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SUBSTITUTE HOUSE BILL 1477

State of Washington 65th Legislature 2017 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Kilduff, Muri, Lytton, Stambaugh, Orwall, McDonald, Robinson, Lovick, Goodman, Sells, Appleton, and Fey)

READ FIRST TIME 02/17/17.

- AN ACT Relating to disclosure of health-related information with persons with a close relationship with a patient; amending RCW 70.02.050, 70.02.200, 70.02.220, and 70.02.230; reenacting and amending RCW 70.02.230; adding a new section to chapter 70.02 RCW; providing an effective date; and providing an expiration date.
- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 7 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 70.02 8 RCW to read as follows:
 - (1)(a) A health care provider or health care facility may use or disclose the health care information of a patient without obtaining an authorization from the patient or the patient's personal representative if the conditions in (b) of this subsection are met and:
- (i) The disclosure is to a family member, including a patient's state registered domestic partner, other relative, a close personal friend, or other person identified by the patient, and the health care information is directly relevant to the person's involvement with the patient's health care or payment related to the patient's health care; or
- 20 (ii) The disclosure or use is for the purpose of notifying, or 21 assisting in the notification of, a family member, a personal

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representative of the patient, or another person responsible for the care of the patient of the patient's location, general condition, or death.

- (b) A health care provider or health care facility may make the disclosures and uses described in (a) of this subsection if:
- 6 (i) The patient is not present or the opportunity to agree or 7 object to the disclosure cannot practicably be provided because of the patient's incapacity or an emergency circumstance, the health 8 care provider or health care facility may in the exercise of 9 professional judgment, determine whether the disclosure is in the 10 best interests of the patient and, if so, disclose only the health 11 care information that is directly relevant to the person's 12 involvement with the patient's health care. A health care provider or 13 health care facility may use professional judgment and its experience 14 with common practice to make reasonable inferences of the patient's 15 best interest in allowing a person to act on behalf of the patient to 16 pick up filled prescriptions, medical supplies, x-rays, or other 17 similar forms of health care information; or 18
 - (ii) The patient is present for, or otherwise available prior to, the disclosure and has the capacity to make health care decisions, the health care provider or health care facility may disclose the information if it:
 - (A) Obtains the patient's agreement;

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- (B) Provides the patient with the opportunity to object to the disclosure, and the patient does not express an objection; or
- (C) Reasonably infers from the circumstances, based on the exercise of professional judgment, that the patient does not object to the disclosure.
- (2) With respect to a patient who is receiving services from a health care provider for mental illness, the health care information disclosed under this section may include, to the extent consistent with the health care provider's professional judgment and standards of ethical conduct:
 - (a) The patient's diagnoses and the treatment recommendations;
- (b) Issues concerning the safety of the patient, including risk factors for suicide, steps that can be taken to make the patient's home safer, and a safety plan to monitor and support the patient;
- (c) Information about resources that are available in the community to help the patient, such as case management and support groups; and

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1 (d) The process to ensure that the patient safely transitions to 2 a higher or lower level of care, including an interim safety plan.

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- (3) Any disclosure or use of health care information under this section must be limited to the minimum necessary to accomplish the purpose of the disclosure or use.
- 6 (4) A health care provider or health care facility who discloses 7 health care information under this section must document in the 8 patient's medical record the fact and date of the disclosure, to whom 9 the disclosure was made, and what health care information was 10 disclosed.
- 11 (5) A health care provider or health care facility is not subject 12 to any civil liability for making or not making a disclosure or use 13 in accordance with this section.
- 14 **Sec. 2.** RCW 70.02.050 and 2014 c 220 s 6 are each amended to 15 read as follows:
 - (1) A health care provider or health care facility may disclose health care information, except for information and records related to sexually transmitted diseases which are addressed in RCW 70.02.220, about a patient without the patient's authorization to the extent a recipient needs to know the information, if the disclosure is:
- 22 (a) To a person who the provider or facility reasonably believes 23 is providing health care to the patient;
 - (b) To any other person who requires health care information for health care education, or to provide planning, quality assurance, peer review, or administrative, legal, financial, actuarial services to, or other health care operations for or on behalf of the health care provider or health care facility; or for assisting the health care provider or health care facility in the delivery of health care and the health care provider or health care facility reasonably believes that the person:
- 32 (i) Will not use or disclose the health care information for any 33 other purpose; and
- 34 (ii) Will take appropriate steps to protect the health care 35 information;
- 36 (c) To any person if the health care provider or health care facility ((reasonably)) believes, in good faith, that disclosure ((will avoid or minimize an imminent danger)) or use is necessary to prevent or lessen a serious and imminent threat to the health or

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- safety of ((the patient or any other individual, however)) a person or the public, and the information is disclosed only to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat. There is no obligation under this chapter on the part of the provider or facility to so disclose((. The fact of admission to a provider for mental health services and all information and records compiled, obtained, or maintained in the course of providing mental health services to either voluntary or involuntary recipients of services at public or private agencies is not subject to disclosure unless disclosure is permitted in RCW 70.02.230)); or
 - (d) For payment, including information necessary for a recipient to make a claim, or for a claim to be made on behalf of a recipient for aid, insurance, or medical assistance to which he or she may be entitled.
 - (2) A health care provider shall disclose health care information, except for information and records related to sexually transmitted diseases, unless otherwise authorized in RCW 70.02.220, 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 to investigate unprofessional conduct or ability to practice with reasonable skill and safety under chapter 18.130 RCW. Any health care information obtained under this subsection is exempt from public inspection and copying pursuant to chapter 42.56 RCW; or
 - (b) When needed to protect the public health.

