <p>(b) Provide care to the individual at a standard that is lower than that provided other individuals with like medical needs.</p> <p>(bm) If a peace officer, fire fighter, correctional officer, state patrol officer, jailer or keeper of a jail or person designated with custodial authority by the jailer or keeper, provide services to the individual at a standard that is lower than that provided other individuals with like service needs.</p> <p>(c) Isolate the individual unless medically necessary.</p> <p>(d) Subject the individual to indignity, including humiliating, degrading or abusive treatment.</p> <p>(3) A health care provider, home health agency or inpatient health care facility that tests an individual for HIV infection shall provide counseling about HIV and referral for appropriate health care and support services as necessary. A health care provider, home health agency or inpatient health care facility that treats an individual who has an HIV infection or acquired immunodeficiency syndrome shall develop and follow procedures that shall ensure continuity of care for the individual in the event that his or her condition exceeds the scope of licensure or certification of the provider, agency or facility.</p> <p>(4) Any person violating sub. (2) is liable to the patient for actual damages and costs, plus exemplary damages of up to 5,000 for an intentional violation. In determining the amount of exemplary damages, a court shall consider the ability of a health care provider who is an individual to pay exemplary damages.</p>
§ 252.15	<p>Restrictions on use of a test for HIV.</p> <p>(1) DEFINITIONS.</p> <p>In this section:</p> <p>(ab) "Affected person" means an emergency medical technician; first responder; fire fighter; peace officer; correctional officer; person who is employed at a juvenile correctional facility, as defined in s. 938.02 (10p), or a secured residential care center for children and youth, as defined in s. 938.02 (15g); state patrol officer; jailer, keeper of a jail, or person designated with custodial authority by the jailer or keeper; health care provider; employee of a health care provider; staff member of a state crime laboratory; social worker; or employee of a school district, cooperative educational service agency, charter school, private school, the Wisconsin Educational Services Program for the Deaf and Hard of Hearing, or the Wisconsin Center for the Blind and Visually Impaired.</p> <p>(ad) "Correctional officer" has the meaning given in s. 301.28 (1)</p>

WI Chap 252 Code §	Code Language
	<p>(af) "Emergency medical technician" has the meaning given in s. 146.50 (1) (e)</p> <p>(aj) "Fire fighter" has the meaning given in s. 102.475 (8) (b)</p> <p>(am) "Health care professional" means a physician who is licensed under ch. 448 or a registered nurse or licensed practical nurse who is licensed under ch. 441</p> <p>(ar) "Health care provider" means any of the following:</p> <ol style="list-style-type: none"> 1. A person or entity that is specified in s. 146.81 (1), but does not include a massage therapist or bodyworker issued a certificate under ch. 460 2. A home health agency. 3. An employee of the Mendota Mental Health Institute or the Winnebago Mental Health Institute. <p>(cm) "Home health agency" has the meaning given in s. 50.49 (1) (a)</p> <p>(d) "Informed consent for testing or disclosure" means consent in writing on an informed consent for testing or disclosure form by a person to the administration of a test to him or her for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or to the disclosure to another specified person of the results of a test administered to the person consenting.</p> <p>(e) "Informed consent for testing or disclosure form" means a printed document on which a person may signify his or her informed consent for testing for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or authorize the disclosure of any test results obtained.</p> <p>(eg) "Relative" means a spouse, parent, grandparent, stepparent, brother, sister, first cousin, nephew or niece; or uncle or aunt within the 3rd degree of kinship as computed under s. 990.001 (16) This relationship may be by blood, marriage or adoption.</p> <p>(em) "Significantly exposed" means sustained a contact which carries a potential for a transmission of HIV, by one or more of the following:</p> <ol style="list-style-type: none"> 1. Transmission, into a body orifice or onto mucous membrane, of blood; semen; vaginal secretions; cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid; or other body fluid that is visibly contaminated with blood. 2. Exchange, during the accidental or intentional infliction of a penetrating wound, including a needle puncture, of blood; semen; vaginal secretions; cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid; or

WI Chap 252 Code §	Code Language
	<p>other body fluid that is visibly contaminated with blood.</p> <p>3. Exchange, into an eye, an open wound, an oozing lesion, or where a significant breakdown in the epidermal barrier has occurred, of blood; semen; vaginal secretions; cerebrospinal, synovial, pleural, peritoneal, pericardial or amniotic fluid; or other body fluid that is visibly contaminated with blood.</p> <p>6. Other routes of exposure, defined as significant in rules promulgated by the department. The department in promulgating the rules shall consider all potential routes of transmission of HIV identified by the centers for disease control of the federal public health service.</p> <p>(er) "Social worker" means an individual who is certified or licensed as a social worker, advanced practice social worker, independent social worker, or clinical social worker under ch. 457</p> <p>(fm) "Universal precautions" means measures that a health care provider, an employee of a health care provider or other individual takes in accordance with recommendations of the federal centers for disease control for the health care provider, employee or other individual for prevention of HIV transmission in health-care settings.</p> <p>(2) INFORMED CONSENT FOR TESTING OR DISCLOSURE.</p> <p>(a) No health care provider, blood bank, blood center or plasma center may subject a person to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV unless the subject of the test first provides informed consent for testing or disclosure as specified under par. (b), except that consent to testing is not required for any of the following:</p> <p>1. Except as provided in subd. 1g., a health care provider who procures, processes, distributes or uses a human body part or human tissue donated as specified under s. 157.06 (6) (a) or (b) shall, without obtaining consent to the testing, test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV in order to assure medical acceptability of the gift for the purpose intended. The health care provider shall use as a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. If the validated test result of the donor from the test or series of tests performed is positive, the human body part or human tissue donated for use or proposed for donation may not be used.</p> <p>1g. If a medical emergency, as determined by the attending physician of a potential donee and including a threat to the preservation of life of the potential donee, exists under which a human body part or human tissue that has been subjected to testing under subd. 1. is unavailable, the requirement of subd. 1. does not apply.</p>

WI Chap 252 Code §	Code Language
	<p>2. The department, a laboratory certified under 42 USC 263a or a health care provider, blood bank, blood center or plasma center may, for the purpose of research and without first obtaining written consent to the testing, subject any body fluids or tissues to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV if the testing is performed in a manner by which the identity of the test subject is not known and may not be retrieved by the researcher.</p> <p>3. The medical director of a center for the developmentally disabled, as defined in s. 51.01 (3), or a mental health institute, as defined in s. 51.01 (12), may, without obtaining consent to the testing, subject a resident or patient of the center or institute to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV if he or she determines that the conduct of the resident or patient poses a significant risk of transmitting HIV to another resident or patient of the center or institute.</p> <p>4. A health care provider may subject an individual to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV, without obtaining consent to the testing from the individual, if all of the following apply:</p> <p>a. The individual has been adjudicated incompetent in this state, is under 14 years of age or is unable to give consent because he or she is unable to communicate due to a medical condition.</p> <p>b. The health care provider obtains consent for the testing from the individuals guardian, if the individual is adjudicated incompetent in this state; from the individuals parent or guardian, if the individual is under 14 years of age; or from the individuals closest living relative or another with whom the individual has a meaningful social and emotional relationship if the individual is not a minor nor adjudicated incompetent.</p> <p>6. A health care professional acting under an order of the court under subd. 7. or s. 938.296 (4) or (5) or 968.38 (4) or (5) may, without first obtaining consent to the testing, subject an individual to a test or a series of tests to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. No sample used for laboratory test purposes under this subdivision may disclose the name of the test subject, and, notwithstanding sub. (4) (c), the test results may not be made part of the individuals permanent medical record.</p> <p>7.</p> <p>a. If all of the conditions under subd. 7. ai. to c. are met, an emergency medical technician; first responder; fire fighter; peace officer; correctional officer; person who is employed at a juvenile correctional facility, as defined in s. 938.02 (10p), or a secured residential care center for children and youth, as defined in s. 938.02 (15g); state patrol officer; jailer, keeper of a</p>

