

IN THE SENATE

SENATE BILL NO. 1098

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO BONE MARROW DONATIONS; AMENDING THE HEADING FOR CHAPTER 37, TI-  
2 TLE 39, IDAHO CODE, TO PROVIDE FOR BONE MARROW DONATIONS; AMENDING CHAP-  
3 TER 37, TITLE 39, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 39-3704,  
4 IDAHO CODE, TO AUTHORIZE CERTAIN PRIMARY CARE PROVIDERS AND URGENT CARE  
5 PHYSICIANS TO PROVIDE INFORMATION TO PATIENTS ABOUT BONE MARROW DONA-  
6 TION, TO PROVIDE THAT THE DEPARTMENT OF HEALTH AND WELFARE SHALL DEVELOP  
7 CERTAIN INFORMATION, AND TO AUTHORIZE RULEMAKING.  
8

9 Be It Enacted by the Legislature of the State of Idaho:

10 SECTION 1. That the Heading for Chapter 37, Title 39, Idaho Code, be,  
11 and the same is hereby amended to read as follows:

12 CHAPTER 37

13 ANATOMICAL TISSUE, ORGAN, FLUID, BONE MARROW DONATIONS

14 SECTION 2. That Chapter 37, Title 39, Idaho Code, be, and the same is  
15 hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
16 ignated as Section 39-3704, Idaho Code, and to read as follows:

17 39-3704. BONE MARROW DONATIONS. (1) Each primary care provider and  
18 urgent care physician may inquire of a new patient who is between the ages of  
19 eighteen (18) years and forty-five (45) years on the new patient intake form  
20 as to whether the patient is registered with the bone marrow registry. If  
21 the patient is not registered with the bone marrow registry, the provider or  
22 physician shall offer information described in subsection (2) of this sec-  
23 tion regarding the bone marrow registry to the patient.

24 (2) The department of health and welfare shall develop and disseminate  
25 information regarding the bone marrow registry, which shall include but not  
26 be limited to the following:

27 (a) The need for bone marrow donations;

28 (b) Patient populations that would benefit from bone marrow donations;

29 (c) How to join the bone marrow registry; and

30 (d) How to acquire a free buccal swab kit from the bone marrow registry.

31 (3) Dissemination of the information under this section may be by oral,  
32 print, or electronic notification, or any other method, provided that the  
33 department of health and welfare determines that the dissemination of infor-  
34 mation is cost-effective for the department and for primary care providers  
35 and urgent care physicians.

36 (4) The department of health and welfare may promulgate rules to imple-  
37 ment the provisions of this section.