- **Sec. 3.** RCW 70.02.200 and 2015 c 267 s 7 are each amended to 31 read as follows:
 - (1) In addition to the disclosures authorized by RCW 70.02.050 and 70.02.210, a health care provider or health care facility may disclose health care information, except for information and records related to sexually transmitted diseases and information related to mental health services which are addressed by RCW 70.02.220 through 70.02.260, about a patient without the patient's authorization, to:
- 38 (a) Any other health care provider or health care facility 39 reasonably believed to have previously provided health care to the

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patient, to the extent necessary to provide health care to the patient, unless the patient has instructed the health care provider or health care facility in writing not to make the disclosure;

- (b) ((Immediate family members of the patient, including a patient's state registered domestic partner, 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 or health care facility in writing not to make the disclosure;
- (c)) A health care provider or health care facility who is the successor in interest to the health care provider or health care facility maintaining the health care information;
 - $((\frac{d}{d}))$ (c) 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;
- (((e))) <u>(d)</u> Provide directory information, unless the patient has instructed the health care provider or health care facility not to make the disclosure;
 - ((f))) <u>(e)</u> Fire, police, sheriff, or other public authority, that brought, or caused to be brought, the patient to the health care facility or health care provider if the disclosure is limited to the patient's name, residence, sex, age, occupation, condition, diagnosis, estimated or actual discharge date, or extent and location of injuries as determined by a physician, and whether the patient was conscious when admitted;
 - (((g))) <u>(f)</u> Federal, state, or local law enforcement authorities and the health care provider, health care facility, or third-party payor believes in good faith that the health care information disclosed constitutes evidence of criminal conduct that occurred on the premises of the health care provider, health care facility, or third-party payor;
- $((\frac{h}{h}))$ (g) Another health care provider, health care facility, or third-party payor for the health care operations of the health care provider, health care facility, or third-party payor that

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- receives the information, if each entity has or had a relationship with the patient who is the subject of the health care information being requested, the health care information pertains to such relationship, and the disclosure is for the purposes described in RCW 70.02.010(17) (a) and (b);
- 6 (((i))) <u>(h)</u> An official of a penal or other custodial institution 7 in which the patient is detained; and
 - (((j))) <u>(i)</u> Any law enforcement officer, corrections officer, or guard supplied by a law enforcement or corrections agency who is accompanying a patient pursuant to RCW 10.110.020, only to the extent the disclosure is incidental to the fulfillment of the role of the law enforcement officer, corrections officer, or guard under RCW 10.110.020.
 - (2) In addition to the disclosures required by RCW 70.02.050 and 70.02.210, a health care provider shall disclose health care information, except for information related to sexually transmitted diseases and information related to mental health services which are addressed by RCW 70.02.220 through 70.02.260, about a patient without the patient's authorization if the disclosure is:
- 20 (a) To federal, state, or local law enforcement authorities to 21 the extent the health care provider is required by law;
 - (b) To federal, state, or local law enforcement authorities, upon receipt of a written or oral request made to a nursing supervisor, administrator, or designated privacy official, in a case in which the patient is being treated or has been 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, an ice pick, or any other sharp or pointed instrument which federal, state, or local law enforcement authorities reasonably believe to have been intentionally inflicted upon a person, or a blunt force injury that federal, state, or local law enforcement authorities reasonably believe resulted from a criminal act, the following information, if known:
 - (i) The name of the patient;
 - (ii) The patient's residence;
- 36 (iii) The patient's sex;
- 37 (iv) The patient's age;

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- 38 (v) The patient's condition;
- (vi) The patient's diagnosis, or extent and location of injuries as determined by a health care provider;

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- 1 (vii) Whether the patient was conscious when admitted;
- 2 (viii) The name of the health care provider making the determination in (b)(v), (vi), and (vii) of this subsection;
- 4 (ix) Whether the patient has been transferred to another 5 facility; and
 - (x) The patient's discharge time and date;

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- 7 (c) Pursuant to compulsory process in accordance with RCW 8 70.02.060.
- 9 **Sec. 4.** RCW 70.02.220 and 2013 c 200 s 6 are each amended to 10 read as follows:
 - (1) No person may disclose or be compelled to disclose the identity of any person who has investigated, considered, or requested a test or treatment for a sexually transmitted disease, except as authorized by this section, RCW 70.02.210, or chapter 70.24 RCW.
 - (2) No person may disclose or be compelled to disclose information and records related to sexually transmitted diseases, except as authorized by this section, RCW 70.02.210, section 1 of this act, or chapter 70.24 RCW. A person may disclose information related to sexually transmitted diseases about a patient without the patient's authorization, to the extent a recipient needs to know the information, if the disclosure is to:
- 22 (a) The subject of the test or the subject's legal representative 23 for health care decisions in accordance with RCW 7.70.065, with the 24 exception of such a representative of a minor fourteen years of age 25 or over and otherwise competent;
 - (b) The state public health officer as defined in RCW 70.24.017, a local public health officer, or the centers for disease control of the United States public health service in accordance with reporting requirements for a diagnosed case of a sexually transmitted disease;
- (c) A health facility or health care provider that procures, processes, distributes, or uses: (i) A human body part, tissue, or blood from a deceased person with respect to medical information regarding that person; (ii) semen, including that was provided prior to March 23, 1988, for the purpose of artificial insemination; or (iii) blood specimens;
- 36 (d) Any state or local public health officer conducting an investigation pursuant to RCW 70.24.024, so long as the record was 38 obtained by means of court-ordered HIV testing pursuant to RCW 70.24.340 or 70.24.024;

