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CHAMBER ACTION

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	<u>Senate</u> <u>House</u>
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11	The Committee on Health Care (Saunders) recommended the
12	following amendment:
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14	Senate Amendment (with title amendment)
15	Delete everything after the enacting clause
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17	and insert:
18	Section 1. Section 381.028, Florida Statutes, is
19	created to read:
20	381.028 Adverse medical incidents
21	(1) SHORT TITLEThis section may be cited as the
22	"Patients' Right-to-Know About Adverse Medical Incidents Act."
23	(2) PURPOSEIt is the purpose of this act to
24	implement s. 22, Art. X of the State Constitution. The
25	Legislature finds that this section of the State Constitution
26	is intended to grant patient access to records of adverse
27	medical incidents, which records were made or received in the
28	course of business by a health care facility or provider, and
29	not to repeal or otherwise modify existing laws governing the
30	use of these records and the information contained therein.
31	The Legislature further finds that all existing laws extending
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criminal and civil immunity to persons providing information to quality-of-care committees or organizations and all 2 existing laws concerning the discoverability or admissibility 3 4 into evidence of records of an adverse medical incident in any judicial or administrative proceeding remain in full force and 5 effect. 6 7 (3) DEFINITIONS.--As used in s. 22, Art. X of the State Constitution and this act, the term: 8 9 (a) "Agency" means the Agency for Health Care 10 Administration. (b) "Adverse medical incident" means medical 11 negligence, intentional misconduct, and any other act, 12 13 neglect, or default of a health care facility or health care provider which caused or could have caused injury to or the 14 15 death of a patient, including, but not limited to, those incidents that are required by state or federal law to be 16 reported to any governmental agency or body, incidents that 17 18 are reported to any governmental agency or body, and incidents that are reported to or reviewed by any health care facility 19 peer review, risk management, quality assurance, credentials, 20 21 or similar committee or any representative of any such 22 committee. (c) "Department" means the Department of Health. 23 2.4 (d) "Have access to any records" means, in addition to any other procedure for producing such records provided by 25 general law, making the records available for inspection and 26 copying upon formal or informal request by the patient or a 27 representative of the patient, provided that current records 28 29 that have been made publicly available by publication or on the Internet may be provided by reference to the location at 30 31 which the records are publicly available.

1	(e) "Health care provider" means a physician licensed
2	under chapter 458 or chapter 459.
3	(f) "Health care facility" means a facility licensed
4	under chapter 395.
5	(g) "Identity" means any "individually identifiable
6	health information" as defined by the Health Insurance
7	Portability and Accountability Act of 1996 or its implementing
8	regulations.
9	(h) "Patient" means an individual who has sought, is
10	seeking, is undergoing, or has undergone care or treatment in
11	a health care facility or by a health care provider.
12	(i) "Privacy restrictions imposed by federal law"
13	means the provisions relating to the disclosure of information
14	under federal law, including, but not limited to, the Health
15	Insurance Portability and Accountability Act of 1996, Pub. L.
16	No. 104-91 ("HIPAA") and its implementing regulations, and the
17	Federal Privacy Act, 5 U.S.C. s. 552(a) and its implementing
18	regulations, and any privilege, including, but not limited to,
19	the attorney-client privilege, the attorney work-product
20	privilege, or the self-critical analysis privilege, that has
21	been recognized under federal law which would prohibit
22	disclosure of information contained in the record.
23	(j) "Records" means the final report of any adverse
24	medical incident. Medical records that are not the final
25	report of any adverse medical incident, including drafts or
26	other nonfinal versions; notes; and any documents or portions
27	thereof which constitute, contain, or reflect any
28	attorney-client communications or any attorney-client work
29	product may not be considered "records" for purposes of s. 22,
30	Art. X of the State Constitution and this act.
31	(k) "Representative of the patient" means a parent of

1	a minor patient, a court-appointed guardian for the patient, a
2	health care surrogate, or a person holding a power of attorney
3	or notarized consent appropriately executed by the patient
4	granting permission to a health care facility or health care
5	provider to disclose the patient's health care information to
6	that person.
7	(4) PATIENTS' RIGHT OF ACCESSPatients have a right
8	to have access to any records made or received in the course
9	of business by a health care facility or health care provider
10	relating to any adverse medical incident. In providing access
11	to these records, the health care facility or health care
12	provider may not disclose the identity of patients involved in
13	the incidents and shall maintain any privacy restrictions
14	imposed by federal law.
15	(5) APPLICABILITYSection 22, Art. X of the State
16	Constitution applies to records created, incidents occurring,
17	and actions pending on or after November 3, 2004. Section 22,
18	Art. X of the State Constitution does not apply to records
19	created, incidents occurring, or actions pending before
20	November 3, 2004. A patient requesting records on or after
21	November 3, 2008, shall be eligible to receive records created
22	within 4 years before the date of the request.
23	(6) USE OF RECORDS
24	(a) This section does not repeal or otherwise alter
25	any existing restrictions on the discoverability or
26	admissibility of records relating to adverse medical incidents
27	otherwise provided by law, including, but not limited to,
28	those contained in ss. 395.0191, 395.0193, 395.0197, 766.101,
29	and 766.1016, or repeal or otherwise alter any immunity
30	provided to, or prohibition against compelling testimony by,
31	persons providing information or participating in any peer

