By Senator Gaetz

	4-00825-09 2009876
1	A bill to be entitled
2	An act relating to health care information; providing
3	a short title; providing a purpose; amending s.
4	395.3025, F.S.; authorizing the release of patient
5	records to certain additional health care
6	practitioners or providers; creating part I of ch.
7	405, F.S.; providing definitions; authorizing a health
8	care provider to release or access an identifiable
9	health record without the patient's consent in an
10	emergency; providing immunity from liability for a
11	health care provider who releases or accesses a
12	patient's identifiable health record in good faith;
13	requiring the Agency for Health Care Administration to
14	develop an authorization form for the use and release
15	of an identifiable health record; providing
16	requirements for the authorization form; requiring the
17	agency to adopt rules and make the form available on
18	its website; requiring a health care provider who
19	receives an authorizing form in an electronic or paper
20	format to accept the form as a valid request to
21	release the record; providing that use of the
22	authorization form is not required; providing that use
23	of the authorization form in exchanging identifiable
24	health records creates a rebuttable presumption;
25	providing immunity for health care providers under
26	certain circumstances; providing that use of the
27	authorization form in exchanging identifiable health
28	records does not violate or waive any privilege
29	protected by law; providing for recovery by a patient

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30	or health care provider of damages plus attorney's
31	fees and court costs in certain actions; amending s.
32	483.181, F.S.; authorizing the results of a clinical
33	laboratory test to be sent to certain health care
34	practitioners or providers involved in the care or
35	treatment of a patient; providing an effective date.
36	
37	WHEREAS, the use of electronic health-information
38	technology has improved the quality of health care, and
39	WHEREAS, clear and concise standards for sharing privacy-
40	protected medical information among authorized health care
41	providers will enable providers to have cost-effective access to
42	the medical information needed to make sound decisions about
43	health care and will enhance patient access to their personal
44	electronic health records by encouraging the adoption of
45	electronic health records, and
46	WHEREAS, maintaining the privacy and security of
47	identifiable health records is essential to the adoption and
48	sharing of electronic health records among health care providers
49	involved in the treatment of patients, NOW, THEREFORE,
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51	Be It Enacted by the Legislature of the State of Florida:
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53	Section 1. This act may be cited as the "Electronic Health
54	Records Exchange Act."
55	Section 2. The purpose of this act is to provide clear and
56	concise standards for authorizing the exchange of health
57	information in compliance with federal and state law and to
58	ensure immunity from liability under state law for the exchange

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59	of health information if the exchange of health information
60	complies with these standards.
61	Section 3. Subsection (4) of section 395.3025, Florida
62	Statutes, is amended to read:
63	395.3025 Patient and personnel records; copies;
64	examination
65	(4) Patient records are confidential and must not be
66	disclosed without the consent of the patient or the patient's
67	legal representative person to whom they pertain, but
68	appropriate disclosure may be made without such consent to:
69	(a) Licensed facility personnel <u>,</u> and attending physicians <u>,</u>
70	or other health care practitioners or providers currently
71	involved in the care or treatment of the patient for use only in
72	connection with that the treatment of the patient.
73	(b) Licensed facility personnel $\underline{\prime}$ only for administrative
74	purposes or risk management and quality assurance functions.
75	(c) The agency, for purposes of health care cost
76	containment.
77	(d) In any civil or criminal action, unless otherwise
78	prohibited by law, upon the issuance of a subpoena from a court
79	of competent jurisdiction and proper notice by the party seeking
80	such records to the patient or his or her legal representative.
81	(e) The agency <u>,</u> upon <u>issuance of a</u> subpoena <del>issued</del> pursuant
82	to s. 456.071 <u>., but the</u> Records obtained <u>by subpoena pursuant to</u>
83	s. 456.071 thereby must be used solely for the purpose of the
84	agency and the appropriate professional board in its
85	investigation, prosecution, and appeal of disciplinary
86	proceedings. If the agency requests copies of the records, the
87	facility shall charge no more than its actual copying costs,

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4-00825-09 including reasonable staff time. The records must be sealed and must not be available to the public pursuant to s. 119.07(1) or

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90 any other statute providing access to records, nor may they be 91 available to the public as part of the record of investigation 92 for and prosecution in disciplinary proceedings made available 93 to the public by the agency or the appropriate regulatory board. 94 However, the agency must make available, upon written request by 95 a practitioner against whom probable cause has been found, any 96 such records that form the basis of the determination of 97 probable cause.