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(e) A person allowed access to the record by a court order granted after application showing good cause therefor. In assessing good cause, the court shall weigh the public interest and the need for disclosure against the injury to the patient, to the physicianpatient relationship, and to the treatment services. Upon the granting of the order, the court, in determining the extent to which any disclosure of all or any part of the record of any such test is necessary, shall impose appropriate safeguards against unauthorized order authorizing disclosure must: disclosure. An disclosure to those parts of the patient's record deemed essential to fulfill the objective for which the order was granted; (ii) limit disclosure to those persons whose need for information is the basis for the order; and (iii) include any other appropriate measures to keep disclosure to a minimum for the protection of the patient, the physician-patient relationship, and the treatment services;

- (f) Persons who, because of their behavioral interaction with the infected individual, have been placed at risk for acquisition of a sexually transmitted disease, as provided in RCW 70.24.022, if the health officer or authorized representative believes that the exposed person was unaware that a risk of disease exposure existed and that the disclosure of the identity of the infected person is necessary;
- (g) A law enforcement officer, firefighter, health care provider, health care facility staff person, department of correction's staff person, jail staff person, or other persons as defined by the board of health in rule pursuant to RCW 70.24.340(4), who has requested a test of a person whose bodily fluids he or she has been substantially exposed to, pursuant to RCW 70.24.340(4), if a state or local public health officer performs the test;
- (h) Claims management personnel employed by or associated with an insurer, health care service contractor, health maintenance organization, self-funded health plan, state administered health care claims payer, or any other payer of health care claims where such disclosure is to be used solely for the prompt and accurate evaluation and payment of medical or related claims. Information released under this subsection must be confidential and may not be released or available to persons who are not involved in handling or determining medical claims payment; and
- (i) A department of social and health services worker, a child placing agency worker, or a guardian ad litem who is responsible for making or reviewing placement or case-planning decisions or

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- recommendations to the court regarding a child, who is less than fourteen years of age, has a sexually transmitted disease, and is in the custody of the department of social and health services or a licensed child placing agency. This information may also be received by a person responsible for providing residential care for such a б child when the department of social and health services or a licensed child placing agency determines that it is necessary for the provision of child care services.
 - (3) No person to whom the results of a test for a sexually transmitted disease have been disclosed pursuant to subsection (2) of this section may disclose the test results to another person except as authorized by that subsection.

- (4) The release of sexually transmitted disease information regarding an offender or detained person, except as provided in subsection (2)(d) of this section, is governed as follows:
- (a) The sexually transmitted disease status of a department of corrections offender who has had a mandatory test conducted pursuant to RCW 70.24.340(1), 70.24.360, or 70.24.370 must be made available by department of corrections health care providers and local public health officers to the department of corrections health care administrator or infection control coordinator of the facility in which the offender is housed. The information made available to the health care administrator or the infection control coordinator under this subsection (4)(a) may be used only for disease prevention or control and for protection of the safety and security of the staff, offenders, and the public. The information may be submitted to transporting officers and receiving facilities, including facilities that are not under the department of corrections' jurisdiction according to the provisions of (d) and (e) of this subsection.
- (b) The sexually transmitted disease status of a person detained in a jail who has had a mandatory test conducted pursuant to RCW 70.24.340(1), 70.24.360, or 70.24.370 must be made available by the local public health officer to a jail health care administrator or infection control coordinator. The information made available to a health care administrator under this subsection (4)(b) may be used only for disease prevention or control and for protection of the safety and security of the staff, offenders, detainees, and the public. The information may be submitted to transporting officers and receiving facilities according to the provisions of (d) and (e) of this subsection.

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(c) Information regarding the sexually transmitted disease status of an offender or detained person is confidential and may be disclosed by a correctional health care administrator or infection control coordinator or local jail health care administrator or infection control coordinator only as necessary for disease prevention or control and for protection of the safety and security of the staff, offenders, and the public. Unauthorized disclosure of this information to any person may result in disciplinary action, in addition to the penalties prescribed in RCW 70.24.080 or any other penalties as may be prescribed by law.

- (d) Notwithstanding the limitations on disclosure contained in (a), (b), and (c) of this subsection, whenever any member of a jail staff or department of corrections staff has been substantially exposed to the bodily fluids of an offender or detained person, then the results of any tests conducted pursuant to RCW 70.24.340(1), 70.24.360, or 70.24.370, must be immediately disclosed to the staff person in accordance with the Washington Administrative Code rules governing employees' occupational exposure to blood-borne pathogens. Disclosure must be accompanied by appropriate counseling for the staff member, including information regarding follow-up testing and treatment. Disclosure must also include notice that subsequent disclosure of the information in violation of this chapter or use of the information to harass or discriminate against the offender or detainee may result in disciplinary action, in addition to the penalties prescribed in RCW 70.24.080, and imposition of other penalties prescribed by law.
 - (e) The staff member must also be informed whether the offender or detained person had any other communicable disease, as defined in RCW 72.09.251(3), when the staff person was substantially exposed to the offender's or detainee's bodily fluids.
 - (f) The test results of voluntary and anonymous HIV testing or HIV-related condition, as defined in RCW 70.24.017, may not be disclosed to a staff person except as provided in this section and RCW $70.02.050(1)((\frac{1}{2}))$ (d) and 70.24.340(4). A health care administrator or infection control coordinator may provide the staff member with information about how to obtain the offender's or detainee's test results under this section and RCW $70.02.050(1)((\frac{1}{2}))$ (d) and 70.24.340(4).
 - (5) The requirements of this section do not apply to the customary methods utilized for the exchange of medical information

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among health care providers in order to provide health care services to the patient, nor do they apply within health care facilities where there is a need for access to confidential medical information to fulfill professional duties.