WI Chap 252 Code §	Code Language
	<p>jail, or person designated with custodial authority by the jailer or keeper, during the course of providing care or services to an individual; a peace officer, correctional officer, state patrol officer, jailer, or keeper of a jail, or person designated with custodial authority by the jailer or keeper, while searching or arresting an individual or while controlling or transferring an individual in custody; a health care provider or an employee of a health care provider, during the course of providing care or treatment to an individual or handling or processing specimens of body fluids or tissues of an individual; a staff member of a state crime laboratory, during the course of handling or processing specimens of body fluids or tissues of an individual; social worker; or an employee of a school district, cooperative educational service agency, charter school, private school, the Wisconsin Educational Services Program for the Deaf and Hard of Hearing, or the Wisconsin Center for the Blind and Visually Impaired, while performing employment duties involving an individual; who is significantly exposed to the individual may subject the individuals blood to a test or a series of tests for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV and may receive disclosure of the results.</p> <p>ai. The affected person uses universal precautions, if any, against significant exposure, and was using universal precautions at the time that he or she was significantly exposed, except in those emergency circumstances in which the time necessary for use of the universal precautions would endanger the life of the individual.</p> <p>ak. A physician or advanced practice nurse prescriber, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the affected person has been significantly exposed. The certification shall accompany the request for testing and disclosure. If the affected person who is significantly exposed is a physician or advanced practice nurse prescriber, he or she may not make this determination or certification. The information that is provided to a physician or advanced practice nurse prescriber to document the occurrence of a significant exposure and the physicians or advanced practice nurse prescribers certification that an affected person has been significantly exposed, under this subd. 7. ak., shall be provided on a report form that is developed by the department of commerce under s. 101.02 (19) (a) or on a report form that the department of commerce determines, under s. 101.02 (19) (b), is substantially equivalent to the report form that is developed under s. 101.02 (19) (a)</p> <p>am. The affected person submits to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV, as soon as feasible or within a time period established by the department after consulting guidelines of the centers for disease control of the federal public health service, whichever is earlier.</p> <p>ap. Except as provided in subd. 7. av. to c., the test is performed on blood that is drawn for a purpose other than testing for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p>

WI Chap 252 Code §	Code Language
	<p>ar. The individual, if capable of consenting, has been given an opportunity to be tested with his or her consent and has not consented.</p> <p>at. The individual has been informed that his or her blood may be tested for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV; that the test results may be disclosed to no one, including that individual, without his or her consent, except to the person who is certified to have been significantly exposed; that, if the person knows the identity of the individual, he or she may not disclose the identity to any other person except for the purpose of having the test or series of tests performed; and that a record may be kept of the test results only if the record does not reveal the individuals identity.</p> <p>av. If blood that is specified in subd. 7. ap. is unavailable, the person who is certified under subd. 7. ak. to have been significantly exposed may request the district attorney to apply to the circuit court for his or her county to order the individual to submit to a test or a series of tests for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV and to disclose the results to that person. The person who is certified under subd. 7. ak. to have been significantly exposed shall accompany the request with the certification under subd. 7. ak.</p> <p>b. Upon receipt of a request and certification under the requirements of this subdivision, a district attorney shall, as soon as possible so as to enable the court to provide timely notice, apply to the circuit court for his or her county to order the individual to submit to a test or a series of tests as specified in subd. 7. a., administered by a health care professional, and to disclose the results of the test or tests as specified in subd. 7. c.</p> <p>c. The court shall set a time for a hearing on the matter under subd. 7. a. within 20 days after receipt of a request under subd. 7. b. The court shall give the district attorney and the individual from whom a test is sought notice of the hearing at least 72 hours prior to the hearing. The individual may have counsel at the hearing, and counsel may examine and cross-examine witnesses. If the court finds probable cause to believe that the individual has significantly exposed the affected person, the court shall, except as provided in subd. 7. d., order the individual to submit to a test or a series of tests for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. The court shall require the health care professional who performs the test or series of tests to refrain from disclosing the test results to the individual and to disclose the test results to the affected person and his or her health care professional. No sample used for laboratory test purposes under this subd. 7. c. may disclose the name of the test subject.</p> <p>d. The court is not required to order the individual to submit to a test under subd. 7. c. if the court finds substantial reason relating to the life or health of the individual not to do so and states the reason on the record.</p>

WI Chap 252 Code §	Code Language
	<p>7m. The test results of an individual under subd. 7. may be disclosed only to the individual, if he or she so consents, to anyone authorized by the individual and to the affected person who was certified to have been significantly exposed. A record may be retained of the test results only if the record does not reveal the individuals identity. If the affected person knows the identity of the individual whose blood was tested, he or she may not disclose the identity to any other person except for the purpose of having the test or series of tests performed.</p> <p>(am)</p> <p>1. A health care provider who procures, processes, distributes or uses human sperm donated as specified under s. 157.06 (6) (a) or (b) shall, prior to the distribution or use and with informed consent under the requirements of par. (b), test the proposed donor for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV in order to assure medical acceptability of the gift for the purpose intended. The health care provider shall use as a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under s. 252.13 (1r) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. The health care provider shall test the donor initially and, if the initial test result is negative, shall perform a 2nd test on a date that is not less than 180 days from the date of the procurement of the sperm. No person may use the donated sperm until the health care provider has obtained the results of the 2nd test. If any validated test result of the donor for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV is positive, the sperm donated for use may not be used and, if donated, shall be destroyed.</p> <p>2. A health care provider who procures, processes, distributes or uses human ova donated as specified under s. 157.06 (6) (a) or (b) shall, prior to the distribution or use and with informed consent under the requirements of par. (b), test the proposed donor for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV in order to assure medical acceptability of the gift for the purpose intended.</p> <p>(b) The health care provider, blood bank, blood center or plasma center that subjects a person to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV under pars. (a) and (am) shall, in instances under those paragraphs in which consent is required, provide the potential test subject with an informed consent form for testing or disclosure that shall contain the following information and on the form shall obtain the potential test subjects signature or may, if the potential test subject has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), instead obtain the signature of the health care agent:</p> <p>1. The name of the potential test subject who is giving consent and whose</p>

WI Chap 252 Code §	Code Language
	<p>test results may be disclosed and, if the potential test subject has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), the name of the health care agent.</p> <p>2. A statement of explanation to the potential test subject that the test results may be disclosed as specified under sub. (5) (a) and either a listing that duplicates the persons or circumstances specified under sub. (5) (a) 2. to 19. or a statement that the listing is available upon request.</p> <p>3. Spaces specifically designated for the following purposes:</p> <p>a. The signature of the potential test subject or, if the potential test subject has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), of the health care agent, providing informed consent for the testing and the date on which the consent is signed.</p> <p>b. The name of a person to whom the potential test subject or, if the potential test subject has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), the health care agent, authorizes that disclosure of test results be made, if any, the date on which the consent to disclosure is signed, and the time period during which the consent to disclosure is effective.</p> <p>(bm) The health care provider that subjects a person to a test for the presence of HIV, antigen or nonantigenic products of HIV, or an antibody to HIV under par. (a) 3. shall provide the test subject and the test subjects guardian, if the test subject is an individual found incompetent in this state, with all of the following information:</p> <p>1. A statement of explanation concerning the test that was performed, the date of performance of the test and the test results.</p> <p>2. A statement of explanation that the test results may be disclosed as specified under sub. (5) (a) and either a listing that duplicates the persons or circumstances specified under sub. (5) (a) 2. to 18. or a statement that the listing is available upon request.</p> <p>(3) WRITTEN CONSENT TO DISCLOSURE.</p> <p>A person who receives a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV under sub. (2) (b) or, if the person has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), the health care agent may authorize in writing a health care provider, blood bank, blood center or plasma center to disclose the persons test results to anyone at any time subsequent to providing informed consent for disclosure under sub. (2) (b) and a record of this consent shall be maintained by the health care provider, blood bank, blood center or plasma center so</p>

WI Chap 252 Code §	Code Language
	<p>authorized.</p> <p>(4) RECORD MAINTENANCE.</p> <p>A health care provider, blood bank, blood center or plasma center that obtains from a person a specimen of body fluids or tissues for the purpose of testing for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV shall:</p> <p>(a) Obtain from the subject informed consent for testing or disclosure, as provided under sub. (2)</p> <p>(b) Maintain a record of the consent received under par. (a)</p> <p>(c) Maintain a record of the test results obtained. A record that is made under the circumstances described in sub. (2) (a) 7m. may not reveal the identity of the test subject.</p> <p>(5) CONFIDENTIALITY OF TEST.</p> <p>(a) An individual who is the subject of a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or the individual's health care agent, if the individual has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), may disclose the results of the individual's test to anyone. A person who is neither the individual nor the individual's health care agent may not, unless he or she is specifically authorized by the individual to do so, disclose the individual's test results except to the following persons or under the following circumstances:</p> <ol style="list-style-type: none"> 1. To the subject of the test and, if the test subject has executed a power of attorney for health care instrument under ch. 155 and has been found to be incapacitated under s. 155.05 (2), the health care agent. 2. To a health care provider who provides care to the test subject, including those instances in which a health care provider provides emergency care to the subject. 3. To an agent or employee of a health care provider under subd. 2. who prepares or stores patient health care records, as defined in s. 146.81 (4), for the purposes of preparation or storage of those records; provides patient care; or handles or processes specimens of body fluids or tissues. 4. To a blood bank, blood center or plasma center that subjects a person to a test under sub. (2) (a), for any of the following purposes: <ol style="list-style-type: none"> a. Determining the medical acceptability of blood or plasma secured from the test subject. b. Notifying the test subject of the test results.