98 (f) The Department of Health or its agent, for the purpose 99 of establishing and maintaining a trauma registry and for the 100 purpose of ensuring that hospitals and trauma centers are in 101 compliance with the standards and rules established under ss. 102 395.401, 395.4015, 395.4025, 395.404, 395.4045, and 395.405, and 103 for the purpose of monitoring patient outcome at hospitals and 104 trauma centers that provide trauma care services.

105 (q) The Department of Children and Family Services or its 106 agent, for the purpose of investigations of cases of abuse, 107 neglect, or exploitation of children or vulnerable adults.

108 (h) The State Long-Term Care Ombudsman Council and the 109 local long-term care ombudsman councils, with respect to the 110 records of a patient who has been admitted from a nursing home 111 or long-term care facility, when the councils are conducting an investigation involving the patient as authorized under part II 112 113 of chapter 400, upon presentation of identification as a council 114 member by the person making the request. Disclosure under this 115 paragraph shall only be made only after a competent patient or 116 the patient's representative has been advised that disclosure

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CODING: Words stricken are deletions; words underlined are additions.

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117	may be made and the patient has not objected.
118	(i) A local trauma agency or a regional trauma agency that
119	performs quality assurance activities, or a panel or committee
120	assembled to assist a local trauma agency or a regional trauma
121	agency in performing quality assurance activities. Patient
122	records obtained under this paragraph are confidential and
123	exempt from s. 119.07(1) and s. 24(a), Art. I of the State
124	Constitution.
125	(j) Organ procurement organizations, tissue banks, and eye
126	banks required to conduct death records reviews pursuant to s.
127	395.2050.
128	(k) The Medicaid Fraud Control Unit in the Department of
129	Legal Affairs pursuant to s. 409.920.
130	(1) The Department of Financial Services, or an agent,
131	employee, or independent contractor of the department who is
132	auditing for unclaimed property pursuant to chapter 717.
133	(m) A regional poison control center <u>,</u> for purposes of
134	evaluating the treatment of <del>treating</del> a poison episode <del>under</del>
135	evaluation, case management of poison cases, or compliance with
136	data collection and reporting requirements of s. 395.1027 and
137	the professional organization that certifies poison control
138	centers in accordance with federal law.
139	Section 4. Part I of chapter 405, Florida Statutes,
140	consisting of sections 405.001, 405.002, 405.003, and 405.004,
141	is created to read:
142	405.001 DefinitionsAs used in this part, the term:
143	(1) "Agency" means Agency for Health Care Administration.
144	(2) "Electronic health record" means an electronic record
145	of patient-specific health-related information which can be

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146	created, managed, and consulted by authorized clinicians and
147	staff across more than one health care organization.
148	(3) "Health record" means any information, recorded in any
149	form or medium, which relates to the past, present, or future
150	health of an individual for the primary purpose of providing
151	health care and health-related services.
152	(4) "Identifiable health record" means any health record
153	that identifies a patient or with respect to which there is a
154	reasonable basis to believe the information can be used to
155	identify the patient.
156	(5) "Patient" means a natural person who has received
157	health care services from a health care provider for treatment
158	or examination of a medical, dental, psychiatric, behavioral,
159	health, or other health-related condition. If, under applicable
160	law, a parent, guardian, or other person may act on behalf of a
161	minor, that parent, guardian, or person shall be treated as the
162	patient for purposes relating to the use and disclosure of the
163	patient's electronic health record. If, under applicable law, a
164	person may act on behalf of an individual who is an adult or an
165	emancipated minor in making decisions related to health care,
166	that person shall be treated as acting for the patient for
167	purposes relating to the use and disclosure of the patient's
168	electronic health record.
169	(6) "Health care provider" means a provider of services as
170	defined in 42 U.S.C. s. 1395x(u), a provider of medical or
171	health services as defined in 42 U.S.C. s. 1395x(s), or any
172	other person or organization that furnishes, bills, or is paid
173	for health care services in the normal course of business.
174	405.002 Emergency release of health recordsA health care

