Florida Senate - 1998

CS for SB 260

By the Committee on Health Care

	317-1702-98
1	A bill to be entitled
2	An act relating to confidentiality of records;
3	providing definitions; providing for the
4	confidentiality of health, health insurance,
5	medical, and patient records and for data or
6	information pertaining to individuals contained
7	in such records; providing exceptions; amending
8	s. 455.677, F.S., relating to disposition of
9	certain medical records held by practitioners;
10	requiring rules to provide for specific methods
11	of disposal following expiration of the
12	mandatory retention period; providing for
13	alternatives for electronic records; providing
14	an effective date.
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16	Be It Enacted by the Legislature of the State of Florida:
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18	Section 1. (1) As used in this section, the term:
19	(a) "Confidential" means private and not for
20	communication to others, except as provided by law.
21	(b) "Health record" means data or information,
22	regardless of the physical form, characteristics, or means of
23	transmission, concerning the condition of the mind or body of
24	an individual who participates in a professional relationship
25	as a patient, client, or customer of a health care
26	practitioner or health care provider for the receipt of
27	curative, rehabilitative, therapeutic, cosmetic, or palliative
28	treatment which data or information is obtained by such a
29	practitioner or provider as a result of a professional
30	relationship, professional association, or commercial exchange
31	with the individual, and which data or information is
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1 converted to a medium that results in a record that is maintained as required by law or accepted professional or 2 3 industry standards and practices. 4 (c) "Health insurance record" means data or 5 information, regardless of the physical form, characteristics, б or means of transmission, concerning services, care, or treatment provided to an individual through a professional 7 8 relationship, professional association, or commercial exchange 9 with a health care practitioner or health care provider 10 relating to health or medical services covered, provided, 11 excluded, or paid on behalf of the individual who is insured by an insurance company or an individual who is a subscriber 12 or an enrollee of a managed care organization which data or 13 information is converted to a medium that results in a record 14 that is maintained as required by law or accepted professional 15 or industry standards and practices. 16 "Medical record" means data or information, 17 (d) regardless of the physical form, characteristics, or means of 18 19 transmission, concerning the condition of the mind or body of an individual who is a patient, client, or customer of a 20 health care practitioner or health care provider that is 21 obtained by such practitioner or provider as a result of a 22 professional relationship, professional association, or 23 24 commercial exchange with the individual and which data or 25 information is converted to a medium that results in a record that is maintained as required by law or accepted professional 26 27 or industry standards and practices. 28 "Patient record" means data or information, (e) 29 regardless of the physical form, characteristics, or means of 30 transmission, concerning the condition of the mind or body of 31 an individual who participates in a professional relationship

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1 as a patient, client, or customer of a health care practitioner or health care provider for the receipt of 2 3 curative, rehabilitative, therapeutic, cosmetic, or palliative treatment which data or information is obtained by such a 4 5 practitioner or provider as a result of the professional б relationship, professional association, or commercial exchange 7 with the individual and which data or information is converted 8 to a medium that results in a record that is maintained as required by law or accepted professional or industry standards 9 10 and practices. 11 (f) "Record" means all documents, papers, letters, maps, books, tapes, photographs, films, sound recordings, data 12 processing software, or other material, regardless of the 13 14 physical form, characteristics, or mode of transmission, made or received through a private or public professional 15 relationship, association, or commercial exchange. 16 17 "Research record" means data or information, (q) regardless of the physical form, characteristics, or means of 18 19 transmission, concerning an individual which is converted to a medium that preserves the data or information concerning the 20 21 individual. Such data or information may be: 1. Provided to a health researcher by or on behalf of 22 the individual when he or she is a research participant, or in 23 24 connection with research approved by an Institutional Review Board established in accordance with federal law; 25 2. Reported by a health care practitioner or health 26 27 care provider to the manufacturer of a drug, biologic, or medical device product in connection with post-marketing 28 29 surveillance of the safety and efficacy of such manufacturer's 30 drug, biologic, or medical device product, including its use 31 in special populations; or

