

CERTIFICATION OF ENROLLMENT
ENGROSSED SUBSTITUTE HOUSE BILL 1239

Chapter 87, Laws of 2018

65th Legislature
2018 Regular Session

MEDICAL RECORDS FEES--SOCIAL SECURITY BENEFITS APPEAL

EFFECTIVE DATE: June 7, 2018

Passed by the House March 3, 2018
Yeas 93 Nays 3

FRANK CHOPP

Speaker of the House of Representatives

Passed by the Senate March 1, 2018
Yeas 40 Nays 9

CYRUS HABIB

President of the Senate

Approved March 15, 2018 1:44 PM

JAY INSLEE

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE BILL 1239** as passed by House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

Chief Clerk

FILED

March 16, 2018

**Secretary of State
State of Washington**

ENGROSSED SUBSTITUTE HOUSE BILL 1239

AS AMENDED BY THE SENATE

Passed Legislature - 2018 Regular Session

State of Washington 65th Legislature 2017 Regular Session

By House Health Care & Wellness (originally sponsored by Representative Sullivan)

READ FIRST TIME 02/02/17.

1 AN ACT Relating to requests for medical records to support an
2 application for social security benefits; amending RCW 70.02.030,
3 70.02.045, and 70.02.080; and adding a new section to chapter 48.43
4 RCW.

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

6 **Sec. 1.** RCW 70.02.030 and 2014 c 220 s 15 are each amended to
7 read as follows:

8 (1) A patient may authorize a health care provider or health care
9 facility to disclose the patient's health care information. A health
10 care provider or health care facility shall honor an authorization
11 and, if requested, provide a copy of the recorded health care
12 information unless the health care provider or health care facility
13 denies the patient access to health care information under RCW
14 70.02.090.

15 (2)(a) Except as provided in (b) of this subsection, a health
16 care provider or health care facility may charge a reasonable fee for
17 providing the health care information and is not required to honor an
18 authorization until the fee is paid.

19 (b) Upon request of a patient or a patient's personal
20 representative, a health care facility or health care provider shall
21 provide the patient or representative with one copy of the patient's

1 health care information free of charge if the patient is appealing
2 the denial of federal supplemental security income or social security
3 disability benefits. The patient or representative may complete a
4 disclosure authorization specifying the health care information
5 requested and provide it to the health care facility or health care
6 provider. The health care facility or health care provider may
7 provide the health care information in either paper or electronic
8 format. A health care facility or health care provider is not
9 required to provide a patient or a patient's personal representative
10 with a free copy of health care information that has previously been
11 provided free of charge pursuant to a request within the preceding
12 two years.

13 (3) To be valid, a disclosure authorization to a health care
14 provider or health care facility shall:

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

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

17 (c) Identify the name and institutional affiliation of the person
18 or class of persons to whom the information is to be disclosed;

19 (d) Identify the provider or class of providers who are to make
20 the disclosure;

21 (e) Identify the patient; and

22 (f) Contain an expiration date or an expiration event that
23 relates to the patient or the purpose of the use or disclosure.

24 (4) Unless disclosure without authorization is otherwise
25 permitted under RCW 70.02.050 or the federal health insurance
26 portability and accountability act of 1996 and its implementing
27 regulations, an authorization may permit the disclosure of health
28 care information to a class of persons that includes:

29 (a) Researchers if the health care provider or health care
30 facility obtains the informed consent for the use of the patient's
31 health care information for research purposes; or

32 (b) Third-party payors if the information is only disclosed for
33 payment purposes.

34 (5) Except as provided by this chapter, the signing of an
35 authorization by a patient is not a waiver of any rights a patient
36 has under other statutes, the rules of evidence, or common law.

37 (6) When an authorization permits the disclosure of health care
38 information to a financial institution or an employer of the patient
39 for purposes other than payment, the authorization as it pertains to

1 those disclosures shall expire one year after the signing of the
2 authorization, unless the authorization is renewed by the patient.

3 (7) A health care provider or health care facility shall retain
4 the original or a copy of each authorization or revocation in
5 conjunction with any health care information from which disclosures
6 are made.

7 (8) Where the patient is under the supervision of the department
8 of corrections, an authorization signed pursuant to this section for
9 health care information related to mental health or drug or alcohol
10 treatment expires at the end of the term of supervision, unless the
11 patient is part of a treatment program that requires the continued
12 exchange of information until the end of the period of treatment.

13 **Sec. 2.** RCW 70.02.045 and 2015 c 289 s 1 are each amended to
14 read as follows:

15 Third-party payors shall not release health care information
16 disclosed under this chapter, except as required by chapter 43.371
17 RCW and section 4 of this act and to the extent that health care
18 providers are authorized to do so under RCW 70.02.050, 70.02.200, and
19 70.02.210.

20 **Sec. 3.** RCW 70.02.080 and 1993 c 448 s 5 are each amended to
21 read as follows:

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

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

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

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

34 (d) If the information is in use or unusual circumstances have
35 delayed handling the request, inform the patient and specify in
36 writing the reasons for the delay and the earliest date, not later
37 than twenty-one working days after receiving the request, when the

1 information will be available for examination or copying or when the
2 request will be otherwise disposed of; or

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

5 (2) Upon request, the health care provider shall provide an
6 explanation of any code or abbreviation used in the health care
7 information. If a record of the particular health care information
8 requested is not maintained by the health care provider in the
9 requested form, the health care provider is not required to create a
10 new record or reformulate an existing record to make the health care
11 information available in the requested form. Except as provided in
12 RCW 70.02.030, the health care provider may charge a reasonable fee
13 for providing the health care information and is not required to
14 permit examination or copying until the fee is paid.

15 NEW SECTION. **Sec. 4.** A new section is added to chapter 48.43
16 RCW to read as follows:

17 Upon request of a covered person or a covered person's personal
18 representative, an issuer shall provide the covered person or
19 representative with one copy of the covered person's health care
20 information free of charge if the covered person is appealing the
21 denial of federal supplemental security income or social security
22 disability benefits. The issuer may provide the health care
23 information in either paper or electronic format. An issuer is not
24 required to provide a covered person or a covered person's personal
25 representative with a free copy of health care information that has
26 previously been provided free of charge pursuant to a request within
27 the preceding two years. For purposes of this section, "health care
28 information" has the same meaning as in RCW 70.02.010.

Passed by the House March 3, 2018.

Passed by the Senate March 1, 2018.

Approved by the Governor March 15, 2018.

Filed in Office of Secretary of State March 16, 2018.

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