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175	provider may release or access a patient's identifiable health
176	record without the patient's consent for use in the treatment of
177	the patient for an emergency medical condition as defined in s.
178	395.002 when the health care provider is unable to obtain the
179	patient's consent due to the patient's condition or the nature
180	of the situation requiring immediate medical attention. A health
181	care provider who, in good faith, releases or accesses a
182	patient's identifiable health record in any form or medium under
183	this section is immune from civil liability for accessing or
184	releasing the identifiable health record.
185	405.003 Universal patient authorization form
186	(1) By July 1, 2010, the agency shall develop forms in
187	paper and electronic formats which may be used by a health care
188	provider to document patient authorization for the use or
189	release, in any form or medium, of an identifiable health
190	record.
191	(2) The authorization form adopted and distributed by the
192	agency must comply with all applicable federal and state privacy
193	and privilege laws. This authorization form does not alter any
194	applicable federal and state privacy and privilege laws.
195	(3) The agency shall adopt the authorization form and
196	accompanying instructions by rule and make them available on the
197	agency's consumer health care website created pursuant to s.
198	408.05.
199	(4) A health care provider receiving a request for the
200	release of an identifiable health record via the authorization
201	form adopted and distributed by the agency shall accept the form
202	as a valid authorization for the release of an identifiable
203	health record. A health care provider may elect to accept the

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2009876 4-00825-09 204 authorization form in electronic or paper format or both. It is 205 the responsibility of the individual or entity requesting the 206 release of an identifiable health record via the authorization 207 form distributed by the agency to ascertain the authorization 208 format that would be accepted by the health care provider. 209 (5) An individual or entity requesting an identifiable 210 health record is not required under this section to use the 211 authorization form adopted and distributed by the agency. 212 (6) The exchange of an identifiable health record using the 213 authorization form adopted and distributed by the agency, when 214 used in accordance with the instructions of the agency, creates 215 a rebuttable presumption that the release of an identifiable 216 health record was appropriate. A health care provider who 217 releases an identifiable health record in reliance on the 218 information provided in a properly completed authorization form 219 adopted and distributed by the agency is immune from liability 220 in actions based upon state privacy or privilege law which arise 221 from the exchange of an identifiable health record. 222 (7) The exchange of an identifiable health record using the 223 authorization form adopted and distributed by the agency does 224 not violate or waive any privilege protected under statutory or 225 common law of this state. 226 405.004 Disciplinary grounds.-The person presenting an 227 authorization form to a patient or health care provider who releases an identifiable health record in reliance on that 228 229 authorization form is liable to the health care provider or the 230 patient for compensatory damages caused by the release of the 231 identifiable health record, plus court costs and reasonable 232 attorney's fees, if the person presenting the form:

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233	(a) Forged a signature on the authorization form or
234	materially altered the authorization form of another person
235	without the patient's authorization; or
236	(b) Obtained an authorization form or an identifiable
237	health record of another person under false pretenses.
238	Section 5. Subsection (2) of section 483.181, Florida
239	Statutes, is amended to read:
240	483.181 Acceptance, collection, identification, and
241	examination of specimens
242	(2) The results of a test must be reported directly to the
243	licensed practitioner or other authorized person who requested
244	it and may be sent to other health care practitioners or
245	providers involved in the care or treatment of the patient as
246	specified in s. 456.057(7)(a). The report must include the name
247	and address of the clinical laboratory <u>that</u> <del>in which the test</del>
248	was actually performed the test, unless the test was performed
249	in a hospital laboratory and the report becomes an integral part
250	of the hospital record.
251	Section 6. This act shall take effect July 1, 2009.

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