WI Chap 252 Code §	Code Language
	<p>c. Investigating HIV infections in blood or plasma.</p> <p>5. To a health care provider who procures, processes, distributes or uses a human body part donated as specified under s. 157.06 (6) (a) or (b), for the purpose of assuring medical acceptability of the gift for the purpose intended.</p> <p>6. To the state epidemiologist or his or her designee, for the purpose of providing epidemiologic surveillance or investigation or control of communicable disease.</p> <p>7. To a funeral director, as defined under s. 445.01 (5) (a) 1. or 2. or (c) or to other persons who prepare the body of a decedent for burial or other disposition or to a person who performs an autopsy or assists in performing an autopsy.</p> <p>8. To health care facility staff committees or accreditation or health care services review organizations for the purposes of conducting program monitoring and evaluation and health care services reviews.</p> <p>9. Under a lawful order of a court of record except as provided under s. 901.05</p> <p>10. To a person who conducts research, for the purpose of research, if the researcher:</p> <p>a. Is affiliated with a health care provider under subd. 3.</p> <p>b. Has obtained permission to perform the research from an institutional review board.</p> <p>c. Provides written assurance to the person disclosing the test results that use of the information requested is only for the purpose under which it is provided to the researcher, the information will not be released to a person not connected with the study, and the final research product will not reveal information that may identify the test subject unless the researcher has first received informed consent for disclosure from the test subject.</p> <p>11. To a person, including a person exempted from civil liability under the conditions specified under s. 895.48, 895.4802, or 895.4803, who renders to the victim of an emergency or accident emergency care during the course of which the emergency caregiver is significantly exposed to the emergency or accident victim, if a physician or advanced practice nurse prescriber, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the emergency caregiver has been significantly exposed and if the certification accompanies the request for disclosure.</p> <p>12. To a coroner, medical examiner or an appointed assistant to a coroner</p>

WI Chap 252 Code §	Code Language
	<p>or medical examiner, if one or more of the following conditions exist:</p> <p>a. The possible HIV-infected status is relevant to the cause of death of a person whose death is under direct investigation by the coroner, medical examiner or appointed assistant.</p> <p>b. The coroner, medical examiner, or appointed assistant is significantly exposed to a person whose death is under direct investigation by the coroner, medical examiner, or appointed assistant, if a physician or advanced practice nurse prescriber, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the coroner, medical examiner, or appointed assistant has been significantly exposed and if the certification accompanies the request for disclosure.</p> <p>13. To a sheriff, jailer or keeper of a prison, jail or house of correction or a person designated with custodial authority by the sheriff, jailer or keeper, for whom disclosure is necessitated in order to permit the assigning of a private cell to a prisoner who has a positive test result.</p> <p>14. If the test results of a test administered to an individual are positive and the individual is deceased, by the individuals attending physician or advanced practice nurse prescriber, to persons, if known to the physician or advanced practice nurse prescriber, with whom the individual has had sexual contact or has shared intravenous drug use paraphernalia.</p> <p>15. To anyone who provides consent for the testing under sub. (2) (a) 4. b., except that disclosure may be made under this subdivision only during a period in which the test subject is adjudicated incompetent in this state, is under 14 years of age, or is unable to communicate due to a medical condition.</p> <p>17. To an alleged victim or victim, to a health care professional, upon request as specified in s. 938.296 (4) (e) or (5) (e) or 968.38 (4) (c) or (5) (c), who provides care to the alleged victim or victim and, if the alleged victim or victim is a minor, to the parent or guardian of the alleged victim or victim, under s. 938.296 (4) or (5) or 968.38 (4) or (5)</p> <p>18. To an affected person, under the requirements of sub. (2) (a) 7.</p> <p>19. If the test was administered to a child who has been placed in a foster home, treatment foster home, group home, residential care center for children and youth, or juvenile correctional facility, as defined in s. 938.02 (10p), including a placement under s. 48.205, 48.21, 938.205, or 938.21, or for whom placement in a foster home, treatment foster home, group home, residential care center for children and youth, or juvenile correctional facility is recommended under s. 48.33 (4), 48.425 (1) (g), 48.837 (4) (c), or 938.33 (3) or (4), to an agency directed by a court to prepare a court report under s. 48.33 (1), 48.424 (4) (b), 48.425 (3), 48.831 (2), 48.837 (4) (c), or 938.33 (1), to an agency responsible for preparing a court report</p>

WI Chap 252 Code §	Code Language
	<p>under s. 48.365 (2g), 48.425 (1), 48.831 (2), 48.837 (4) (c), or 938.365 (2g), to an agency responsible for preparing a permanency plan under s. 48.355 (2e), 48.38, 48.43 (1) (c) or (5) (c), 48.63 (4) or (5) (c), 48.831 (4) (e), 938.355 (2e), or 938.38 regarding the child, or to an agency that placed the child or arranged for the placement of the child in any of those placements and, by any of those agencies, to any other of those agencies and, by the agency that placed the child or arranged for the placement of the child in any of those placements, to the child's foster parent or treatment foster parent or the operator of the group home, residential care center for children and youth, or juvenile correctional facility in which the child is placed, as provided in s. 48.371 or 938.371</p> <p>20. To a prisoner's health care provider, the medical staff of a prison or jail in which a prisoner is confined, the receiving institution intake staff at a prison or jail to which a prisoner is being transferred or a person designated by a jailer to maintain prisoner medical records, if the disclosure is made with respect to the prisoner's patient health care records under s. 302.388, to the medical staff of a jail to whom the results are disclosed under s. 302.388 (2) (c) or (d), to the medical staff of a jail to which a prisoner is being transferred, if the results are provided to the medical staff by the department of corrections as part of the prisoner's medical file, to a health care provider to whom the results are disclosed under s. 302.388 (2) (c) or (f) or the department of corrections if the disclosure is made with respect to a prisoner's patient health care records under s. 302.388 (4)</p> <p>(b) A private pay patient may deny access to disclosure of his or her test results granted under par. (a) 10. if he or she annually submits to the maintainer of his or her test results under sub. (4) (c) a signed, written request that denial be made.</p> <p>(5m) AUTOPSIES; TESTING OF CERTAIN CORPSES.</p> <p>Notwithstanding s. 157.05, a corpse may be subjected to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV and the test results disclosed to the person who has been significantly exposed under any of the following conditions:</p> <p>(a) If a person, including a person exempted from civil liability under the conditions specified under s. 895.48, 895.4802, or 895.4803, who renders to the victim of an emergency or accident emergency care during the course of which the emergency caregiver is significantly exposed to the emergency or accident victim and the emergency or accident victim subsequently dies prior to testing for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV; if a physician or advanced practice nurse prescriber, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the emergency caregiver has been significantly exposed and if the certification accompanies the request for testing and disclosure. Testing of a corpse under this paragraph shall be ordered by the coroner, medical examiner or physician who certifies the victim's cause of death under s.</p>