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2researcher as anonymous data or information, in which case3personal identifiers have been removed, encrypted, or replaced4with a code such that the identity of the individual is not5apparent from the facts contained in the data or information,6but which may, in the case of encrypted or coded information,7permit the identity of the individual to be determined by a8person who uses the encryption key or coding system.9(2)(a) Except as otherwise provided by law and10paragraph (c), health, health insurance, medical, and patient11records are confidential and protected as provided under12Section 23, Article I of the State Constitution. Access to13such records must be granted upon the written consent of the14individual to whom the record pertains or the person's legal15representative; the written consent of the person who has16pursuant to subpoena, upon demonstration of compelling19relevance; or pursuant to order of a court of competent10jurisdiction.21(b) Except as otherwise provided by law and paragraph22(c), any data or information concerning an individual in a23health, health insurance, medical, or patient record24concerning medical, psychiatric, or surgical care,25consultation, counseling, evaluation, testing, or treatment26provided to the individual is confidential. Such information27may be disclosed to a third party only after written consent28has bee	1	3. Provided voluntarily to a medical or pharmacology
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1 compelling relevance, or pursuant to order of a court of 2 competent jurisdiction. 3 (c) An insurer or managed care organization may use or disclose records, information, or data made confidential under 4 5 this subsection to its employees; persons acting on behalf of б or at the direction of the insurer or managed care 7 organization for legitimate business purposes; federal or 8 state governmental authorities for financial audits, performance audits, quality-assurance review, utilization 9 review, or investigation or prosecution of fraud, or a 10 11 violation of laws related to the provision of health care or payment for health care. However, such use or disclosure shall 12 be as narrowly authorized as is necessary to accomplish the 13 legitimate business function for which use or disclosure is 14 determined to be necessary. Legitimate business functions for 15 which records, information, or data made confidential under 16 17 this subsection may be used or disclosed include: fraud investigation, risk management, quality assurance, utilization 18 19 review, peer review, patient care, surveys for purposes of accreditation, and processing insurance or managed care 20 organization benefits, claims, and disputes or grievances. 21 Data or information that is obtained, compiled, 22 (3) and maintained as a research record, as provided under this 23 24 section, shall always retain its confidential and privileged status and may be used only for medical and pharmacological 25 research. Such data or information is not discoverable or 26 27 admissible in any court or administrative proceeding without the written consent of the individual to whom the record 28 29 pertains or the individual's legal representative; a subpoena, 30 upon demonstration of compelling relevance; or an order of a 31 court of competent jurisdiction.

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1 2 This section does not prohibit the disclosure of data or 3 information that is being obtained, compiled, and maintained as a research record, provided that the identity of any 4 5 individual who participates as a research subject and about б whom anonymous data or information is provided or product 7 safety or efficacy data or information is reported as part of 8 post-marketing surveillance is not disclosed in any release of research results or publication of research findings. A 9 10 researcher that requests data or information protected under 11 this section must pay the actual costs incurred to provide the data or information including, but not limited to, copying 12 charges, postage, and employee time relating to removal of 13 personal identifiers and other activities pertaining to data, 14 information, or record maintenance. 15 Section 2. Section 455.677, Florida Statutes, is 16 17 amended to read: 455.677 Disposition of records of deceased 18 19 practitioners or practitioners relocating or terminating 20 practice.--Each board created under the provisions of chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, 21 chapter 463, chapter 464, chapter 465, chapter 466, part I of 22 chapter 484, chapter 486, chapter 490, or chapter 491, and the 23 24 department under the provisions of chapter 462, shall provide by rule for the disposition, under that chapter, of the 25 medical records or records of a psychological nature of 26 27 practitioners which are in existence at the time the practitioner dies, terminates practice, or relocates and is no 28 29 longer available to patients and which records pertain to the 30 practitioner's patients. The rules shall provide that the 31 records be retained for at least 2 years after the 6

practitioner's death, termination of practice, or relocation. In the case of the death of the practitioner, the rules shall provide for the disposition of such records by the estate of the practitioner. The rules must provide that such records may be disposed of after the mandatory retention period only by delivery to the patient or by shredding or burning in accordance with standards adopted by the department. However, the rules may provide for appropriate alternatives for electronic records, including perpetual archival. Section 3. This act shall take effect upon becoming a law. STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN COMMITTEE SUBSTITUTE FOR SB 260 Definitions for the terms "confidential," "record," and "research record" have been added to the definition section; specific circumstances are listed to which the concept of "legitimate business function," as used in the bill, apply; and the definition of terms already in the bill have been revised. The reference to persons whose interacts are revised. The reference to persons whose interests are protected by the bill is changed from "natural person" to "individual." Insurers and managed care organizations, as well as research records, are expressly excluded from restrictions on confidential information provided in the bill, subject to certain specified guidelines. Researchers are required to pay certain costs resulting from compliance with requests for confidential data and information. The Department of Health is authorized to adopt rules relating to the disposal of patient records that provide for appropriate alternatives for electronic records, including perpetual archival.