
HOUSE BILL 2568

State of Washington 52nd Legislature 1992 Regular Session

By Representatives Appelwick, Morris, Moyer and Paris

Read first time 01/22/92. Referred to Committee on Health Care.

1 AN ACT Relating to public records; and amending RCW 70.02.010,
2 70.02.020, 70.02.030, 70.02.050, 70.02.060, and 70.02.080.

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

4 **Sec. 1.** RCW 70.02.010 and 1991 c 335 s 102 are each amended to
5 read as follows:

6 As used in this chapter, unless the context otherwise requires:

7 (1) "Audit" means an assessment, evaluation, determination, or
8 investigation of a health care provider by a person not employed by or
9 affiliated with the provider to determine compliance with:

10 (a) Statutory, regulatory, fiscal, medical, or scientific
11 standards;

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

14 (c) Requirements for licensing, accreditation, or certification.

1 (2) "Directory information" means information disclosing the
2 presence, and for the purpose of identification, the name, residence,
3 sex, and the general health condition of a particular patient who is a
4 patient in a health care facility or who is currently receiving
5 emergency health care in a health care facility.

6 (3) "General health condition" means the patient's health status
7 described in terms of "critical," "poor," "fair," "good," "excellent,"
8 or terms denoting similar conditions.

9 (4) "Health care" means any care, service, or procedure provided by
10 a health care provider:

11 (a) To diagnose, treat, or maintain a patient's physical or mental
12 condition; or

13 (b) That affects the structure or any function of the human body.

14 (5) "Health care facility" means a hospital, clinic, nursing home,
15 laboratory, office, or similar place where a health care provider
16 provides health care to patients.

17 (6) "Health care information" means any information, whether oral
18 or recorded in any form or medium, that identifies or can readily be
19 associated with the identity of a patient and directly relates to the
20 patient's health care. The term includes any record of disclosures of
21 health care information.

22 (7) "Health care provider" means a person who is licensed,
23 certified, registered, or otherwise authorized by the law of this state
24 to provide health care in the ordinary course of business or practice
25 of a profession.

26 (8) "Institutional review board" means any board, committee, or
27 other group formally designated by an institution, or authorized under
28 federal or state law, to review, approve the initiation of, or conduct
29 periodic review of research programs to assure the protection of the
30 rights and welfare of human research subjects.

1 (9) "Maintain," as related to health care information, means to
2 hold, possess, preserve, retain, store, or control that information.

3 (10) "Patient" means an individual who receives or has received
4 health care. The term includes a deceased individual who has received
5 health care.

6 (11) "Person" means an individual, corporation, business trust,
7 estate, trust, partnership, association, joint venture, government,
8 governmental subdivision or agency, or any other legal or commercial
9 entity.

10 (12) "Reasonable fee" means the charges for duplicating or
11 searching the record specified in RCW 36.18.020 (8) or (16),
12 respectively. However, where editing of records by a health care
13 provider is required by statute and is done by the provider personally,
14 the fee may be the usual and customary charge for a basic office visit.

15 **Sec. 2.** RCW 70.02.020 and 1991 c 335 s 201 are each amended to
16 read as follows:

17 Except as authorized in RCW 70.02.050, a health care provider, an
18 individual who assists a health care provider in the delivery of health
19 care, or an agent and employee of a health care provider may not
20 disclose health care information about a patient to any other person
21 without the patient's written authorization. A disclosure made under
22 a patient's written authorization must conform to the authorization.

23 Health care providers or facilities shall chart all disclosures,
24 except to third-party (~~health—care~~) payors, of health care
25 information, such chartings to become part of the health care
26 information.

27 **Sec. 3.** RCW 70.02.030 and 1991 c 335 s 202 are each amended to
28 read as follows:

1 (1) A patient may authorize a health care provider to disclose the
2 patient's health care information. A health care provider shall honor
3 an authorization and, if requested, provide a copy of the recorded
4 health care information unless the health care provider denies the
5 patient access to health care information under RCW 70.02.090.

6 (2) A health care provider may charge a reasonable fee(~~(, not to~~
7 ~~exceed the health care provider's actual cost))~~ for providing the
8 health care information(~~(,)~~) and is not required to honor an
9 authorization until the fee is paid.