WI Chap 252 Code §	Code Language
	<p>69.18 (2) (b), (c) or (d)</p> <p>(b) If a funeral director, coroner, medical examiner, or appointed assistant to a coroner or medical examiner who prepares the corpse of a decedent for burial or other disposition or a person who performs an autopsy or assists in performing an autopsy is significantly exposed to the corpse; if a physician or advanced practice nurse prescriber, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the funeral director, coroner, medical examiner, or appointed assistant has been significantly exposed; and if the certification accompanies the request for testing and disclosure. Testing of a corpse under this paragraph shall be ordered by the attending physician or advanced practice nurse prescriber of the funeral director, coroner, medical examiner, or appointed assistant who is so exposed.</p> <p>(c) If a health care provider or an agent or employee of a health care provider is significantly exposed to the corpse or to a patient who dies subsequent to the exposure and prior to testing for the presence of HIV, antigen or nonantigenic products of HIV, or an antibody to HIV; if a physician or advanced practice nurse prescriber who is not the health care provider, based on information provided to the physician or advanced practice nurse prescriber, determines and certifies in writing that the health care provider, agent or employee has been significantly exposed; and if the certification accompanies the request for testing and disclosure. Testing of a corpse under this paragraph shall be ordered by the physician or advanced practice nurse prescriber who certifies that the significant exposure has occurred.</p> <p>(5r) SALE OF TESTS WITHOUT APPROVAL PROHIBITED.</p> <p>No person may sell or offer to sell in this state a test or test kit to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV for self-use by an individual unless the test or test kit is first approved by the state epidemiologist. In reviewing a test or test kit under this subsection, the state epidemiologist shall consider and weigh the benefits, if any, to the public health of the test or test kit against the risks, if any, to the public health of the test or test kit.</p> <p>(6) EXPANDED DISCLOSURE OF TEST RESULTS PROHIBITED.</p> <p>No person to whom the results of a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV have been disclosed under sub. (5) (a) or (5m) may disclose the test results except as authorized under sub. (5) (a) or (5m)</p> <p>(7) REPORTING OF POSITIVE TEST RESULTS.</p> <p>(a) Notwithstanding ss. 227.01 (13) and 227.10 (1), for the purposes of this subsection, the state epidemiologist shall determine, based on the</p>

WI Chap 252 Code §	Code Language
	<p>preponderance of available scientific evidence, the procedures necessary in this state to obtain a validated test result and the secretary shall so declare under s. 250.04 (1) or (2) (a) The state epidemiologist shall revise this determination if, in his or her opinion, changed available scientific evidence warrants a revision, and the secretary shall declare the revision under s. 250.04 (1) or (2) (a)</p> <p>(b) If a positive, validated test result is obtained from a test subject, the health care provider, blood bank, blood center or plasma center that maintains a record of the test results under sub. (4) (c) shall report to the state epidemiologist the following information:</p> <ol style="list-style-type: none"> 1. The name and address of the health care provider, blood bank, blood center or plasma center reporting. 2. The name and address of the subjects health care provider, if known. 3. The name, address, telephone number, age or date of birth, race and ethnicity, sex and county of residence of the test subject, if known. 4. The date on which the test was performed. 5. The test result. 6. Any other medical or epidemiological information required by the state epidemiologist for the purpose of exercising surveillance, control and prevention of HIV infections. <p>(c) Except as provided in sub. (7m), a report made under par. (b) may not include any of the following:</p> <ol style="list-style-type: none"> 1. Information with respect to the sexual orientation of the test subject. 2. The identity of persons with whom the test subject may have had sexual contact. <p>(d) This subsection does not apply to the reporting of information under s. 252.05 with respect to persons for whom a diagnosis of acquired immunodeficiency syndrome has been made.</p> <p>(7m) REPORTING OF PERSONS SIGNIFICANTLY EXPOSED.</p> <p>If a positive, validated test result is obtained from a test subject, the test subjects physician or advanced practice nurse prescriber who maintains a record of the test result under sub. (4) (c) may report to the state epidemiologist the name of any person known to the physician or advanced practice nurse prescriber to have been significantly exposed to the test subject, only after the physician or advanced practice nurse prescriber has done all of the following:</p>

WI Chap 252 Code §	Code Language
	<p>(a) Counseled the test subject to inform any person who has been significantly exposed to the test subject.</p> <p>(b) Notified the test subject that the name of any person known to the physician or advanced practice nurse prescriber to have been significantly exposed to the test subject will be reported to the state epidemiologist.</p> <p>(8) CIVIL LIABILITY.</p> <p>(a) Any person violating sub. (2), (5) (a), (5m), (6) or (7) (c) is liable to the subject of the test for actual damages, costs and reasonable actual attorney fees, plus exemplary damages of up to 1,000 for a negligent violation and up to 25,000 for an intentional violation.</p> <p>(b) The plaintiff in an action under par. (a) has the burden of proving by a preponderance of the evidence that a violation occurred under sub. (2), (5) (a), (5m), (6) or (7) (c) A conviction under sub. (2), (5) (a), (5m), (6) or (7) (c) is not a condition precedent to bringing an action under par. (a)</p> <p>(9) PENALTIES.</p> <p>Whoever intentionally discloses the results of a blood test in violation of sub. (2) (a) 7m., (5) (a) or (5m) and thereby causes bodily harm or psychological harm to the subject of the test may be fined not more than 25,000 or imprisoned not more than 9 months or both. Whoever negligently discloses the results of a blood test in violation of sub. (2) (a) 7m., (5) (a) or (5m) is subject to a forfeiture of not more than 1,000 for each violation. Whoever intentionally discloses the results of a blood test in violation of sub. (2) (a) 7m., (5) (a) or (5m), knowing that the information is confidential, and discloses the information for pecuniary gain may be fined not more than 100,000 or imprisoned not more than 3 years and 6 months, or both.</p> <p>(10) DISCIPLINE OF EMPLOYEES.</p> <p>Any employee of the state or a political subdivision of the state who violates this section may be discharged or suspended without pay.</p>

Chapter 631: Insurance Contracts Generally

WI Chap 631 Code §	Code Language
§ 631.90	<p>Restrictions on use of tests for HIV.</p> <p>(1) In this section, "HIV" means any strain of human immunodeficiency virus, which causes acquired immunodeficiency syndrome.</p> <p>(2) With regard to policies issued or renewed on and after July 20, 1985, an insurer may not do any of the following:</p> <p>(a) Require or request directly or indirectly any individual to reveal whether the individual has obtained a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or what the results of this test, if obtained by the individual, were.</p> <p>(b) Condition the provision of insurance coverage on whether an individual has obtained a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or what the results of this test, if obtained by the individual, were.</p> <p>(c) Consider in the determination of rates or any other aspect of insurance coverage provided to an individual whether an individual has obtained a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV or what the results of this test, if obtained by the individual, were.</p> <p>(3)</p> <p>(a) Subsection (2) does not apply with regard to any test or series of tests for use in the underwriting of individual life, accident and health insurance policies that the person designated by the secretary of health and family services as the state epidemiologist finds medically significant and sufficiently reliable for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV and that the commissioner finds and designates by rule as sufficiently reliable for use in the underwriting of individual life, accident and health insurance policies.</p> <p>(b) Paragraph (a) does not authorize the use of any test or series of tests for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV to discriminate in violation of s. 628.34 (3)</p>

Chapter 901: Evidence – General Provisions

WI Chap 901 Code §	Code Language
§ 901.05	<p>Admissibility of certain test results.</p> <p>(1) In this section, "HIV" means any strain of human immunodeficiency virus, which causes acquired immunodeficiency syndrome.</p> <p>(2) Except as provided in sub. (3), the results of a test or tests for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV are not admissible during the course of a civil or criminal action or proceeding or an administrative proceeding, as evidence of a persons character or a trait of his or her character for the purpose of proving that he or she acted in conformity with that character on a particular occasion unless the evidence is admissible under s. 904.04 (1) or 904.05 (2) and unless the following procedures are used:</p> <p>(a) The court may determine the admissibility of evidence under this section only upon a pretrial motion.</p> <p>(b) Evidence which is admissible under this section must be determined by the court upon pretrial motion to be material to a fact at issue in the case and of sufficient probative value to outweigh its inflammatory and prejudicial nature before it may be introduced at trial.</p> <p>(3) The results of a test or tests under s. 938.296 (4) or (5) or 968.38 (4) or (5) and the fact that a person has been ordered to submit to such a test or tests under s. 938.296 (4) or (5) or 968.38 (4) or (5) are not admissible during the course of a civil or criminal action or proceeding or an administrative proceeding.</p>