- (6) Upon request of the victim, disclosure of test results under this section to victims of sexual offenses under chapter 9A.44 RCW must be made if the result is negative or positive. The county prosecuting attorney shall notify the victim of the right to such disclosure. The disclosure must be accompanied by appropriate counseling, including information regarding follow-up testing.
- (7) A person, including a health care facility or health care provider, shall disclose the identity of any person who has investigated, considered, or requested a test or treatment for a sexually transmitted disease and information and records related to sexually transmitted diseases to federal, state, or local public health authorities, to the extent the health care provider required by law to report health care information; when needed to determine compliance with state or federal certification registration rules or laws; or when needed to protect the public health. Any health care information obtained under this subsection is exempt from public inspection and copying pursuant to chapter 42.56 RCW.
- **Sec. 5.** RCW 70.02.230 and 2014 c 225 s 71 and 2014 c 220 s 9 are 24 each reenacted and amended to read as follows:
 - (1) Except as provided in this section, RCW 70.02.050, 71.05.445, ((70.96A.150,)) 74.09.295, 70.02.210, 70.02.240, 70.02.250, ((and)) 70.02.260, and section 1 of this act, or pursuant to a valid authorization under RCW 70.02.030, the fact of admission to a provider for mental health services and all information and records compiled, obtained, or maintained in the course of providing mental health services to either voluntary or involuntary recipients of services at public or private agencies must be confidential.
 - (2) Information and records related to mental health services, other than those obtained through treatment under chapter 71.34 RCW, may be disclosed only:
 - (a) In communications between qualified professional persons to meet the requirements of chapter 71.05 RCW, in the provision of services or appropriate referrals, or in the course of guardianship proceedings if provided to a professional person:

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1 (i) Employed by the facility;

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- 2 (ii) Who has medical responsibility for the patient's care;
 - (iii) Who is a designated mental health professional;
- 4 (iv) Who is providing services under chapter 71.24 RCW;
- 5 (v) Who is employed by a state or local correctional facility 6 where the person is confined or supervised; or
- 7 (vi) Who is providing evaluation, treatment, or follow-up 8 services under chapter 10.77 RCW;
- 9 (b) When the communications regard the special needs of a patient 10 and the necessary circumstances giving rise to such needs and the 11 disclosure is made by a facility providing services to the operator 12 of a facility in which the patient resides or will reside;
- 13 (c)(i) When the person receiving services, or his or her 14 guardian, designates persons to whom information or records may be 15 released, or if the person is a minor, when his or her parents make 16 such a designation;
- (ii) A public or private agency shall release to a person's next of kin, attorney, personal representative, guardian, or conservator, if any:
- 20 (A) The information that the person is presently a patient in the facility or that the person is seriously physically ill;
 - (B) A statement evaluating the mental and physical condition of the patient, and a statement of the probable duration of the patient's confinement, if such information is requested by the next of kin, attorney, personal representative, guardian, or conservator; and
 - (iii) Other information requested by the next of kin or attorney as may be necessary to decide whether or not proceedings should be instituted to appoint a quardian or conservator;
 - (d)(i) To the courts as necessary to the administration of chapter 71.05 RCW or to a court ordering an evaluation or treatment under chapter 10.77 RCW solely for the purpose of preventing the entry of any evaluation or treatment order that is inconsistent with any order entered under chapter 71.05 RCW.
- 35 (ii) To a court or its designee in which a motion under chapter 36 10.77 RCW has been made for involuntary medication of a defendant for 37 the purpose of competency restoration.
- 38 (iii) Disclosure under this subsection is mandatory for the 39 purpose of the federal health insurance portability and 40 accountability act;

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- (e)(i) When a mental health professional is requested by a representative of a law enforcement or corrections agency, including a police officer, sheriff, community corrections officer, a municipal attorney, or prosecuting attorney to undertake an investigation or provide treatment under RCW 71.05.150, 10.31.110, or 71.05.153, the mental health professional shall, if requested to do so, advise the representative in writing of the results of the investigation including a statement of reasons for the decision to detain or release the person investigated. The written report must be submitted within seventy-two hours of the completion of the investigation or the request from the law enforcement or corrections representative, whichever occurs later.
- (ii) Disclosure under this subsection is mandatory for the purposes of the federal health insurance portability and accountability act;
 - (f) To the attorney of the detained person;

- (g) To the prosecuting attorney as necessary to carry out the responsibilities of the office under RCW 71.05.330(2), 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided access to records regarding the committed person's treatment and prognosis, medication, behavior problems, and other records relevant to the issue of whether treatment less restrictive than inpatient treatment is in the best interest of the committed person or others. Information must be disclosed only after giving notice to the committed person and the person's counsel;
- (h)(i) To appropriate law enforcement agencies and to a person, when the identity of the person is known to the public or private agency, whose health and safety has been threatened, or who is known to have been repeatedly harassed, by the patient. The person may designate a representative to receive the disclosure. The disclosure must be made by the professional person in charge of the public or private agency or his or her designee and must include the dates of commitment, admission, discharge, or release, authorized or unauthorized absence from the agency's facility, and only any other information that is pertinent to the threat or harassment. The agency or its employees are not civilly liable for the decision to disclose or not, so long as the decision was reached in good faith and without gross negligence.

