

SENATE BILL REPORT

ESHB 2568

AS REPORTED BY COMMITTEE ON HEALTH & LONG-TERM CARE,
FEBRUARY 27, 1992

Brief Description: Concerning health care information disclosure.

SPONSORS: House Committee on Health Care (originally sponsored by Representatives Appelwick, Morris, Moyer and Paris)

HOUSE COMMITTEE ON HEALTH CARE

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

Signed by Senators West, Chairman; L. Smith, Vice Chairman; M. Kreidler, Niemi, and Wojahn.

Staff: Martin Lovinger (786-7443)

Hearing Dates: February 26, 1992; February 27, 1992

BACKGROUND:

The Uniform Health Care Information Act defines the rights and responsibilities of patients, health care providers and third parties with regard to the disclosure of patient health records. A patient's health information contained in the provider's record is confidential and may not be disclosed without the patient's authorization except under specified conditions.

Unless the patient objects, a health care facility may disclose, to the extent the recipient needs to know, directory information about a patient without the patient's authorization. Directory information includes the presence and general health condition of the patient, described in terms of critical, poor, fair, good, excellent or terms denoting similar conditions. However, the name, residence and sex of the patient cannot be disclosed.

A health care provider may charge a fee for copying a patient's record. The charge is specified at \$2 for the first page and \$1 for each additional page, but the charge may not exceed the provider's actual cost.

For payment of health care claims, third-party payors routinely have access to the insured's health information. There may be a number of health providers used by the beneficiary, and a separate authorization must be obtained for each provider named for payment purposes.

There is no authority for a health provider to charge a fee when required to disclose patient health information pursuant to compulsory legal process.

SUMMARY:

The language of the Uniform Health Care Information Act is clarified in a number of respects.

A health care facility may disclose, for the purposes of identification and to the extent the recipient needs to know, the name, residence and sex of a patient without the patient's authorization unless the patient objects. In cases of public record, the health care facility may disclose additionally the age, occupation, condition, diagnosis or extent and location of injuries as determined by a physician, and whether the patient was conscious when admitted.

The fee charged by a health provider for copying a patient's health record cannot exceed the provider's actual cost.

Third-party payors can generally have access to a beneficiary's health information for payment purposes from any health provider submitting a billing.

A health care provider may charge a fee when required to disclose patient health information pursuant to compulsory legal process.

Appropriation: none

Revenue: none

Fiscal Note: available

SUMMARY OF PROPOSED SENATE AMENDMENT:

It is clarified that only hospitals and physicians are allowed to release information in cases of public record.

TESTIMONY FOR:

This bill clarifies the rights and responsibilities of third parties with regard to obtaining access to a patient's health information. It is a service to patients that hospitals can provide information to the press that is often more accurate than that contained in police reports. Present guidelines limit information unreasonably so that it may actually be misleading. Insurers' concerns about access to records for payment purposes are addressed.

TESTIMONY AGAINST: None

TESTIFIED: Mimi Fields, M.D. DOH; Robb Menaul, WA State Hospital Assn.; Roland Thompson, Allied Daily Newspapers of WA; Becky Bogard, WA State Assn. of Broadcasters and Medical Laboratory Group; Jean Leonard, State Farm