

SENATE BILL REPORT

SB 6139

As of January 21, 2014

Title: An act relating to the protection of patient health care information in the comprehensive hospital abstract reporting system.

Brief Description: Concerning the protection of patient health care information in the comprehensive hospital abstract reporting system.

Sponsors: Senators Becker, Pedersen and Keiser; by request of Department of Health.

Brief History:

Committee Activity: Health Care: 1/20/14.

SENATE COMMITTEE ON HEALTH CARE

Staff: Bonnie Kim (786-7316)

Background: The Comprehensive Hospital Abstract Reporting System (CHARS) provides hospital patient discharge information to public health personnel, consumers, purchasers, payers, providers, and researchers to help make informed decisions on health care. CHARS contains coded hospital inpatient discharge information—derived from billing systems—available from 1987 to 2012. Coded hospital-based observation stay data is available from 2008 forward. For example, the Department of Health (DOH) uses CHARS data to identify and analyze health trends related to hospitalizations and to identify and quantify issues related to health care access, quality, and cost containment.

The non-confidential CHARS data file does not contain direct patient identifiers, defined as information that identifies a patient or, in other words, information that is readily associated with a person's identity and exempt from disclosure under the Public Records Act. The non-confidential CHARS data file does include indirect identifiers, defined as information that may identify a patient when combined with other information, such as the patient's age, sex, zip code, billed charges, and diagnostic or procedure codes.

Summary of Bill: A provision applying DOH confidentiality rules to safeguard patient information is supplanted with a statutory directive to DOH and any other subsequent agency that receives CHARS data to maintain patient confidentiality. Public inspection of any patient discharge data that includes both direct and indirect identifiers is prohibited.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

DOH may only release CHARS data as follows:

1. data with both direct and indirect patient identifiers may be released to:
 - a. federal, state, and local government agencies upon receipt of a signed data use agreement; and
 - b. researchers approved by the Washington State Institutional Review Board upon receipt of a signed confidentiality agreement;
2. data without direct patient identifiers but with possible indirect patient identifiers may be released to agencies, researchers, and other persons upon receipt of a signed data use agreement; and
3. data without direct or indirect patient identifiers may be released on request.

Recipients of CHARS data with either direct or indirect identifiers must agree in a written data use agreement to take steps to protect direct and indirect patient-identifying information as described in the agreement, and not re-disclose the data except as authorized in their agreement. Recipients of CHARS data without direct identifiers are prohibited from attempting to identify persons whose information is included in the data set or using the data in any manner that identifies individuals or their families. DOH must consider national standards when adopting rules necessary to implement the new confidentiality standards.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill strengthens patient privacy protection and maintains broad public access to CHARS data. This bill allows DOH to share data containing direct patient identifiers with government agencies under a data use agreement, which it is currently unable to do. Researchers applying CHARS data await clarification on the applicable confidentiality rules. An emergency clause making the new confidentiality rules effective immediately would help guide those research projects. Hospitals supply CHARS data, use the data to further patient safety efforts, and support protecting sensitive patient information.

Persons Testifying: PRO: John Wiesman, Secretary, DOH; Margaret Shepherd, University of WA; Lisa Thatcher, WA State Hospital Assn.; Kristen Rogers, Providence Health & Services.