1	review panel, medical review committee, hospital committee, or
2	other hospital board otherwise provided by law, including, but
3	not limited to, ss. 395.0191, 395.0193, 766.101, and 766.1016.
4	(b) Except as otherwise provided by act of the
5	Legislature, records of adverse medical incidents, including
6	any information contained therein, obtained pursuant to s. 22,
7	Art. X of the State Constitution, are not discoverable or
8	admissible into evidence and may not be used for any purpose,
9	including impeachment, in any civil or administrative action
10	against a health care facility or health care provider. This
11	includes information relating to performance or
12	quality-improvement initiatives and information relating to
13	the identity of reviewers, complainants, or any person
14	providing information contained in or used in, or any person
15	participating in the creation of the records of adverse
16	medical incidents.
17	(7) PRODUCTION OF RECORDS
18	(a) Pursuant to s. 22, Art. X of the State
19	Constitution, the adverse medical incident records to which a
20	patient is granted access are those of the facility or
21	provider of which he or she is a patient and which pertain to
22	any adverse medical incident affecting the patient or any
23	other patient which involves the same or substantially similar
24	condition, treatment, or diagnosis as that of the patient
25	requesting access.
26	(b)1. Using the process provided in s. 395.0197, the
27	health care facility shall be responsible for identifying
28	records as records of an adverse medical incident, as defined
29	in s. 22, Art. X of the State Constitution.
30	2. Using the process provided in s. 458.351, the
31	health care provider shall be responsible for identifying
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1	records as records of an adverse medical incident, as defined
2	in s. 22, Art. X of the State Constitution, occurring in an
3	office setting.
4	(c) 1. Fees charged by a health care facility for
5	copies of records requested by a patient pursuant to s. 22,
6	Art. X of the State Constitution may not exceed the reasonable
7	and actual cost of complying with the request, including a
8	reasonable charge for the staff time necessary to search for
9	records and prevent the disclosure of the identity of any
10	patient involved in the adverse medical incident through
11	redaction or other means as required by the Health Insurance
12	Portability and Accountability Act of 1996 or its implementing
13	regulations. The health care facility may require payment, in
14	full or in part, before acting on the records request.
15	2. Fees charged by a health care provider for copies
16	of records requested by a patient pursuant to s. 22, Art. X of
17	the State Constitution may not exceed the amount established
18	pursuant to s. 456.057(16), which may include a reasonable
19	charge for the staff time necessary to prevent the disclosure
20	of the identity of any patient involved in the adverse medical
21	incident through redaction or other means as required by the
22	Health Insurance Portability and Accountability Act of 1996 or
23	its implementing regulations. The health care provider may
24	require payment, in full or in part, before acting on the
25	records request.
26	(d)1. Requests for production of adverse medical
27	incident records shall be processed by the health care
28	facility or health care provider in a timely manner, after
29	having a reasonable opportunity to determine whether or not
30	the requested record is a record subject to disclosure and to
31	prevent the disclosure of the identity of any patient involved 6

1	in the adverse medical incident through redaction or other
2	means.
3	2. A request for production of records must be
4	submitted in writing and must identify the patient requesting
5	access to the records by name, address, and the last four
6	digits of the patient's social security number; describe the
7	patient's condition, treatment, or diagnosis; and provide the
8	name of the health care providers whose records are being
9	sought.
10	(e) A patient receiving records involving any other
11	patient pursuant to this section shall maintain the
12	confidentiality of those records.
13	Section 2. This act shall take effect upon becoming a
14	law.
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17	======== T I T L E A M E N D M E N T ==========
18	And the title is amended as follows:
19	Delete everything before the enacting clause
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21	and insert:
22	and insert: A bill to be entitled
22	A bill to be entitled
22 23	A bill to be entitled An act relating to adverse medical incidents;
22 23 24	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short
22 23 24 25	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short title; providing a purpose; defining terms;
2223242526	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short title; providing a purpose; defining terms; specifying patients' right of access to records
222324252627	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short title; providing a purpose; defining terms; specifying patients' right of access to records relating to an adverse medical incident;
22232425262728	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short title; providing a purpose; defining terms; specifying patients' right of access to records relating to an adverse medical incident; prohibiting the disclosure of the identity of
2223242526272829	A bill to be entitled An act relating to adverse medical incidents; creating s. 381.028, F.S.; providing a short title; providing a purpose; defining terms; specifying patients' right of access to records relating to an adverse medical incident; prohibiting the disclosure of the identity of certain patients; providing for maintaining

1	X of the State Constitution; providing for
2	applicability of this section; providing
3	restrictions upon the use of such records;
4	providing for the identification and production
5	of the records; providing for fees charged for
6	copies of records; requiring patients to
7	maintain the confidentiality of records
8	pertaining to another patient; providing an
9	effective date.
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