Chapter 938: Juvenile Justice Code

WI Chap 938 Code §	Code Language
§ 938.296	<p>Testing for HIV infection and certain diseases.</p> <p>(1) DEFINITIONS.</p> <p>In this section:</p> <p>(a) "Health care professional" has the meaning given in s. 252.15 (1) (am)</p> <p>(b) "HIV" has the meaning given in s. 252.01 (1m)</p> <p>(c) "Sexually transmitted disease" has the meaning given in s. 252.11 (1)</p> <p>(d) "Significantly exposed" has the meaning given in s. 252.15 (1) (em)</p> <p>(e) "Victim" has the meaning given in s. 938.02 (20m) (a) 1.</p> <p>(2) SEXUALLY TRANSMITTED DISEASE TESTING.</p> <p>In a proceeding under s. 938.12 or 938.13 (12) in which the juvenile is alleged to have violated s. 940.225, 948.02, 948.025, 948.05, 948.06, or 948.085 (2), the district attorney or corporation counsel shall apply to the court for an order requiring the juvenile to submit to a test or a series of tests administered by a health care professional to detect the presence of HIV, antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease and to disclose the results of that test or series of tests as specified in sub. (4) (a) to (e), if all of the following apply:</p> <p>(a) The victim or alleged victim, if an adult, or the parent, guardian or legal custodian of the victim or alleged victim, if the victim or alleged victim is a child, requests the district attorney or corporation counsel to apply for that order.</p> <p>(b) The district attorney or corporation counsel has probable cause to believe that the juvenile has significantly exposed the victim or alleged victim. If the juvenile is adjudicated delinquent, is found to be in need of protection or services or is found not responsible by reason of mental disease or defect under s. 938.30 (5), this paragraph does not apply.</p> <p>(2m) COMMUNICABLE DISEASE TESTING.</p> <p>In a proceeding under s. 938.12 or 938.13 (12) in which the juvenile is alleged to have violated s. 946.43 (2m), the district attorney or corporation counsel shall apply to the court for an order requiring the juvenile to submit to a test or a series of tests administered by a health care professional to detect the presence of communicable diseases and to disclose the results of the test or tests as specified in sub. (5) (a) to (e), if</p>

WI Chap 938 Code §	Code Language
	<p>all of the following apply:</p> <p>(a) The victim or alleged victim, if an adult, or the parent, guardian or legal custodian of the victim or alleged victim, if the victim or alleged victim is a child, requests the district attorney or corporation counsel to apply for the order.</p> <p>(b) The district attorney or corporation counsel has probable cause to believe that the act or alleged act of the juvenile that constitutes a violation of s. 946.43 (2m) carried a potential for transmitting a communicable disease to the victim or alleged victim and involved the juveniles blood, semen, vomit, saliva, urine, feces, or other bodily substance.</p> <p>(3) WHEN ORDER MAY BE SOUGHT.</p> <p>The district attorney or corporation counsel may apply for an order under sub. (2) or (2m) at any of the following times:</p> <p>(a) At or after the plea hearing and before a dispositional order is entered.</p> <p>(b) At any time after the juvenile is adjudicated delinquent or found to be in need of protection or services.</p> <p>(c) At any time after the juvenile is found not responsible by reason of mental disease or defect under s. 938.30 (5)</p> <p>(d) If the court has determined that the juvenile is not competent to proceed under s. 938.30 (5) and has suspended proceedings on the petition, at any time after the determination that the juvenile is not competent to proceed.</p> <p>(4) DISCLOSURE OF SEXUALLY TRANSMITTED DISEASE TEST RESULTS.</p> <p>On receipt of an application for an order under sub. (2), the court shall set a time for a hearing on the application. If the juvenile has been found not competent to proceed under s. 938.30 (5), the court may hold a hearing under this subsection only if the court first determines that the probable cause finding can be fairly made without the personal participation of the juvenile. If, after hearing, the court finds probable cause to believe that the juvenile has significantly exposed the victim or alleged victim, the court shall order the juvenile to submit to a test or a series of tests administered by a health care professional to detect the presence of HIV, antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease. The court shall require the health care professional who performs the test or series of tests to refrain, notwithstanding s. 252.15 (4) (c), from making the test results part of the juveniles permanent medical record and to disclose the results of the test to any of the following:</p>

WI Chap 938 Code §	Code Language
	<p>(a) The parent, guardian or legal custodian of the juvenile.</p> <p>(b) The victim or alleged victim, if the victim or alleged victim is an adult.</p> <p>(c) The parent, guardian or legal custodian of the victim or alleged victim, if the victim or alleged victim is a child.</p> <p>(d) The health care professional that provides care for the juvenile, upon request by the parent, guardian or legal custodian of the juvenile.</p> <p>(e) The health care professional that provides care for the victim or alleged victim, upon request by the victim or alleged victim or, if the victim or alleged victim is a child, upon request by the parent, guardian or legal custodian of the victim or alleged victim.</p> <p>(5) DISCLOSURE OF COMMUNICABLE DISEASE TEST RESULTS.</p> <p>On receipt of an application for an order under sub. (2m), the court shall set a time for a hearing on the application. If the juvenile has been found not competent to proceed under s. 938.30 (5), the court may hold a hearing under this subsection only if the court first determines that the probable cause finding can be fairly made without the personal participation of the juvenile. If, after hearing, the court finds probable cause to believe that the act or alleged act of the juvenile that constitutes a violation of s. 946.43 (2m) carried a potential for transmitting a communicable disease to the victim or alleged victim and involved the juveniles blood, semen, vomit, saliva, urine or feces or other bodily substance of the juvenile, the court shall order the juvenile to submit to a test or a series of tests administered by a health care professional to detect the presence of any communicable disease that was potentially transmitted by the act or alleged act of the juvenile. The court shall require the health care professional who performs the test or series of tests to refrain, notwithstanding s. 252.15 (4) (c), if applicable, from making the test results part of the juveniles permanent medical record and to disclose the results of the test to any of the following:</p> <p>(a) The parent, guardian or legal custodian of the juvenile.</p> <p>(b) The victim or alleged victim, if the victim or alleged victim is an adult.</p> <p>(c) The parent, guardian or legal custodian of the victim or alleged victim, if the victim or alleged victim is a child.</p> <p>(d) The health care professional that provides care for the juvenile, upon request by the parent, guardian or legal custodian of the juvenile.</p> <p>(e) The health care professional that provides care for the victim or alleged victim, upon request by the victim or alleged victim or, if the victim or alleged victim is a child, upon request by the parent, guardian or</p>

WI Chap 938 Code §	Code Language
	<p>legal custodian of the victim or alleged victim.</p> <p>(6) PAYMENT FOR TEST COSTS.</p> <p>The court may order the county to pay for the cost of a test or series of tests ordered under sub. (4) or (5) This subsection does not prevent recovery of reasonable contribution toward the cost of that test or series of tests from the parent or guardian of the juvenile as the court may order based on the ability of the parent or guardian to pay. This subsection is subject to s. 301.03 (18)</p>
§ 938.346	<p>Notice to victims of juveniles' acts.</p> <p>(1) INFORMATION TO VICTIMS.</p> <p>Each known victim of a juveniles act shall receive timely notice of the following information:</p> <p>(a) The procedures under s. 938.396 (1) (c) 5. and 6. for obtaining the identity of the juvenile and the juveniles parents.</p> <p>(b) The procedure under s. 938.396 (1) (c) 5. for obtaining the juveniles police records.</p> <p>(c) The potential liability of the juveniles parents under s. 895.035</p> <p>(d) Either of the following:</p> <ol style="list-style-type: none"> 1. Information regarding any decision to close a case under s. 938.24 (5m), any deferred prosecution agreement under s. 938.245, any decision not to file a petition under s. 938.25 (2m), any consent decree under s. 938.32 or any dispositional order under ss. 938.34 to 938.345 The information may not include reports under s. 938.295 or 938.33 or any other information that deals with sensitive personal matters of the juvenile and the juveniles family and that does not directly relate to the act or alleged act committed against the victim. This subdivision does not affect the right of a victim to attend any hearing that the victim is permitted to attend under s. 938.299 (1) (am) 2. The procedure for obtaining the information in subd. 1. <p>(e) The procedure under s. 938.296 under which the victim, if an adult, or the parent, guardian or legal custodian of the victim, if the victim is a child, may request an order requiring a juvenile who is alleged to have violated s. 940.225, 948.02, 948.025, 948.05, 948.06, or 948.085 (2) to submit to a test or a series of tests to detect the presence of HIV, as defined in s. 252.01 (1m), antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease, as defined in s. 252.11 (1), and to have the results of that test or series of tests disclosed as provided in s. 938.296 (4) (a) to (e)</p>

