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SENATE BILL 6162

State of Washington 58th Legislature 2004 Regular Session

By Senators Brandland, Pflug and Oke

Read first time 01/14/2004. Referred to Committee on Health & Long-Term Care.

- 1 AN ACT Relating to the disclosure of health care information for
- 2 law enforcement purposes without the patient's authorization; amending
- 3 RCW 70.02.050, 70.02.010, and 68.50.320; and creating a new section.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** The purpose of this act is to aid law
- 6 enforcement authorities in combating crime through the rapid
- 7 identification of all persons who require medical treatment as a result
- 8 of a criminal act and to assist in the rapid identification of human
- 9 remains.
- 10 **Sec. 2.** RCW 70.02.050 and 1998 c 158 s 1 are each amended to read
- 11 as follows:
- 12 (1) A health care provider may disclose health care information
- 13 about a patient without the patient's authorization to the extent a
- 14 recipient needs to know the information, if the disclosure is:
- 15 (a) To a person who the provider reasonably believes is providing
- 16 health care to the patient;
- 17 (b) To any other person who requires health care information for
- 18 health care education, or to provide planning, quality assurance, peer

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- review, or administrative, legal, financial, or actuarial services to the health care provider; or for assisting the health care provider in the delivery of health care and the health care provider reasonably believes that the person:
 - (i) Will not use or disclose the health care information for any other purpose; and

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- (ii) Will take appropriate steps to protect the health care information;
 - (c) To any other health care provider reasonably believed to have previously provided health care to the patient, to the extent necessary to provide health care to the patient, unless the patient has instructed the health care provider in writing not to make the disclosure;
 - (d) To any person if the health care provider reasonably believes that disclosure will avoid or minimize an imminent danger to the health or safety of the patient or any other individual, however there is no obligation under this chapter on the part of the provider to so disclose;
 - (e) Oral, and made to immediate family members of the patient, or any other individual with whom the patient is known to have a close personal relationship, if made in accordance with good medical or other professional practice, unless the patient has instructed the health care provider in writing not to make the disclosure;
 - (f) To a health care provider who is the successor in interest to the health care provider maintaining the health care information;
 - (g) For use in a research project that an institutional review board has determined:
 - (i) Is of sufficient importance to outweigh the intrusion into the privacy of the patient that would result from the disclosure;
- (ii) Is impracticable without the use or disclosure of the health care information in individually identifiable form;
- (iii) Contains reasonable safeguards to protect the information from redisclosure;
- (iv) Contains reasonable safeguards to protect against identifying, directly or indirectly, any patient in any report of the research project; and
- (v) Contains procedures to remove or destroy at the earliest opportunity, consistent with the purposes of the project, information

that would enable the patient to be identified, unless an institutional review board authorizes retention of identifying information for purposes of another research project;

- (h) To a person who obtains information for purposes of an audit, if that person agrees in writing to:
- (i) Remove or destroy, at the earliest opportunity consistent with the purpose of the audit, information that would enable the patient to be identified; and
- (ii) Not to disclose the information further, except to accomplish the audit or report unlawful or improper conduct involving fraud in payment for health care by a health care provider or patient, or other unlawful conduct by the health care provider;
- (i) To an official of a penal or other custodial institution in which the patient is detained;
- (j) To provide directory information, unless the patient has instructed the health care provider not to make the disclosure(($\dot{\tau}$
- (k) In the case of a hospital or health care provider to provide, in cases reported by fire, police, sheriff, or other public authority, name, residence, sex, age, occupation, condition, diagnosis, or extent and location of injuries as determined by a physician, and whether the patient was conscious when admitted)).
- (2) A health care provider shall disclose health care information about a patient without the patient's authorization if the disclosure is:
- (a) To federal, state, or local public health authorities, to the extent the health care provider is required by law to report health care information; when needed to determine compliance with state or federal licensure, certification or registration rules or laws; or when needed to protect the public health;
- (b) To federal, state, or local law enforcement authorities to the extent the health care provider is required by law;
- (c) To federal, state, or local law enforcement authorities, upon receipt of a written or oral request, in all cases in which the patient is being treated for a bullet wound, gunshot wound, powder burn, or other injury arising from or caused by the discharge of a firearm, or an injury caused by a knife, ice pick, or any other sharp or pointed instrument which appears to have been intentionally inflicted upon a

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- 1 person, or any other injury, including blunt force injury, that the
- 2 health care provider reasonably believes resulted from a criminal act,
- 3 <u>the following information, if known:</u>
- 4 (i) The name of the patient;
- 5 (ii) The patient's residence;
- 6 (iii) The patient's sex;
- 7 (iv) The patient's age;
- 8 (v) The patient's condition;
- 9 <u>(vi) The patient's diagnosis, or extent and location of injuries as</u>
- 10 <u>determined by a physician;</u>
- 11 <u>(vii) The names of treating physicians and nurses;</u>
- 12 <u>(viii) Whether the patient was conscious when admitted;</u>
- (ix) Whether the patient is likely to be transferred to another facility;
- 15 (x) The patient's discharge time and date; and
- 16 (xi) Any other information that the health care provider deems
- 17 necessary to protect the safety of the patient or to assist in the
- 18 <u>identification and apprehension of the person who inflicted the</u>
- 19 <u>injuries;</u>
- 20 <u>(d)</u> To county coroners and medical examiners for the investigations
- 21 of deaths;
- 22 (((d))) <u>(e)</u> Pursuant to compulsory process in accordance with RCW
- 23 70.02.060.
- 24 (3) All state or local agencies obtaining patient health care
- 25 information pursuant to this section shall adopt rules establishing
- 26 their record acquisition, retention, and security policies that are
- 27 consistent with this chapter.
- 28 Sec. 3. RCW 70.02.010 and 2002 c 318 s 1 are each amended to read
- 29 as follows:
- The definitions in this section apply throughout this chapter
- 31 unless the context clearly requires otherwise.
- 32 (1) "Audit" means an assessment, evaluation, determination, or
- investigation of a health care provider by a person not employed by or
- 34 affiliated with the provider to determine compliance with:
- 35 (a) Statutory, regulatory, fiscal, medical, or scientific
- 36 standards;