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1 (ii) Disclosure under this subsection is mandatory for the 2 purposes of the federal health insurance portability and 3 accountability act;

- (i)(i) To appropriate corrections and law enforcement agencies all necessary and relevant information in the event of a crisis or emergent situation that poses a significant and imminent risk to the public. The mental health service agency or its employees are not civilly liable for the decision to disclose or not so long as the decision was reached in good faith and without gross negligence.
- (ii) Disclosure under this subsection is mandatory for the purposes of the health insurance portability and accountability act;
- (j) To the persons designated in RCW 71.05.425 for the purposes described in those sections;
- (k) Upon the death of a person. The person's next of kin, personal representative, guardian, or conservator, if any, must be notified. Next of kin who are of legal age and competent must be notified under this section in the following order: Spouse, parents, children, brothers and sisters, and other relatives according to the degree of relation. Access to all records and information compiled, obtained, or maintained in the course of providing services to a deceased patient are governed by RCW 70.02.140;
- (1) To mark headstones or otherwise memorialize patients interred at state hospital cemeteries. The department of social and health services shall make available the name, date of birth, and date of death of patients buried in state hospital cemeteries fifty years after the death of a patient;
- (m) To law enforcement officers and to prosecuting attorneys as are necessary to enforce RCW $9.41.040(2)(a)((\frac{(ii)}{)}))$ (iii). The extent of information that may be released is limited as follows:
- (i) Only the fact, place, and date of involuntary commitment, an official copy of any order or orders of commitment, and an official copy of any written or oral notice of ineligibility to possess a firearm that was provided to the person pursuant to RCW 9.41.047(1), must be disclosed upon request;
- (ii) The law enforcement and prosecuting attorneys may only release the information obtained to the person's attorney as required by court rule and to a jury or judge, if a jury is waived, that presides over any trial at which the person is charged with violating RCW $9.41.040(2)(a)((\frac{(ii)}{(ii)}))$ (iii);

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- (iii) Disclosure under this subsection is mandatory for the purposes of the federal health insurance portability and accountability act;
- (n) When a patient would otherwise be subject to the provisions of this section and disclosure is necessary for the protection of the patient or others due to his or her unauthorized disappearance from the facility, and his or her whereabouts is unknown, notice of the disappearance, along with relevant information, may be made to relatives, the department of corrections when the person is under the supervision of the department, and governmental law enforcement agencies designated by the physician or psychiatric advanced registered nurse practitioner in charge of the patient or the professional person in charge of the facility, or his or her professional designee;
 - (o) Pursuant to lawful order of a court;

- (p) To qualified staff members of the department, to the director of behavioral health organizations, to resource management services responsible for serving a patient, or to service providers designated by resource management services as necessary to determine the progress and adequacy of treatment and to determine whether the person should be transferred to a less restrictive or more appropriate treatment modality or facility;
- (q) Within the mental health service agency where the patient is receiving treatment, confidential information may be disclosed to persons employed, serving in bona fide training programs, or participating in supervised volunteer programs, at the facility when it is necessary to perform their duties;
- (r) Within the department as necessary to coordinate treatment for mental illness, developmental disabilities, alcoholism, or drug abuse of persons who are under the supervision of the department;
- (s) To a licensed physician or psychiatric advanced registered nurse practitioner who has determined that the life or health of the person is in danger and that treatment without the information and records related to mental health services could be injurious to the patient's health. Disclosure must be limited to the portions of the records necessary to meet the medical emergency;
- (t) Consistent with the requirements of the federal health information portability and accountability act, to a licensed mental health professional or a health care professional licensed under chapter 18.71, 18.71A, 18.57, 18.57A, 18.79, or 18.36A RCW who is

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providing care to a person, or to whom a person has been referred for evaluation or treatment, to assure coordinated care and treatment of that person. Psychotherapy notes may not be released without authorization of the person who is the subject of the request for release of information;

- (u) To administrative and office support staff designated to obtain medical records for those licensed professionals listed in (t) of this subsection;
- (v) To a facility that is to receive a person who is involuntarily committed under chapter 71.05 RCW, or upon transfer of the person from one evaluation and treatment facility to another. The release of records under this subsection is limited to the information and records related to mental health services required by law, a record or summary of all somatic treatments, and a discharge summary. The discharge summary may include a statement of the patient's problem, the treatment goals, the type of treatment which has been provided, and recommendation for future treatment, but may not include the patient's complete treatment record;
- (w) To the person's counsel or guardian ad litem, without modification, at any time in order to prepare for involuntary commitment or recommitment proceedings, reexaminations, appeals, or other actions relating to detention, admission, commitment, or patient's rights under chapter 71.05 RCW;
- (x) To staff members of the protection and advocacy agency or to staff members of a private, nonprofit corporation for the purpose of protecting and advocating the rights of persons with mental disorders or developmental disabilities. Resource management services may limit the release of information to the name, birthdate, and county of residence of the patient, information regarding whether the patient was voluntarily admitted, or involuntarily committed, the date and place of admission, placement, or commitment, the name and address of a guardian of the patient, and the date and place of the guardian's appointment. Any staff member who wishes to obtain additional information must notify the patient's resource management services in writing of the request and of the resource management services' right to object. The staff member shall send the notice by mail to the guardian's address. If the guardian does not object in writing within fifteen days after the notice is mailed, the staff member may obtain the additional information. If the guardian objects in writing within

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fifteen days after the notice is mailed, the staff member may not obtain the additional information;

- (y) To all current treating providers of the patient with prescriptive authority who have written a prescription for the patient within the last twelve months. For purposes of coordinating health care, the department may release without written authorization of the patient, information acquired for billing and collection purposes as described in RCW 70.02.050(1)(d). The department shall notify the patient that billing and collection information has been released to named providers, and provide the substance of the information released and the dates of such release. The department may not release counseling, inpatient psychiatric hospitalization, or drug and alcohol treatment information without a signed written release from the client;
- (z)(i) To the secretary of social and health services for either program evaluation or research, or both so long as the secretary adopts rules for the conduct of the evaluation or research, or both. Such rules must include, but need not be limited to, the requirement that all evaluators and researchers sign an oath of confidentiality substantially as follows:

"As a condition of conducting evaluation or research concerning persons who have received services from (fill in the facility, agency, or person) I, , agree not to divulge, publish, or otherwise make known to unauthorized persons or the public any information obtained in the course of such evaluation or research regarding persons who have received services such that the person who received such services is identifiable.

