

CERTIFICATION OF ENROLLMENT

SENATE BILL 6329

Chapter 158, Laws of 1998

55th Legislature
1998 Regular Session

DISCLOSURE OF HEALTH CARE INFORMATION WITHOUT PATIENT
AUTHORIZATION--INVESTIGATIONS BY COUNTY CORONERS AND MEDICAL
EXAMINERS

EFFECTIVE DATE: 6/11/98

Passed by the Senate February 12, 1998

YEAS 48 NAYS 0

BRAD OWEN

President of the Senate

Passed by the House March 4, 1998

YEAS 97 NAYS 0

CLYDE BALLARD

**Speaker of the
House of Representatives**

Approved March 25, 1998

CERTIFICATE

I, Mike O Connell, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SENATE BILL 6329** as passed by the Senate and the House of Representatives on the dates hereon set forth.

MIKE O'CONNELL

Secretary

FILED

March 25, 1998 - 4:44 p.m.

GARY LOCKE

Governor of the State of Washington

**Secretary of State
State of Washington**

SENATE BILL 6329

Passed Legislature - 1998 Regular Session

State of Washington 55th Legislature 1998 Regular Session

By Senators Deccio, Thibaudeau, Wood and Loveland

Read first time 01/15/98. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to disclosure of health care information without
2 patient's authorization; and amending RCW 70.02.050.

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

4 **Sec. 1.** RCW 70.02.050 and 1993 c 448 s 4 are each amended to read
5 as follows:

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

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

11 (b) To any other person who requires health care information for
12 health care education, or to provide planning, quality assurance, peer
13 review, or administrative, legal, financial, or actuarial services to
14 the health care provider; or for assisting the health care provider in
15 the delivery of health care and the health care provider reasonably
16 believes that the person:

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

1 (ii) Will take appropriate steps to protect the health care
2 information;

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

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

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

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

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

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

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

26 (iii) Contains reasonable safeguards to protect the information
27 from redisclosure;

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

31 (v) Contains procedures to remove or destroy at the earliest
32 opportunity, consistent with the purposes of the project, information
33 that would enable the patient to be identified, unless an institutional
34 review board authorizes retention of identifying information for
35 purposes of another research project;

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

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

4 (ii) Not to disclose the information further, except to accomplish
5 the audit or report unlawful or improper conduct involving fraud in
6 payment for health care by a health care provider or patient, or other
7 unlawful conduct by the health care provider;

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

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

12 (k) In the case of a hospital or health care provider to provide,
13 in cases reported by fire, police, sheriff, or other public authority,
14 name, residence, sex, age, occupation, condition, diagnosis, or extent
15 and location of injuries as determined by a physician, and whether the
16 patient was conscious when admitted.

17 (2) A health care provider shall disclose health care information
18 about a patient without the patient's authorization if the disclosure
19 is:

20 (a) To federal, state, or local public health authorities, to the
21 extent the health care provider is required by law to report health
22 care information; when needed to determine compliance with state or
23 federal licensure, certification or registration rules or laws; or when
24 needed to protect the public health;

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

27 (c) To county coroners and medical examiners for the investigations
28 of deaths;

29 (d) Pursuant to compulsory process in accordance with RCW
30 70.02.060.

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

Passed the Senate February 12, 1998.

Passed the House March 4, 1998.

Approved by the Governor March 25, 1998.

Filed in Office of Secretary of State March 25, 1998.