WI Chap 938 Code §	Code Language
	<p>(ec) The procedure under s. 938.296 under which the victim, if an adult, or the parent, guardian or legal custodian of the victim, if the victim is a child, may request an order requiring a juvenile who is alleged to have violated s. 946.43 (2m) to submit to a test or a series of tests to detect the presence of communicable diseases and to have the results of that test or series of tests disclosed as provided in s. 938.296 (5) (a) to (e)</p> <p>(em) The right to confer, if requested, with an intake worker regarding deferred prosecution agreements under s. 938.245 (1m) or with a district attorney or corporation counsel under s. 938.265 regarding the possible outcomes of the proceedings and under s. 938.32 (1) (am) regarding consent decrees.</p> <p>(f) The right to request and receive notice of the time and place of any hearing that the victim may attend under s. 938.299 (1) (am)</p> <p>(fm) All of the following:</p> <ol style="list-style-type: none"> 1. The right to a separate waiting area as provided under s. 938.2965 2. The right to have his or her interest considered concerning continuances in the case under s. 938.315 (2) 3. The right to have victim impact information included in a court report under s. 938.33 and to have the person preparing the court report attempt to contact the victim, as provided under s. 938.331 4. The right to employer intercession services under s. 950.04 (1v) (bm) <p>(g) The right to make a statement to the court as provided in ss. 938.32 (1) (b) and 938.335 (3m)</p> <p>(h) All of the following:</p> <ol style="list-style-type: none"> 1. The right to be accompanied by a service representative, as provided under s. 895.45 2. The right to restitution, as provided under ss. 938.245, 938.32 (1t) and 938.34 (5) 3. The right to compensation, as provided under ch. 949 4. The right to a speedy disposition of the case under s. 950.04 (1v) (k) 5. The right to have personal property returned, as provided under s. 950.04 (1v) (s) 6. The right to complain to the department of justice concerning the treatment of crime victims, as provided under s. 950.08 (3), and to

WI Chap 938 Code §	Code Language
	<p>request review by the crime victims rights board of the complaint, as provided under s. 950.09 (2)</p> <p>(1m) DUTIES OF INTAKE WORKERS AND DISTRICT ATTORNEYS.</p> <p>The intake worker shall make a reasonable attempt to provide notice of the information under sub. (1) (a), (b), (c), and (h), the information under sub. (1) (d) relating to a deferred prosecution agreement under s. 938.245, the information under sub. (1) (em) relating to the right to confer, if requested, on deferred prosecution agreements and the information under sub. (3) if the juveniles case is closed. The district attorney or corporation counsel shall make a reasonable attempt to provide notice of the information under sub. (1) (e), (ec), (f), (fm), and (g), the information under sub. (1) (d) relating to a consent decree under s. 938.32 or a dispositional order under ss. 938.34 to 938.345, the information under sub. (1) (em) relating to the right to request an opportunity to confer, if requested, on amendment of petitions, consent decrees and disposition recommendations and the information under sub. (3) if he or she decides not to file a petition or the proceeding is terminated without a consent decree or dispositional order after the filing of a petition.</p> <p>(2) RESTRICTIONS ON DISCLOSURE OF INFORMATION.</p> <p>The notice under sub. (1) shall include an explanation of the restrictions on disclosing information obtained under this chapter and the penalties for violating the restrictions.</p> <p>(3) CLOSED CASES.</p> <p>If an inquiry is closed by an intake worker or otherwise does not result in a deferred prosecution agreement, the intake worker shall make a reasonable attempt to inform each known victim of the juveniles alleged act as provided in s. 938.24 (5m) If a district attorney or corporation counsel decides not to file a petition or if, after a petition is filed, a proceeding is dismissed or otherwise does not result in a consent decree or dispositional order, a district attorney or corporation counsel shall make a reasonable attempt to inform each known victim of the juveniles alleged act as provided in s. 938.25 (2m) or 938.312, whichever is applicable.</p> <p>(4) CHILD VICTIMS.</p> <p>If the victim, as defined in s. 938.02 (20m) (a) 1., is a child, the notice under this section shall be given to the childs parents, guardian or legal custodian.</p> <p>(5) COURT POLICIES AND RULES.</p> <p>Chief judges and circuit judges shall establish by policy and rule</p>

WI Chap 938 Code §	Code Language
	<p>procedures for the implementation of this section. Subject to subs. (1m) and (3), the policies and rules shall specify when, how and by whom the notice under this section shall be provided to victims and with whom victims may confer regarding deferred prosecution agreements, amendment of petitions, consent decrees and disposition recommendations.</p>
§ 938.371	<p>Access to certain information by substitute care provider.</p> <p>(1) MEDICAL INFORMATION.</p> <p>If a juvenile is placed in a foster home, treatment foster home, group home, residential care center for children and youth, or juvenile correctional facility or in the home of a relative other than a parent, including a placement under s. 938.205 or 938.21, the agency, as defined in s. 938.38 (1) (a), that placed the juvenile or arranged for the placement of the juvenile shall provide the following information to the foster parent, treatment foster parent, relative, or operator of the group home, residential care center for children and youth, or juvenile correctional facility at the time of placement or, if the information has not been provided to the agency by that time, as soon as possible after the date on which the agency receives that information, but not more than 2 working days after that date:</p> <p>(a) Results of a test or a series of tests of the juvenile to determine the presence of HIV, as defined in s. 968.38 (1) (b), antigen or nonantigenic products of HIV, or an antibody to HIV, under s. 252.15 (5) (a) 19., including results included in a court report or permanency plan. At the time that the test results are provided, the agency shall notify the foster parent, treatment foster parent, relative, or operator of the group home, residential care center for children and youth, or juvenile correctional facility of the confidentiality requirements under s. 252.15 (6)</p> <p>(b) Results of any tests of the juvenile to determine the presence of viral hepatitis, type B, including results included in a court report or permanency plan. [juvenile]</p> <p>(c) Any other medical information concerning the juvenile that is necessary for the care of the juvenile. [juvenile]</p> <p>(3) OTHER INFORMATION.</p> <p>At the time of placement of a juvenile in a foster home, treatment foster home, group home, residential care center for children and youth, or juvenile correctional facility or in the home of a relative other than a parent or, if the information is not available at that time, as soon as possible after the date on which the court report or permanency plan has been submitted, but no later than 7 days after that date, the agency, as defined in s. 938.38 (1) (a), responsible for preparing the juveniles permanency plan shall provide to the foster parent, treatment foster</p>

WI Chap 938 Code §	Code Language
	<p>parent, relative, or operator of the group home, residential care center for children and youth, or juvenile correctional facility information contained in the court report submitted under s. 938.33 (1) or 938.365 (2g) or permanency plan submitted under s. 938.355 (2e) or 938.38 relating to findings or opinions of the court or agency that prepared the court report or permanency plan relating to any of the following:</p> <p>(a) Any mental, emotional, cognitive, developmental, or behavioral disability of the juvenile. [juvenile]</p> <p>(b) Any involvement of the juvenile in any criminal gang, as defined in s. 939.22 (9), or in any other group in which any child was traumatized as a result of his or her association with that group. [juvenile]</p> <p>(c) Any involvement of the juvenile in any activities that are harmful to the juveniles physical, mental, or moral well-being. [juvenile]</p> <p>(d) Any involvement of the juvenile, whether as victim or perpetrator, in sexual intercourse or sexual contact in violation of s. 940.225, 948.02, 948.025, or 948.085, prostitution in violation of s. 944.30, sexual exploitation of a child in violation of s. 948.05, or causing a child to view or listen to sexual activity in violation of s. 948.055, if the information is necessary for the care of the juvenile or for the protection of any person living in the foster home, treatment foster home, group home, residential care center for children and youth, or juvenile correctional facility. [juvenile]</p> <p>(e) The religious affiliation or beliefs of the juvenile.</p> <p>(4) Subsection (1) does not preclude an agency, as defined in s. 48.38 (1) (a), that is arranging for the placement of a juvenile from providing the information specified in sub. (1) (a) to (c) to a person specified in sub. (1) (intro.) before the time of placement of the juvenile. Subsection (3) does not preclude an agency, as defined in s. 48.38 (1) (a), responsible for preparing a juveniles court report or permanency plan from providing the information specified in sub. (3) (a) to (e) to a person specified in sub. (3) (intro.) before the time of placement of the juvenile.</p> <p>(5) Except as permitted under s. 252.15 (6), a foster parent, treatment foster parent, relative, or operator of a group home, residential care center for children and youth, or secured correctional facility that receives any information under sub. (1) or (3), other than the information described in sub. (3) (e), shall keep the information confidential and may disclose that information only for the purposes of providing care for the juvenile or participating in a court hearing or permanency plan review concerning the juvenile.</p>