I recognize that unauthorized release of confidential information may subject me to civil liability under the provisions of state law.

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- (ii) Nothing in this chapter may be construed to prohibit the compilation and publication of statistical data for use by government or researchers under standards, including standards to assure maintenance of confidentiality, set forth by the secretary.
- (3) Whenever federal law or federal regulations restrict the release of information contained in the information and records related to mental health services of any patient who receives treatment for chemical dependency, the department may restrict the

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- release of the information as necessary to comply with federal law and regulations.
 - (4) Civil liability and immunity for the release of information about a particular person who is committed to the department of social and health services under RCW 71.05.280(3) and 71.05.320(((3))) (4)(c) after dismissal of a sex offense as defined in RCW 9.94A.030, is governed by RCW 4.24.550.
- (5) The fact of admission to a provider of mental health 8 services, as well as all records, files, evidence, findings, or 9 orders made, prepared, collected, or maintained pursuant to chapter 10 11 71.05 RCW are not admissible as evidence in any legal proceeding 12 outside that chapter without the written authorization of the person who was the subject of the proceeding except as provided in RCW 13 70.02.260, in a subsequent criminal prosecution of a person committed 14 pursuant to RCW 71.05.280(3) or 71.05.320($(\frac{3}{3})$) $(\frac{4}{3})$ on charges 15 16 that were dismissed pursuant to chapter 10.77 RCW due to incompetency 17 to stand trial, in a civil commitment proceeding pursuant to chapter 71.09 RCW, or, in the case of a minor, a guardianship or dependency 18 proceeding. The records and files maintained in any court proceeding 19 pursuant to chapter 71.05 RCW must be confidential and available 20 21 subsequent to such proceedings only to the person who was the subject of the proceeding or his or her attorney. In addition, the court may 22 order the subsequent release or use of such records or files only 23 upon good cause shown if the court finds that appropriate safeguards 24 25 for strict confidentiality are and will be maintained.
 - (6)(a) Except as provided in RCW 4.24.550, any person may bring an action against an individual who has willfully released confidential information or records concerning him or her in violation of the provisions of this section, for the greater of the following amounts:
 - (i) One thousand dollars; or

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- (ii) Three times the amount of actual damages sustained, if any.
- (b) It is not a prerequisite to recovery under this subsection that the plaintiff suffered or was threatened with special, as contrasted with general, damages.
- (c) Any person may bring an action to enjoin the release of confidential information or records concerning him or her or his or her ward, in violation of the provisions of this section, and may in the same action seek damages as provided in this subsection.

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- 1 (d) The court may award to the plaintiff, should he or she 2 prevail in any action authorized by this subsection, reasonable 3 attorney fees in addition to those otherwise provided by law.
- 4 (e) If an action is brought under this subsection, no action may 5 be brought under RCW 70.02.170.
- 6 **Sec. 6.** RCW 70.02.230 and 2016 sp.s. c 29 s 417 are each amended 7 to read as follows:
- (1) Except as provided in this section, RCW 70.02.050, 71.05.445, 8 74.09.295, 70.02.210, 70.02.240, 70.02.250, ((and)) 70.02.260, and 9 section 1 of this act, or pursuant to a valid authorization under RCW 10 11 70.02.030, the fact of admission to a provider for mental health services and all information and records compiled, obtained, 12 13 maintained in the course of providing mental health services to either voluntary or involuntary recipients of services at public or 14 private agencies must be confidential. 15
- 16 (2) Information and records related to mental health services, 17 other than those obtained through treatment under chapter 71.34 RCW, 18 may be disclosed only:
 - (a) In communications between qualified professional persons to meet the requirements of chapter 71.05 RCW, in the provision of services or appropriate referrals, or in the course of guardianship proceedings if provided to a professional person:
 - (i) Employed by the facility;

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- (ii) Who has medical responsibility for the patient's care;
- (iii) Who is a designated crisis responder;
- 26 (iv) Who is providing services under chapter 71.24 RCW;
- (v) Who is employed by a state or local correctional facility where the person is confined or supervised; or
- 29 (vi) Who is providing evaluation, treatment, or follow-up 30 services under chapter 10.77 RCW;
- 31 (b) When the communications regard the special needs of a patient 32 and the necessary circumstances giving rise to such needs and the 33 disclosure is made by a facility providing services to the operator 34 of a facility in which the patient resides or will reside;
- 35 (c)(i) When the person receiving services, or his or her 36 guardian, designates persons to whom information or records may be 37 released, or if the person is a minor, when his or her parents make 38 such a designation;

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- (ii) A public or private agency shall release to a person's next
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- 4 (A) The information that the person is presently a patient in the facility or that the person is seriously physically ill;

