Adopted COMMITTEE AMENDMENT NO 1 PROPOSED TO

Senate Bill No. 2873

BY: Committee

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

20	SECTION 1. Section 41-41-3, Mississippi Code of 1972, is
21	amended as follows:
22	41-41-3. (1) For the purpose of this section, the terms
23	health-care institution or health-care provider, unemancipated
24	minor and surrogate shall have the meanings as defined in Section
25	41-41-203.
26	$(\star \star \star 2)$ Except as provided by subsection (3) of this
27	section, it is * * * recognized and established that * * * \underline{a}
28	health-care institution or health-care provider may provide health
29	care that is not prohibited by law \star \star \star for an unemancipated

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30	minor only after first obtaining the consent of a parent with
31	joint or separate legal custody of the minor, a guardian of the
32	minor, or the minor's surrogate. If a parent with joint or
33	separate legal custody of the minor, a guardian of the minor, or
34	the minor's surrogate has not consented or denied consent within
35	seven (7) days after the first attempt by the health-care provider
36	or health-care institution to contact the parent, guardian or
37	surrogate at the last known telephone number or their telephone
38	number provided by the minor or the minor's custodian, or if there
39	is no known telephone number, twenty-one (21) days after mailing a
40	request for consent to the parent's, guardian's or surrogate's
41	last known address or their address provided by the minor or
42	minor's custodian, which attempts shall be evidenced by verified
43	documentation, then any one (1) of the following persons who are
44	reasonably available, in descending order of priority, is
45	authorized and empowered to consent on behalf of the minor:
46	(a) The minor's custodian;
47	(b) The minor's adult brother or sister; or
48	(c) The minor's grandparent.
49	* * *
50	(3) The consent required by subsection (2) of this section
51	shall not be required:
52	(a) In any circumstance regarding a person with mental
53	illness as governed by Sections 41-21-61 through 41-21-109;
54	(b) In an emergency as provided for in Section 41-41-7;

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55	(c) When a judicial consent is obtained pursuant to
56	Section 41-41-9;
57	(d) In relation to minors age sixteen (16) years or
58	older donating to a blood bank as provided for in Section
59	<u>41-41-15;</u>
60	(e) In relation to physicians or hospitals
61	authorizations to test for or diagnose infectious disease as
62	provided for in Section 41-41-16;
63	(f) In relation to any minor in the custody of the
64	Department of Child Protection Services (CPS) to which CPS
65	consents;
66	(g) In relation to any inmate lacking the capacity to
67	make health care decisions as provided for in Section 47-5-180;
68	(h) In relation to the baby drop-off law, Section
69	<u>43-15-201 et seq.; or</u>
70	(i) When an athlete is evaluated and treated by an
71	athletic trainer as defined in Section 73-55-3.
72	(* * * $\underline{4}$) Any female, regardless of age or marital status,
73	is empowered to give consent for herself in connection with
74	pregnancy or childbirth.
75	(5) The provisions of this section do not affect other
76	statutes of this state governing treatment for mental illness of
77	an individual involuntarily committed to a mental health care
78	institution.

79 <u>SECTION 2.</u> (1) A parent, guardian or surrogate of an 80 unemancipated minor may bring suit for any violation of Section 1 81 of this act and may raise Section 1 of this act as a defense in 82 any judicial or administrative proceeding without regard to 83 whether the proceeding is brought by or in the name of the state 84 government, any private person, or any other party.

85 (2) An action under this section may be brought, and relief 86 may be granted, without regard to whether the person bringing the 87 action has sought or exhausted available administrative remedies.

(3) Any person who successfully asserts a claim or defense
under this section may recover declaratory relief, injunctive
relief, nominal damages, compensatory damages reasonable
attorneys' fees and costs, and any other appropriate relief.

92 (4) Sovereign, governmental and qualified immunities to suit
93 and from liability are waived and abolished to the extent of
94 liability created by this section.

95 SECTION 3. Section 41-41-17, Mississippi Code of 1972, is 96 amended as follows:

97 41-41-17. * * * Any adult, as defined in Section 98 41-41-203(a), * * * or emancipated minor, as defined in Section 99 41-41-203(e), * * * may consent to participate as a subject in 100 research if that research is conducted in accordance with federal 101 law (Title 45 CFR Part 46: Protection of Human Subjects).

102 * * *

SECTION 4. Section 41-42-7, Mississippi Code of 1972, is amended as follows:

105 41-42-7. Contraceptive supplies and information may <u>not</u> be 106 furnished by physicians to any minor *** * *** <u>except in compliance</u> 107 with the provisions of Section 41-41-3.

SECTION 5. Section 41-41-13, Mississippi Code of 1972, which provides that a physician or nurse practitioner may treat minors for venereal disease without parental consent, and Section 41-41-14, Mississippi Code of 1972, which provides that a physician or psychologist may treat certain minors for mental or emotional problems caused or related to alcohol or drugs without parental consent, are repealed.