10 (3) To be valid, a disclosure authorization to a health care
11 provider shall:

12 (a) Be in writing, dated, and signed by the patient;

13 (b) Identify the nature of the information to be disclosed;

14 (c) Identify the name, address, and institutional affiliation of
15 the person to whom the information is to be disclosed;

16 (d) Identify the provider who is to make the disclosure; and

17 (e) Identify the patient.

18 (4) Except as provided by this chapter, the signing of an
19 authorization by a patient is not a waiver of any rights a patient has
20 under other statutes, the rules of evidence, or common law.

21 (5) A health care provider shall retain each authorization or
22 revocation in conjunction with any health care information from which
23 disclosures are made. This requirement shall not apply to disclosures
24 to third-party (~~(health care))~~ payors.

25 (6) Except for authorizations to provide information to third-party
26 (~~(health care))~~ payors, an authorization may not permit the release of
27 health care information relating to future health care that the patient
28 receives more than ninety days after the authorization was signed.
29 Patients shall be advised of the period of validity of their
30 authorization on the disclosure authorization form. If the

1 authorization does not contain an expiration date, it expires ninety
2 days after it is signed.

3 ~~((7) Except for authorizations to provide information to third-~~
4 ~~party health payors, an authorization in effect on July 28, 1991,~~
5 ~~remains valid for six months after July 28, 1991, unless an earlier~~
6 ~~date is specified or it is revoked under RCW 70.02.040. Health care~~
7 ~~information disclosed under such an authorization is otherwise subject~~
8 ~~to this chapter. An authorization written after July 28, 1991, becomes~~
9 ~~invalid after the expiration date contained in the authorization, which~~
10 ~~may not exceed ninety days. If the authorization does not contain an~~
11 ~~expiration date, it expires ninety days after it is signed.))~~

12 **Sec. 4.** RCW 70.02.050 and 1991 c 335 s 204 are each amended to
13 read as follows:

14 (1) A health care provider may disclose health care information
15 about a patient without the patient's authorization to the extent a
16 recipient needs to know the information, if the disclosure is:

17 (a) To a person who the provider reasonably believes is providing
18 health care to the patient;

19 (b) To any other person who requires health care information for
20 health care education, or to provide planning, quality assurance, peer
21 review, or administrative, legal, financial, or actuarial services to
22 the health care provider; or for assisting the health care provider in
23 the delivery of health care and the health care provider reasonably
24 believes that the person:

25 (i) Will not use or disclose the health care information for any
26 other purpose; and

27 (ii) Will take appropriate steps to protect the health care
28 information;

1 (c) To any other health care provider reasonably believed to have
2 previously provided health care to the patient, to the extent necessary
3 to provide health care to the patient, unless the patient has
4 instructed the health care provider in writing not to make the
5 disclosure;

6 (d) To any person if the health care provider reasonably believes
7 that disclosure will avoid or minimize an imminent danger to the health
8 or safety of the patient or any other individual, however there is no
9 obligation under this chapter on the part of the provider to so
10 disclose;

11 (e) Oral, and made to immediate family members of the patient, or
12 any other individual with whom the patient is known to have a close
13 personal relationship, if made in accordance with good medical or other
14 professional practice, unless the patient has instructed the health
15 care provider in writing not to make the disclosure;

16 (f) To a health care provider who is the successor in interest to
17 the health care provider maintaining the health care information;

18 (g) For use in a research project that an institutional review
19 board has determined:

20 (i) Is of sufficient importance to outweigh the intrusion into the
21 privacy of the patient that would result from the disclosure;

22 (ii) Is impracticable without the use or disclosure of the health
23 care information in individually identifiable form;

24 (iii) Contains reasonable safeguards to protect the information
25 from redisclosure;

26 (iv) Contains reasonable safeguards to protect against identifying,
27 directly or indirectly, any patient in any report of the research
28 project; and

29 (v) Contains procedures to remove or destroy at the earliest
30 opportunity, consistent with the purposes of the project, information

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

4 (h) To a person who obtains information for purposes of an audit,
5 if that person agrees in writing to:

6 (i) Remove or destroy, at the earliest opportunity consistent with
7 the purpose of the audit, information that would enable the patient to
8 be identified; and

9 (ii) Not to disclose the information further, except to accomplish
10 the audit or report unlawful or improper conduct involving fraud in
11 payment for health care by a health care provider or patient, or other
12 unlawful conduct by the health care provider;

13 (i) To an official of a penal or other custodial institution in
14 which the patient is detained;

15 (j) To provide directory information, unless the patient has
16 instructed the health care provider not to make the disclosure;

17 (k) To provide, in cases of public record, name, residence, sex,
18 age, occupation, condition, diagnosis or extent and location of
19 injuries as determined by a physician, and whether the patient was
20 conscious when admitted.