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- (B) A statement evaluating the mental and physical condition of the patient, and a statement of the probable duration of the patient's confinement, if such information is requested by the next of kin, attorney, personal representative, guardian, or conservator;
- (iii) Other information requested by the next of kin or attorney as may be necessary to decide whether or not proceedings should be instituted to appoint a guardian or conservator;
 - (d)(i) To the courts as necessary to the administration of chapter 71.05 RCW or to a court ordering an evaluation or treatment under chapter 10.77 RCW solely for the purpose of preventing the entry of any evaluation or treatment order that is inconsistent with any order entered under chapter 71.05 RCW.
- 19 (ii) To a court or its designee in which a motion under chapter 20 10.77 RCW has been made for involuntary medication of a defendant for 21 the purpose of competency restoration.
- (iii) Disclosure under this subsection is mandatory for the purpose of the federal health insurance portability and accountability act;
 - (e)(i) When a mental health professional or designated crisis responder is requested by a representative of a law enforcement or corrections agency, including a police officer, sheriff, community corrections officer, a municipal attorney, or prosecuting attorney to undertake an investigation or provide treatment under RCW 71.05.150, 10.31.110, or 71.05.153, the mental health professional or designated crisis responder shall, if requested to do so, advise the representative in writing of the results of the investigation including a statement of reasons for the decision to detain or release the person investigated. The written report must be submitted within seventy-two hours of the completion of the investigation or the request from the law enforcement or corrections representative, whichever occurs later.
- (ii) Disclosure under this subsection is mandatory for the purposes of the federal health insurance portability and accountability act;

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(f) To the attorney of the detained person;

- (g) To the prosecuting attorney as necessary to carry out the responsibilities of the office under RCW 71.05.330(2), 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided access to records regarding the committed person's treatment and prognosis, medication, behavior problems, and other records relevant to the issue of whether treatment less restrictive than inpatient treatment is in the best interest of the committed person or others. Information must be disclosed only after giving notice to the committed person and the person's counsel;
- (h)(i) To appropriate law enforcement agencies and to a person, when the identity of the person is known to the public or private agency, whose health and safety has been threatened, or who is known to have been repeatedly harassed, by the patient. The person may designate a representative to receive the disclosure. The disclosure must be made by the professional person in charge of the public or private agency or his or her designee and must include the dates of commitment, admission, discharge, or release, authorized or unauthorized absence from the agency's facility, and only any other information that is pertinent to the threat or harassment. The agency or its employees are not civilly liable for the decision to disclose or not, so long as the decision was reached in good faith and without gross negligence.
- (ii) Disclosure under this subsection is mandatory for the purposes of the federal health insurance portability and accountability act;
- (i)(i) To appropriate corrections and law enforcement agencies all necessary and relevant information in the event of a crisis or emergent situation that poses a significant and imminent risk to the public. The mental health service agency or its employees are not civilly liable for the decision to disclose or not so long as the decision was reached in good faith and without gross negligence.
- (ii) Disclosure under this subsection is mandatory for the purposes of the health insurance portability and accountability act;
- (j) To the persons designated in RCW 71.05.425 for the purposes described in those sections;
 - (k) Upon the death of a person. The person's next of kin, personal representative, guardian, or conservator, if any, must be notified. Next of kin who are of legal age and competent must be notified under this section in the following order: Spouse, parents,

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- children, brothers and sisters, and other relatives according to the degree of relation. Access to all records and information compiled, obtained, or maintained in the course of providing services to a deceased patient are governed by RCW 70.02.140;
- 5 (1) To mark headstones or otherwise memorialize patients interred 6 at state hospital cemeteries. The department of social and health 7 services shall make available the name, date of birth, and date of 8 death of patients buried in state hospital cemeteries fifty years 9 after the death of a patient;
- 10 (m) To law enforcement officers and to prosecuting attorneys as 11 are necessary to enforce RCW 9.41.040(2)(a)(iii). The extent of 12 information that may be released is limited as follows:
- (i) Only the fact, place, and date of involuntary commitment, an official copy of any order or orders of commitment, and an official copy of any written or oral notice of ineligibility to possess a firearm that was provided to the person pursuant to RCW 9.41.047(1), must be disclosed upon request;
- (ii) The law enforcement and prosecuting attorneys may only release the information obtained to the person's attorney as required by court rule and to a jury or judge, if a jury is waived, that presides over any trial at which the person is charged with violating RCW 9.41.040(2)(a)(iii);
- 23 (iii) Disclosure under this subsection is mandatory for the 24 purposes of the federal health insurance portability and 25 accountability act;
 - (n) When a patient would otherwise be subject to the provisions of this section and disclosure is necessary for the protection of the patient or others due to his or her unauthorized disappearance from the facility, and his or her whereabouts is unknown, notice of the disappearance, along with relevant information, may be made to relatives, the department of corrections when the person is under the supervision of the department, and governmental law enforcement agencies designated by the physician or psychiatric advanced registered nurse practitioner in charge of the patient or the professional person in charge of the facility, or his or her professional designee;
 - (o) Pursuant to lawful order of a court;

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38 (p) To qualified staff members of the department, to the director 39 of behavioral health organizations, to resource management services 40 responsible for serving a patient, or to service providers designated

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by resource management services as necessary to determine the progress and adequacy of treatment and to determine whether the person should be transferred to a less restrictive or more appropriate treatment modality or facility;

- (q) Within the mental health service agency where the patient is receiving treatment, confidential information may be disclosed to persons employed, serving in bona fide training programs, or participating in supervised volunteer programs, at the facility when it is necessary to perform their duties;
- (r) Within the department as necessary to coordinate treatment for mental illness, developmental disabilities, alcoholism, or drug abuse of persons who are under the supervision of the department;
- (s) To a licensed physician or psychiatric advanced registered nurse practitioner who has determined that the life or health of the person is in danger and that treatment without the information and records related to mental health services could be injurious to the patient's health. Disclosure must be limited to the portions of the records necessary to meet the medical emergency;
- (t) Consistent with the requirements of the federal health information portability and accountability act, to a licensed mental health professional or a health care professional licensed under chapter 18.71, 18.71A, 18.57, 18.57A, 18.79, or 18.36A RCW who is providing care to a person, or to whom a person has been referred for evaluation or treatment, to assure coordinated care and treatment of that person. Psychotherapy notes may not be released without authorization of the person who is the subject of the request for release of information;
- (u) To administrative and office support staff designated to obtain medical records for those licensed professionals listed in (t) of this subsection;
- (v) To a facility that is to receive a person who is involuntarily committed under chapter 71.05 RCW, or upon transfer of the person from one evaluation and treatment facility to another. The release of records under this subsection is limited to the information and records related to mental health services required by law, a record or summary of all somatic treatments, and a discharge summary. The discharge summary may include a statement of the patient's problem, the treatment goals, the type of treatment which has been provided, and recommendation for future treatment, but may not include the patient's complete treatment record;

