

SENATE BILL REPORT

SHB 1214

AS REPORTED BY COMMITTEE ON HEALTH & HUMAN SERVICES,
APRIL 1, 1993

Brief Description: Concerning health care information disclosure.

SPONSORS: House Committee on Health Care (originally sponsored by Representative Appelwick)

HOUSE COMMITTEE ON HEALTH CARE

SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

Majority Report: Do pass as amended.

Signed by Senators Talmadge, Chairman; Wojahn, Vice Chairman; Deccio, Franklin, Hargrove, McDonald, Moyer, Niemi, Quigley, and Winsley.

Staff: Martin Lovinger (786-7443)

Hearing Dates: March 30, 1993; April 1, 1993

BACKGROUND:

The Uniform Health Care Information Act defines the rights and responsibilities of patients, health care providers and third parties with regard to 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. However, the patient is entitled to inspect and have a copy of the health record, and can authorize others to receive it.

A health provider may disclose directory information except where the patient objects. Directory information includes the presence and general health condition of the patient.

A health care provider may charge a reasonable fee for copying a patient's health record, not to exceed actual costs, but not higher than the fee that clerks of the Superior Court charge for copying, that is \$2 for the first page and \$1 for each additional page. In addition, where the certification of a record is requested, there is an additional fee of \$2. Where editing of a record by a health provider is required by statute and is done by the provider personally, the fee may be the usual and customary charge for a basic office visit.

There is no definition of third-party health care payor provided in this chapter of the law.

Hospitals are not authorized to release patient information in cases of public record.

The Uniform Health Information Act does not govern access to patient health information under the mental health treatment law.

SUMMARY:

Directory information includes, for the purpose of identification, the name, residence, and sex of the patient.

The reasonable fee a health provider may charge for searching and duplicating health information contained in a patient's record cannot exceed 65 cents per page for the first 30 pages, and thereafter 50 cents per page and a \$15 clerical fee. The fees are to be adjusted biennially for inflation according to the Consumer Price Index.

A third-party payor is defined to include insurers, health care service contractors, health maintenance organizations, and employee welfare benefit plans.

A patient's authorization to disclose the patient's health care information expires 90 days after it is signed if the authorization contains no expiration date.

Hospitals or health care providers are authorized to release information in cases of public record regarding the name, residence, sex, age, occupation, condition, diagnosis or extent and location of injuries of the patient, and whether the patient was conscious when admitted.

The Department of Health may have access to mental health records for the purpose of determining compliance with state or federal licensure laws, but this information is exempt from public inspection and copying pursuant to Chapter 42.17 RCW.

Information and records of a deceased mental health patient may be disclosed to a patient's next of kin, guardian, or conservator in the event of the patient's death. The personal representative of the deceased has all the rights of access to the records and information as the patient had.

SUMMARY OF PROPOSED SENATE AMENDMENT:

Hospitals or health care providers may release information in cases reported by fire, police, sheriff or other public authority.

Appropriation: none

Revenue: none

Fiscal Note: available

Effective Date: The bill contains an emergency clause and takes effect on July 1, 1993.

TESTIMONY FOR:

These changes are necessary to clarify the rights and responsibilities of patients, health care providers, third-party payors, and the media with regard to health care records. This is a compromise bill.

TESTIMONY AGAINST: None

TESTIFIED: PRO: Robb Meneal, Washington State Hospital Association; Teri Wiseman-Kuhlman, Washington Health Information Management Association; Rowland Thompson, Allied Daily Newspapers; Becky Bogard, Washington State Association of Broadcasters; Dennis Martin, Washington State Trial Lawyers Association; Jean Leonard, Washington Insurers and State Farm Insurance