21 (l) To a third party payor for the purpose of payment for health
22 care.

23 (2) A health care provider shall disclose health care information
24 about a patient without the patient's authorization if the disclosure
25 is:

26 (a) To federal, state, or local public health authorities, to the
27 extent the health care provider is required by law to report health
28 care information; when needed to determine compliance with state or
29 federal licensure, certification or registration rules or laws; or when
30 needed to protect the public health;

1 (b) To federal, state, or local law enforcement authorities to the
2 extent the health care provider is required by law;

3 (c) Pursuant to compulsory process in accordance with RCW
4 70.02.060.

5 (3) All state or local agencies obtaining patient health care
6 information pursuant to this section shall adopt rules establishing
7 their record acquisition, retention, and security policies that are
8 consistent with this chapter.

9 **Sec. 5.** RCW 70.02.060 and 1991 c 335 s 205 are each amended to
10 read as follows:

11 (1) Before service of a discovery request or compulsory process on
12 a health care provider for health care information, an attorney shall
13 provide advance notice to the health care provider and the patient or
14 the patient's attorney involved through service of process or first
15 class mail, indicating the health care provider from whom the
16 information is sought, what health care information is sought, and the
17 date by which a protective order must be obtained to prevent the health
18 care provider from complying. Such date shall give the patient and the
19 health care provider adequate time to seek a protective order, but in
20 no event be less than fourteen days since the date of service or
21 delivery to the patient and the health care provider of the foregoing.
22 Thereafter the request for discovery or compulsory process shall be
23 served on the health care provider.

24 (2) Without the written consent of the patient, the health care
25 provider may not disclose the health care information sought under
26 subsection (1) of this section if the requestor has not complied with
27 the requirements of subsection (1) of this section. In the absence of
28 a protective order issued by a court of competent jurisdiction
29 forbidding compliance, the health care provider shall disclose the

1 information in accordance with this chapter. In the case of
2 compliance, the request for discovery or compulsory process shall be
3 made a part of the patient record.

4 (3) Production of health care information under this section, in
5 and of itself, does not constitute a waiver of any privilege,
6 objection, or defense existing under other law or rule of evidence or
7 procedure.

8 (4) The health care provider may charge a reasonable fee for
9 providing the health care information.

10 **Sec. 6.** RCW 70.02.080 and 1991 c 335 s 301 are each amended to
11 read as follows:

12 (1) Upon receipt of a written request from a patient to examine or
13 copy all or part of the patient's recorded health care information, a
14 health care provider, as promptly as required under the circumstances,
15 but no later than fifteen working days after receiving the request
16 shall:

17 (a) Make the information available for examination during regular
18 business hours and provide a copy, if requested, to the patient;

19 (b) Inform the patient if the information does not exist or cannot
20 be found;

21 (c) If the health care provider does not maintain a record of the
22 information, inform the patient and provide the name and address, if
23 known, of the health care provider who maintains the record;

24 (d) If the information is in use or unusual circumstances have
25 delayed handling the request, inform the patient and specify in writing
26 the reasons for the delay and the earliest date, not later than twenty-
27 one working days after receiving the request, when the information will
28 be available for examination or copying or when the request will be
29 otherwise disposed of; or

1 (e) Deny the request, in whole or in part, under RCW 70.02.090 and
2 inform the patient.

3 (2) Upon request, the health care provider shall provide an
4 explanation of any code or abbreviation used in the health care
5 information. If a record of the particular health care information
6 requested is not maintained by the health care provider in the
7 requested form, the health care provider is not required to create a
8 new record or reformulate an existing record to make the health care
9 information available in the requested form. The health care provider
10 may charge a reasonable fee(~~(, not to exceed the health care provider's~~
11 ~~actual cost,)) for providing the health care information and is not
12 required to permit examination or copying until the fee is paid.~~