
SENATE BILL 5514

State of Washington

65th Legislature

2017 Regular Session

By Senators Rivers, Cleveland, and Keiser; by request of Department of Health

Read first time 01/26/17. Referred to Committee on Health Care.

1 AN ACT Relating to rapid health information network data
2 reporting; and adding a new section to chapter 43.70 RCW.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** A new section is added to chapter 43.70
5 RCW to read as follows:

6 (1) The legislature finds that public health data is critical to
7 the department's ability to respond to emerging public health threats
8 and chronic conditions affecting the public health and, therefore,
9 intends that the department be fully informed about emerging public
10 health threats and chronic conditions that may impact the health of
11 Washington citizens.

12 (2) The department shall require hospitals with emergency
13 departments to submit emergency department patient care information,
14 which must be collected, maintained, analyzed, and disseminated by
15 the department. The department shall also accept other data types
16 submitted voluntarily as approved by the department. The data must be
17 collected in a way that allows automated reporting by electronic
18 transmission. Emergency departments submitting data must be able to
19 obtain their data from the collection system within thirty minutes of
20 submission of a query for the data once the data is available in the
21 system. The department shall, if deemed cost-effective and efficient,

1 contract with a private entity for any or all parts of data
2 collection. The private contractor must have:

3 (a) A demonstrated ability to collect the data required by this
4 section in a way that allows automated reporting by electronic
5 transmission;

6 (b) An established data submission arrangement with the majority
7 of emergency departments required to submit data pursuant to this
8 section;

9 (c) The demonstrated ability to allow emergency departments
10 submitting data to immediately obtain their own data and the
11 department to immediately obtain any data within thirty minutes of
12 submission of a query for data once the data is available in the
13 system; and

14 (d) The capacity to work with existing emergency department data
15 systems to minimize administrative reporting burden and costs.

16 (3) Data elements must be reported in conformance with a uniform
17 reporting system established by the department in collaboration with
18 representatives from emergency departments required to submit data
19 pursuant to this section and in conformance with current or emerging
20 national standards for reporting similar data. Data elements to be
21 initially collected include, but are not limited to, data elements
22 identifying facility information, limited patient identifiers,
23 patient demographics, and encounter, clinical, and laboratory
24 information. In order to ensure meaningful public health
25 surveillance, after consulting with emergency departments required to
26 submit data pursuant to this section, the department shall adopt
27 rules including, but not limited to, data element and format
28 requirements and time frames for reporting and addressing errors in
29 submission. The rules adopted shall support alignment with current or
30 emerging national standards for reporting similar data and
31 minimization of administrative burden and costs.

32 (4) The department may require additional information from data
33 providers only for the purposes of validating data received,
34 verifying data accuracy, conducting surveillance of potential public
35 health threats, and addressing potential public health threats.

36 (5) The data collected, maintained, and analyzed by the
37 department must only be available for retrieval in original or
38 processed form to public and private requestors pursuant to
39 subsection (6) of this section and must be available within a
40 reasonable period of time after the date of request, except that

1 emergency departments submitting data pursuant to this section must
2 have the ability to immediately obtain their own data within thirty
3 minutes of submission of a query for data once the data is available
4 in the system. The cost of retrieving their own data in standardized
5 reports for state, local, tribal, federal officials and agencies, and
6 health care facilities, and health care providers associated with the
7 emergency departments submitting data pursuant to this section, must
8 be funded through the agency's resources. The cost of retrieving data
9 for individuals and organizations engaged in research or private use
10 of data or reports must be funded by a fee schedule developed by the
11 department that reflects the direct cost of retrieving the data or
12 report in the requested form.

13 (6) The department must maintain the confidentiality of patient
14 data it collects under subsection (2) of this section. Patient data
15 collected by the department is health care information under chapter
16 70.02 RCW. Patient data that includes direct and indirect identifiers
17 is not subject to public inspection and copying and the department
18 may only release that data as allowed for in this section. Any agency
19 that receives patient data under (a) or (b) of this subsection must
20 also maintain the confidentiality of the data and may not release the
21 data except as consistent with subsection (7)(b) of this section. The
22 department may release the data as follows:

23 (a) Data that includes direct and indirect patient identifiers,
24 as specifically defined in rule, may be released to:

25 (i)(A) Federal, Washington state, tribal, and local government
26 agencies upon receipt of a signed data use agreement with the
27 department;

28 (B) In the case of an emergent public health threat, the signed
29 data use agreement requirement must be waived for public health
30 authorities. The department may disclose only the minimum amount of
31 information necessary, to the fewest number of people, for the least
32 amount of time required to address the threat;

33 (ii) Researchers with approval of the Washington state
34 institutional review board or another institutional review board upon
35 receipt of a signed confidentiality agreement with the department;

36 (b) Data that does not contain direct patient identifiers but may
37 contain indirect patient identifiers may be released to agencies,
38 institutional review board-approved researchers, and other persons
39 upon receipt of a signed data use agreement with the department;

1 (c) Data that does not contain direct or indirect patient
2 identifiers may be released on request.

3 (7) Recipients of data under subsection (6)(a) and (b) of this
4 section must agree in a data use agreement, as applicable, at a
5 minimum, to:

6 (a) Take steps to protect direct and indirect patient identifiers
7 as described in the data use agreement; and

8 (b) Not redisclose the data except as authorized in their data
9 use agreement consistent with the purpose of the agreement.

10 (8) Recipients of data under subsection (6)(b) and (c) of this
11 section must not attempt to determine the identity of persons whose
12 information is included in the data set or use the data in any manner
13 that identifies individuals or their families.

14 (9) For the purposes of this section:

15 (a) "Direct patient identifier" means information that identifies
16 a patient; and

17 (b) "Indirect patient identifier" means information that may
18 identify a patient when combined with other information.

19 (10) The department may adopt rules necessary to carry out its
20 responsibilities under this section. The department must consider
21 national standards when adopting rules.

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