(b) A private or public program of payments to a health care 1 2 provider; or

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- (c) Requirements for licensing, accreditation, or certification.
- (2) "Directory information" means information disclosing the presence, and for the purpose of identification, the name, residence, sex, and the general health condition of a particular patient who is a patient in a health care facility or who is currently receiving emergency health care in a health care facility.
- (3) <u>"Federal, state, or local law enforcement authorities" means</u> any agency or authority of the United States, a state, a territory, a political subdivision of a state or territory, or an Indian tribe, empowered by law to:
- 13 (a) Investigate or conduct an official inquiry into a potential 14 violation of law; or
 - (b) Prosecute or otherwise conduct a criminal, civil, or administrative proceeding arising from an alleged violation of law.
 - (4) "General health condition" means the patient's health status described in terms of "critical," "poor," "fair," "good," "excellent," or terms denoting similar conditions.
 - $((\frac{4}{1}))$ (5) "Health care" means any care, service, or procedure provided by a health care provider:
 - (a) To diagnose, treat, or maintain a patient's physical or mental condition; or
 - (b) That affects the structure or any function of the human body.
 - (((5))) (6) "Health care facility" means a hospital, clinic, nursing home, laboratory, office, or similar place where a health care provider provides health care to patients.
 - $((\frac{6}{}))$ "Health care information" means any information, whether oral or recorded in any form or medium, that identifies or can readily be associated with the identity of a patient and directly relates to the patient's health care, including a patient's deoxyribonucleic acid and identified sequence of chemical base pairs.
- The term includes any record of disclosures of health care information. 33
- $((\frac{7}{1}))$ (8) "Health care provider" means a person who is licensed, 34 certified, registered, or otherwise authorized by the law of this state 35 36 to provide health care in the ordinary course of business or practice 37 of a profession.

p. 5 SB 6162 ((+8)) (9) "Institutional review board" means any board, committee, or other group formally designated by an institution, or authorized under federal or state law, to review, approve the initiation of, or conduct periodic review of research programs to assure the protection of the rights and welfare of human research subjects.

- $((\frac{9}{}))$ (10) "Maintain," as related to health care information, means to hold, possess, preserve, retain, store, or control that information.
- $((\frac{10}{10}))$ (11) "Patient" means an individual who receives or has received health care. The term includes a deceased individual who has received health care.
- (((11))) <u>(12)</u> "Person" means an individual, corporation, business trust, estate, trust, partnership, association, joint venture, government, governmental subdivision or agency, or any other legal or commercial entity.
 - ((\(\frac{(12)}{12}\))) (13) "Reasonable fee" means the charges for duplicating or searching the record, but shall not exceed sixty-five cents per page for the first thirty pages and fifty cents per page for all other pages. In addition, a clerical fee for searching and handling may be charged not to exceed fifteen dollars. These amounts shall be adjusted biennially in accordance with changes in the consumer price index, all consumers, for Seattle-Tacoma metropolitan statistical area as determined by the secretary of health. However, where editing of records by a health care 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.
 - $((\frac{13}{13}))$ (14) "Third-party payor" means an insurer regulated under Title 48 RCW authorized to transact business in this state or other jurisdiction, including a health care service contractor, and health maintenance organization; or an employee welfare benefit plan; or a state or federal health benefit program.
- **Sec. 4.** RCW 68.50.320 and 2001 c 223 s 1 are each amended to read as follows:
- When a person reported missing has not been found within thirty days of the report, the sheriff, chief of police, county coroner or county medical examiner, or other law enforcement authority initiating

and conducting the investigation for the missing person shall ask the missing person's family or next of kin to give written consent to contact the dentist or dentists of the missing person and request the person's dental records.

The missing person's dentist or dentists shall provide diagnostic quality copies of the missing person's dental records or original dental records to the sheriff, chief of police, county coroner or county medical examiner, or other law enforcement authority, when presented with the written consent from the missing person's family or next of kin or with a statement from the sheriff, chief of police, county coroner or county medical examiner, or other law enforcement authority that the missing person's family or next of kin could not be located in the exercise of due diligence or that the missing person's family or next of kin refuses to consent to the release of the missing person's dental records and there is reason to believe that the missing person's family or next of kin may have been involved in the missing person's disappearance.

When a person reported missing has not been found within thirty days, the sheriff, chief of police, or other law enforcement authority initiating and conducting the investigation for the missing person shall confer with the county coroner or medical examiner prior to the preparation of a missing person's report. After conferring with the coroner or medical examiner, the sheriff, chief of police, or other law enforcement authority shall submit a missing person's report and the dental records received under this section to the dental identification system of the state patrol identification, child abuse, vulnerable adult abuse, and criminal history section on forms supplied by the state patrol for such purpose.

When a person reported missing has been found, the sheriff, chief of police, coroner or medical examiner, or other law enforcement authority shall report such information to the state patrol.

The dental identification system shall maintain a file of information regarding persons reported to it as missing. The file shall contain the information referred to in this section and such other information as the state patrol finds relevant to assist in the location of a missing person.

The files of the dental identification system shall, upon request,

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- 1 be made available to law enforcement agencies attempting to locate
- 2 missing persons.

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