SECTION 6. Section 41-9-69, Mississippi Code of 1972, is brought forward as follows:

117 41-9-69. (1)Hospital records shall be retained, preserved 118 and properly stored by hospitals for such periods of reasonable 119 duration as may be prescribed in rules and regulations adopted by 120 the licensing agency. Such rules and regulations may provide for 121 different periods of such retention for the various constituent 122 parts of any hospital records, and such rules and regulations may 123 require that an abstract be made of pertinent data from any 124 hospital records that may be retired as provided herein. Such 125 rules and regulations may also provide for different periods of 126 such retention for the various injuries, diseases, infirmities or 127 conditions primarily causing or associated with the

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128 hospitalization. However, complete hospital records shall be 129 retained for a period after discharge of the patient of at least 130 (a) seven (7) years in cases of patients discharged at death, 131 except as may be otherwise hereinafter provided; (b) ten (10) years in cases of adult patients of sound mind at the time of 132 133 discharge, except as may be otherwise hereinafter provided; (c) 134 for the period of minority or other known disability of the patient plus seven (7) additional years, but not to exceed 135 136 twenty-eight (28) years, in cases of patients under disability of 137 minority or otherwise; or (d) for the period of minority or other 138 known disability of any survivors hereinafter mentioned plus seven 139 (7) additional years, but not to exceed twenty-eight (28) years, 140 in all cases where the patient was discharged at death, or is known by the hospital to have died within thirty (30) days after 141 142 discharge, and the hospital knows or has reason to believe that 143 such patient or former patient left one or more survivors under 144 disability of minority or otherwise who are or are claimed to be entitled to damages for wrongful death of the patient under 145 146 Section 11-7-13, or laws amendatory thereof. Upon the expiration 147 of the applicable period of retention, any hospital may retire the 148 hospital record.

149 (2) X-ray film and any other graphic data may be retired
150 four (4) years after the date of exposure of the X-ray film or
151 creation of the graphic data if the written and signed findings of
152 a radiologist who has read such X-ray film or other professional

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153 who has interpreted such graphic data are retained for the same 154 period as other hospital records under the preceding subsection. 155 However, before X-ray film or graphic data is retired, the 156 signature of the patient or his representative consenting to the 157 retirement of X-rays or graphic data shall be on file, or the 158 hospital, by certified letter, return receipt requested, shall 159 advise the patient or his representative of its intent to retire 160 the X-ray film or graphic data. The letter shall be mailed to the 161 last known address of the patient or the patient's representative as reflected in the hospital's records. The patient or his 162 representative shall have sixty (60) days from the date of the 163 164 hospital's letter to request in writing that the X-ray film or 165 graphic data be maintained by the hospital for the same period as 166 hospital records under the preceding subsection. If such request 167 is received by the hospital within sixty (60) days from the date 168 of its letter, the hospital shall abide by such request. 169 Otherwise, the hospital may retire such X-ray film or graphic data 170 as it chooses.

171 **SECTION 7.** Section 73-9-13, Mississippi Code of 1972, is 172 brought forward as follows:

173 73-9-13. The State Board of Dental Examiners shall each year 174 elect from their number a president, vice president and 175 secretary-treasurer to serve for the coming year and until their 176 successors are qualified. Only dentist members of the board may 177 hold the offices of president and vice president. The board shall

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have a seal with appropriate wording to be kept at the offices of the board. The secretary and the executive director of the board shall be required to make bond in such sum and with such surety as the board may determine. It shall be the duty of the executive director to keep a complete record of the acts and proceedings of the board and to preserve all papers, documents and correspondence received by the board relating to its duties and office.

185 The board shall have the following powers and duties:

(a) To carry out the purposes and provisions of the
state laws pertaining to dentistry and dental hygiene, and the
practice thereof and matters related thereto, particularly
Sections 73-9-1 through 73-9-117, together with all amendments and
additions thereto.

(b) To regulate the practice of dentistry and dental hygiene and to promulgate reasonable regulations as are necessary or convenient for the protection of the public; however, the board shall not adopt any rule or regulation or impose any requirement regarding the licensing of dentists that conflicts with the prohibitions in Section 73-49-3.

(c) To make rules and regulations by which clinical facilities within institutions, schools, colleges, universities and other agencies may be recognized and approved for the practice of dentistry or of dental hygiene by unlicensed persons therein, as a precondition to their being excepted from the dental practice act and authorized in accordance with Section 73-9-3(g) and (h).

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(d) To provide for the enforcement of and to enforce
the laws of the State of Mississippi and the rules and regulations
of the State Board of Dental Examiners.

(e) To compile at least once each calendar year and to maintain an adequate list of prospective dentist and dental hygienist appointees for approval by the Governor as provided for elsewhere by law.