Chapter 968: Commencement of Criminal Proceedings
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WI Chap 968 Code §	Code Language
§ 968.38	<p>Testing for HIV infection and certain diseases.</p> <p>(1) In this section:</p> <p>(a) "Health care professional" means a physician or a registered nurse or licensed practical nurse who is licensed under ch. 441</p> <p>(b) "HIV" means any strain of human immunodeficiency virus, which causes acquired immunodeficiency syndrome.</p> <p>(bm) "Physician" has the meaning given in s. 448.01 (5)</p> <p>(c) "Sexually transmitted disease" has the meaning given in s. 252.11 (1)</p> <p>(d) "Significantly exposed" has the meaning given in s. 252.15 (1) (em)</p> <p>(2) In a criminal action under s. 940.225, 948.02, 948.025, 948.05, 948.06, 948.085, or 948.095, if all of the following apply, the district attorney shall apply to the circuit court for his or her county to order the defendant to submit to a test or a series of tests administered by a health care professional to detect the presence of HIV, antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease and to disclose the results of the test or tests as specified in sub. (4) (a) to (c):</p> <p>(a) The district attorney has probable cause to believe that the defendant has significantly exposed the alleged victim or victim. If the defendant is convicted or found not guilty by reason of mental disease or defect, this paragraph does not apply.</p> <p>(b) The alleged victim or victim who is not a minor or the parent or guardian of the alleged victim or victim who is a minor requests the district attorney to so apply for an order.</p> <p>(2m) In a criminal action under s. 946.43 (2m), the district attorney shall apply to the circuit court for his or her county for an order requiring the defendant to submit to a test or a series of tests administered by a health care professional to detect the presence of communicable diseases and to disclose the results of the test or tests as specified in sub. (5) (a) to (c), if all of the following apply:</p> <p>(a) The district attorney has probable cause to believe that the act or alleged act of the defendant that constitutes a violation of s. 946.43 (2m) carried a potential for transmitting a communicable disease to the victim or alleged victim and involved the defendants blood, semen, vomit, saliva, urine or feces or other bodily substance of the defendant.</p> <p>(b) The alleged victim or victim who is not a minor or the parent or</p>

WI Chap 968 Code §	Code Language
	<p>guardian of the alleged victim or victim who is a minor requests the district attorney to apply for an order.</p> <p>(3) The district attorney may apply under sub. (2) or (2m) for an order at any of the following times, and, within those times, shall do so as soon as possible so as to enable the court to provide timely notice:</p> <p>(a) At or after the initial appearance and prior to the preliminary examination.</p> <p>(b) If the defendant waives the preliminary examination, at any time after the court binds the defendant over for trial and before a verdict is rendered.</p> <p>(c) At any time after the defendant is convicted or is found not guilty by reason of mental disease or defect.</p> <p>(d) If the court has determined that the defendant is not competent to proceed under s. 971.14 (4) and suspended the criminal proceedings, at any time after the determination that the defendant is not competent to proceed.</p> <p>(4) The court shall set a time for a hearing on the matter under sub. (2) during the preliminary examination, if sub. (3) (a) applies; after the defendant is bound over for trial and before a verdict is rendered, if sub. (3) (b) applies; after conviction or a finding of not guilty by reason of mental disease or defect, if sub. (3) (c) applies; or, subject to s. 971.13 (4), after the determination that the defendant is not competent, if sub. (3) (d) applies. The court shall give the district attorney and the defendant notice of the hearing at least 72 hours prior to the hearing. The defendant may have counsel at the hearing, and counsel may examine and cross-examine witnesses. If the court finds probable cause to believe that the defendant has significantly exposed the victim or alleged victim, the court shall order the defendant to submit to a test or a series of tests administered by a health care professional to detect the presence of HIV, antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease. The court shall require the health care professional who performs the test to disclose the test results to the defendant. The court shall require the health care professional who performs the test to refrain, notwithstanding s. 252.15 (4) (c), from making the test results part of the defendants permanent medical record and to disclose the results of the test to any of the following:</p> <p>(a) The alleged victim or victim, if the alleged victim or victim is not a minor.</p> <p>(b) The parent or guardian of the alleged victim or victim, if the alleged victim or victim is a minor.</p> <p>(c) The health care professional who provides care to the alleged victim or</p>

WI Chap 968 Code §	Code Language
	<p>victim, upon request by the alleged victim or victim or, if the alleged victim or victim is a minor, by the parent or guardian of the alleged victim or victim.</p> <p>(5) The court shall set a time for a hearing on the matter under sub. (2m) during the preliminary examination, if sub. (3) (a) applies; after the defendant is bound over for trial and before a verdict is rendered, if sub. (3) (b) applies; after conviction or a finding of not guilty by reason of mental disease or defect, if sub. (3) (c) applies; or, subject to s. 971.13 (4), after the determination that the defendant is not competent, if sub. (3) (d) applies. The court shall give the district attorney and the defendant notice of the hearing at least 72 hours prior to the hearing. The defendant may have counsel at the hearing, and counsel may examine and cross-examine witnesses. If the court finds probable cause to believe that the act or alleged act of the defendant that constitutes a violation of s. 946.43 (2m) carried a potential for transmitting a communicable disease to the victim or alleged victim and involved the defendants blood, semen, vomit, saliva, urine or feces or other bodily substance of the defendant, the court shall order the defendant to submit to a test or a series of tests administered by a health care professional to detect the presence of any communicable disease that was potentially transmitted by the act or alleged act of the defendant. The court shall require the health care professional who performs the test to disclose the test results to the defendant. The court shall require the health care professional who performs the test to refrain, notwithstanding s. 252.15 (4) (c), if applicable, from making the test results part of the defendants permanent medical record and to disclose the results of the test to any of the following:</p> <p>(a) The alleged victim or victim, if the alleged victim or victim is not a minor.</p> <p>(b) The parent or guardian of the alleged victim or victim, if the alleged victim or victim is a minor.</p> <p>(c) The health care professional who provides care to the alleged victim or victim, upon request by the alleged victim or victim or, if the alleged victim or victim is a minor, by the parent or guardian of the alleged victim or victim.</p>

Wisconsin Administrative Code – Chapter HFS: Health and Family Services
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Chapter HFS WAC	Code Language
HFS 52.12	<p>Residential Care Centers for Children and Youth - Personnel.</p> <p>(5) STAFF TRAINING.</p> <p>(a) Approved by department. At the time of initial licensure and every 2 years thereafter, a center, prior to implementing training required under this subsection, shall submit to the department, for approval, a description of the process and content of orientation and initial training, including the number of training hours for all new staff who work with residents and a plan for establishing and meeting ongoing training needs for all staff who work with residents.</p> <p>(b) Orientation. Before a new staff member is permitted to work independently with residents, the center shall provide orientation training for the new staff member covering at least all of the following areas:</p> <p>12. Sanitation and hygiene practices including the nature, causes, transmission and prevention of hepatitis B, human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) and the legal, social and psychological aspects of those conditions.</p>
HFS 52.41	<p>Residential Care Centers for Youth and Children – Center Program</p> <p>(1) PROGRAM STATEMENT AND OPERATING PLAN. Each center shall have a written program statement describing center treatment purpose, philosophy, approach and methods used and services available, and a written operating plan describing available treatment and services as specified under pars. (a) to (c). A center shall give a copy of the current center program statement and, upon request, the center operating plan, and all updates, to each resident's placing person or agency and, if not the same, the resident's parents or guardian and legal custodian, if any. A center's operating plan shall describe all of the following:</p> <p>(c) Health care services. Health care services provided to residents that include needed preventive, routine and emergency medical and dental care through all of the following:</p> <p>2. Education of residents by someone medically knowledgeable about the hazards of tobacco use, drugs and alcohol abuse and, where appropriate, about human sexuality, family planning materials and services, sexually transmitted diseases and how the human immunodeficiency virus (HIV) is transmitted.</p>
HFS 75.03	<p>General requirements.</p> <p>(1) APPLICABILITY. This section establishes general requirements that apply to the 13 types of community substance abuse services under ss. HFS 75.04 to 75.16. Not all general requirements apply to all services. Table HFS 75.03 indicates the general requirement subsections that apply</p>