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(w) To the person's counsel or guardian ad litem, without modification, at any time in order to prepare for involuntary commitment or recommitment proceedings, reexaminations, appeals, or other actions relating to detention, admission, commitment, or patient's rights under chapter 71.05 RCW;

- (x) To staff members of the protection and advocacy agency or to staff members of a private, nonprofit corporation for the purpose of protecting and advocating the rights of persons with mental disorders or developmental disabilities. Resource management services may limit the release of information to the name, birthdate, and county of residence of the patient, information regarding whether the patient was voluntarily admitted, or involuntarily committed, the date and place of admission, placement, or commitment, the name and address of a guardian of the patient, and the date and place of the guardian's appointment. Any staff member who wishes to obtain additional information must notify the patient's resource management services in writing of the request and of the resource management services' right to object. The staff member shall send the notice by mail to the guardian's address. If the guardian does not object in writing within fifteen days after the notice is mailed, the staff member may obtain the additional information. If the guardian objects in writing within fifteen days after the notice is mailed, the staff member may not obtain the additional information;
 - (y) To all current treating providers of the patient with prescriptive authority who have written a prescription for the patient within the last twelve months. For purposes of coordinating health care, the department may release without written authorization of the patient, information acquired for billing and collection purposes as described in RCW 70.02.050(1)(d). The department shall notify the patient that billing and collection information has been released to named providers, and provide the substance of the information released and the dates of such release. The department may not release counseling, inpatient psychiatric hospitalization, or drug and alcohol treatment information without a signed written release from the client;
 - (z)(i) To the secretary of social and health services for either program evaluation or research, or both so long as the secretary adopts rules for the conduct of the evaluation or research, or both. Such rules must include, but need not be limited to, the requirement

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that all evaluators and researchers sign an oath of confidentiality
substantially as follows:

"As a condition of conducting evaluation or research concerning persons who have received services from (fill in the facility, agency, or person) I, , agree not to divulge, publish, or otherwise make known to unauthorized persons or the public any information obtained in the course of such evaluation or research regarding persons who have received services such that the person who received such services is identifiable.

I recognize that unauthorized release of confidential information may subject me to civil liability under the provisions of state law.

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- (ii) Nothing in this chapter may be construed to prohibit the compilation and publication of statistical data for use by government or researchers under standards, including standards to assure maintenance of confidentiality, set forth by the secretary.
- (3) Whenever federal law or federal regulations restrict the release of information contained in the information and records related to mental health services of any patient who receives treatment for chemical dependency, the department may restrict the release of the information as necessary to comply with federal law and regulations.
- (4) Civil liability and immunity for the release of information about a particular person who is committed to the department of social and health services under RCW 71.05.280(3) and 71.05.320(4)(c) after dismissal of a sex offense as defined in RCW 9.94A.030, is governed by RCW 4.24.550.
- (5) The fact of admission to a provider of mental health services, as well as all records, files, evidence, findings, or orders made, prepared, collected, or maintained pursuant to chapter 71.05 RCW are not admissible as evidence in any legal proceeding outside that chapter without the written authorization of the person who was the subject of the proceeding except as provided in RCW 70.02.260, in a subsequent criminal prosecution of a person committed pursuant to RCW 71.05.280(3) or 71.05.320(4)(c) on charges that were dismissed pursuant to chapter 10.77 RCW due to incompetency to stand trial, in a civil commitment proceeding pursuant to chapter 71.09 RCW, or, in the case of a minor, a guardianship or dependency proceeding. The records and files maintained in any court proceeding

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- pursuant to chapter 71.05 RCW must be confidential and available subsequent to such proceedings only to the person who was the subject of the proceeding or his or her attorney. In addition, the court may order the subsequent release or use of such records or files only upon good cause shown if the court finds that appropriate safeguards for strict confidentiality are and will be maintained.
 - (6)(a) Except as provided in RCW 4.24.550, any person may bring an action against an individual who has willfully released confidential information or records concerning him or her in violation of the provisions of this section, for the greater of the following amounts:
- 12 (i) One thousand dollars; or

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- 13 (ii) Three times the amount of actual damages sustained, if any.
- 14 (b) It is not a prerequisite to recovery under this subsection 15 that the plaintiff suffered or was threatened with special, as 16 contrasted with general, damages.
- 17 (c) Any person may bring an action to enjoin the release of 18 confidential information or records concerning him or her or his or 19 her ward, in violation of the provisions of this section, and may in 20 the same action seek damages as provided in this subsection.
- 21 (d) The court may award to the plaintiff, should he or she 22 prevail in any action authorized by this subsection, reasonable 23 attorney fees in addition to those otherwise provided by law.
- (e) If an action is brought under this subsection, no action may be brought under RCW 70.02.170.
- NEW SECTION. Sec. 7. Section 6 of this act takes effect April 1, 2018.
- NEW SECTION. Sec. 8. Section 5 of this act expires April 1, 29 2018.

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