(f) To issue licenses and permits to applicants when
found to be qualified.

(g) To provide for reregistration of all licenses and permits duly issued by the board.

(h) To maintain an up-to-date list of all licensees andpermit holders in the state, together with their addresses.

(i) To examine applicants for the practice of dentistryor dental hygiene at least annually.

(j) To issue licenses or duplicates and reregistration/renewal certificates, and to collect and account for fees for same.

(k) To maintain an office adequately staffed insofar as funds are available for the purposes of carrying out the powers and duties of the board.

(1) To provide by appropriate rules and regulations,
within the provisions of the state laws, for revoking or
suspending licenses and permits and a system of fines for lesser
penalties.

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(m) To prosecute, investigate or initiate prosecution for violations of the laws of the state pertaining to practice of dentistry or dental hygiene, or matters affecting the rights and duties, or related thereto.

(n) To provide by rules for the conduct of as much
board business as practicable by mail, which, when so done, shall
be and have the same force and effect as if done in a regular
meeting duly organized.

(o) To adopt rules and regulations providing for the
 reasonable regulation of advertising by dentists and dental
 hygienists.

(p) To employ, in its discretion, a duly licensedattorney to represent the board in individual cases.

(q) To employ, in its discretion, technical and professional personnel to conduct dental office sedation site visits, administer and monitor state board examinations and carry out the powers and duties of the board.

245 SECTION 8. Section 73-43-11, Mississippi Code of 1972, is
246 brought forward as follows:

73-43-11. The State Board of Medical Licensure shall havethe following powers and responsibilities:

(a) Setting policies and professional standards
regarding the medical practice of physicians, osteopaths,
podiatrists and physician assistants practicing with physician

252 supervision;

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253 (b) Considering applications for licensure;

254 (c) Conducting examinations for licensure;

255 (d) Investigating alleged violations of the medical 256 practice act;

(e) Conducting hearings on disciplinary matters
involving violations of state and federal law, probation,
suspension and revocation of licenses;

(f) Considering petitions for termination of probationary and suspension periods, and restoration of revoked licenses;

(g) To promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine; however, the board shall not adopt any rule or regulation or impose any requirement regarding the licensing of physicians or osteopaths that conflicts with the prohibitions in Section 73-49-3;

(h) To enter into contracts with any other state or
federal agency, or with any private person, organization or group
capable of contracting, if it finds such action to be in the
public interest and in the furtherance of its responsibilities;
(i) Perform the duties prescribed by Sections 73-26-1

275 through 73-26-5; and

(j) Perform the duties prescribed by the InterstateMedical Licensure Compact, Section 73-25-101.

24/HR26/SB2873A.1J PAGE 11 (BS/KW) 278 **SECTION 9.** This act shall take effect and be in force from

279 and after July 1, 2024.

Further, amend by striking the title in its entirety and inserting in lieu thereof the following:

AN ACT TO AMEND SECTION 41-41-3, MISSISSIPPI CODE OF 1972, TO 1 2 PROHIBIT A HEALTH-CARE INSTITUTION OR HEALTH-CARE PROVIDER FROM 3 PROVIDING HEALTH CARE FOR AN UNEMANCIPATED MINOR WITHOUT FIRST 4 OBTAINING THE CONSENT OF THE MINOR'S PARENT, GUARDIAN OR 5 SURROGATE; TO PROVIDE FOR CERTAIN EXCEPTIONS TO THE REQUIREMENT OF OBTAINING PARENTAL CONSENT; TO AUTHORIZE A PARENT, GUARDIAN OR 6 7 SURROGATE OF AN UNEMANCIPATED MINOR TO BRING SUIT FOR ANY 8 VIOLATION OF THIS ACT; TO AMEND SECTIONS 41-41-17 AND 41-42-7, 9 MISSISSIPPI CODE OF 1972, TO CONFORM TO THE PRECEDING PROVISIONS; TO REPEAL SECTION 41-41-13, MISSISSIPPI CODE OF 1972, WHICH 10 11 PROVIDES THAT A PHYSICIAN OR NURSE PRACTITIONER MAY TREAT MINORS 12 FOR VENEREAL DISEASE WITHOUT PARENTAL CONSENT, AND SECTION 13 41-41-14, MISSISSIPPI CODE OF 1972, WHICH PROVIDES THAT A 14 PHYSICIAN OR PSYCHOLOGIST MAY TREAT CERTAIN MINORS FOR MENTAL OR 15 EMOTIONAL PROBLEMS CAUSED OR RELATED TO ALCOHOL OR DRUGS WITHOUT 16 PARENTAL CONSENT; TO BRING FORWARD SECTIONS 41-9-69, 73-9-13 AND 17 73-43-11, MISSISSIPPI CODE OF 1972, FOR THE PURPOSES OF POSSIBLE 18 AMENDMENT; AND FOR RELATED PURPOSES.