Chapter HFS WAC	Code Language
	<p>to specific services.</p> <p>(11)(f) Information and referral relating to communicable diseases. The service shall provide patients with information concerning communicable diseases, such as sexually transmitted diseases (STDs), hepatitis B, tuberculosis (TB), and human immunodeficiency virus (HIV), and shall refer patients with communicable disease for treatment when appropriate.</p> <p>(21) COMMUNICABLE DISEASE SCREENING. Service staff shall discuss risk factors for communicable diseases with each patient upon admission and at least annually while the patient continues in the service and shall include in the discussion the patient's prior behaviors that could lead to sexually transmitted diseases (STDs), human immunodeficiency virus (HIV), hepatitis B and C or tuberculosis (TB).</p>
HFS 131.32	<p>Hospices - Administration</p> <p>(3) UNIVERSAL PRECAUTIONS. Hospices shall:</p> <p>(a) Develop and implement initial orientation and ongoing education and training for all hospice workers, including students, trainees and volunteers, in the epidemiology, modes of transmission and prevention of human immunodeficiency virus (HIV) and other blood-borne infections and the need for routine use of universal blood and body-fluid precautions for all patients;</p>
HFS 145.04	<p>Reports of communicable diseases.</p> <p>(1) RESPONSIBILITY FOR REPORTING.</p> <p>(a) Any person licensed under ch. 441 or 448, Stats., knowing of or in attendance on a case or suspected case shall notify the local health officer or, if required under Appendix A of this chapter, the state epidemiologist, in the manner prescribed in this section.</p> <p>(b) Each laboratory shall report the identification or suspected identification of a disease-causing organism or laboratory findings indicating the presence of a communicable disease to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist.</p> <p>(c) Each health care facility shall ensure that reports are made to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist, in the manner specified in sub. (3). When a case is identified or suspected in a health care facility having an organized program of infection control, the person in charge of the infection control program shall ensure that the case or suspected case is reported to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist, minimizing unnecessary duplication.</p>

Chapter HFS WAC	Code Language
	<p>(d) Any teacher, principal or nurse serving a school or day care center knowing of a case or suspected case in the school or center shall notify the local health officer or, if required under Appendix A of this chapter, the state epidemiologist, in the manner prescribed in this section.</p> <p>(e) Any person who knows or suspects that a person has a communicable disease shall report the facts to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist.</p> <p>(g) Nothing in this subsection lessens the requirement for confidentiality of HIV test results under s. 252.15, Stats.</p> <p>(2) CONTENT OF REPORT.</p> <p>(a) Each report under sub. (1) (a) to (d) of a case or suspected case of a communicable disease to the local health officer or the state epidemiologist shall include the name and address of the person reporting and of the attending physician, if any, the diagnosed or suspected disease, the name of the ill or affected individual, that individual's address and telephone number, age or date of birth, race and ethnicity, sex, county of residence, date of onset of the disease, name of parent or guardian if a minor, and other facts the department or local health officer requires for the purposes of surveillance, control and prevention of communicable disease.</p> <p>(b) Reports may be written or verbal. Written reports shall be on the individual case report form provided by the department and distributed by the local health officer or on a form containing the information required under par. (a). Reports shall be submitted to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist.</p> <p>(c) Reports by laboratories of the identification or suspected identification of a disease-causing organism or laboratory findings indicating the presence of a communicable disease shall be made to the local health officer or, if required under Appendix A of this chapter, to the state epidemiologist. These reports shall include the name of the individual affected or ill, the individual's address, telephone number, county of residence, age or date of birth, the name of the attending physician and the identity or suspected identity of the organism or the laboratory findings.</p> <p>(d) All information provided under this subsection shall remain confidential except as may be needed for the purposes of investigation, control and prevention of communicable diseases.</p> <p>(3) URGENCY OF REPORTS.</p> <p>(a) A person, laboratory or health care facility required to report under</p>

Chapter HFS WAC	Code Language
	<p>sub. (1) shall report communicable diseases of urgent public health importance as listed in category I of Appendix A of this chapter to the local health officer immediately upon identification of a case or suspected case. If the local health officer is unavailable, the report shall be made immediately to the state epidemiologist.</p> <p>(b) A person, laboratory or health care facility required to report under sub. (1) shall report communicable diseases of less urgent public health importance as listed in categories II and III of Appendix A of this chapter to the local health officer or, if required under Appendix A, to the state epidemiologist, by individual case report form or by telephone within 72 hours of the identification of a case or suspected case.</p> <p>(c) A person, laboratory or health care facility required to report under sub. (1) shall report the total number of cases or suspected cases of the other communicable diseases listed in Appendix A to the local health officer on a weekly basis.</p> <p>(4) HANDLING OF REPORTS BY THE LOCAL HEALTH OFFICER.</p> <p>(a) The local health officer shall notify the state epidemiologist immediately of any cases or suspected cases reported under sub. (3) (a).</p> <p>(b) At the close of each week, the local health officer shall notify the state epidemiologist in writing on a form provided by the department of all cases of reported diseases listed in Appendix A.</p> <p>(c) Local health departments serving jurisdictions within the same county may, in conjunction with the department, establish a combined reporting system to expedite the reporting process.</p>

Washington Administrative Code – Chapter Ins: Insurance Commissioner

Chapter Ins WAC	Code Language
Ins 3.53	<p>HIV testing.</p> <p>(1) FINDINGS. The tests listed in sub. (4) (e) have been specified by the state epidemiologist in part B (4) of a report entitled "Validated positive, medically significant and sufficiently reliable tests to detect the presence of human immunodeficiency virus (HIV), antigen or nonantigenic products of HIV or an antibody to HIV ," dated January 24, 1997. The commissioner of insurance, therefore, finds that these tests are sufficiently reliable for use in underwriting individual life, accident and health insurance policies.</p> <p>(2) PURPOSES. The purposes of this section are:</p> <p>(a) To implement s. 631.90 (3) (a), Stats.</p> <p>(b) To establish procedures for insurers to use in obtaining informed consent for HIV testing and informing individuals of the results of a positive HIV test.</p> <p>(c) To ensure the confidentiality of HIV test results.</p> <p>(d) To restrict the use of certain information on HIV testing in underwriting group life, accident and health insurance policies.</p> <p>(4) TESTING; USE; PROHIBITIONS.</p> <p>(a) For use in underwriting an individual life, accident or health insurance policy, an insurer may require that the person to be insured be tested, at the insurer's expense, for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.</p> <p>(b) An insurer that requires a test under par. (a) shall, prior to testing, obtain a signed consent form, in substantially the format specified in Appendix A, either from the person to be tested or from one of the following if the specified condition exists:</p> <ol style="list-style-type: none"> 1. The person's parent or guardian, if the person is under 14 years of age. 2. The person's guardian, if the person is adjudged incompetent under ch. 54, Stats. 3. The person's health care agent, as defined in s. 155.01 (4), Stats., if the person has been found to be incapacitated under s. 155.05 (2), Stats. <p>(c) The insurer shall provide a copy of the consent form to the person who signed it and shall maintain a copy of each consent form for at least one year.</p> <p>(d) The insurer shall provide with the consent form a copy of the document, "Resources for persons with a positive HIV test/The</p>

Chapter Ins WAC	Code Language
	implications of testing positive for HIV." Each insurer shall either obtain copies of the document from the office of the commissioner of insurance or reproduce the document itself. If the document is revised, the insurer shall begin using the revised version no later than 30 days after receiving notice of the revision from the office of the commissioner of insurance.

Washington Administrative Code – Chapter RL: Regulation and Licensing

Chapter RL WAC	Code Language
RL 114.09	Conducting a Professional Bout - Stimulants prohibited. A second may only give a boxer water to drink during a bout. No manager or second may give any drug, narcotic or stimulant to a boxer before or during a bout. The department may require a boxer to submit to a drug test or HIV examination before a scheduled bout.