BILL ANALYSIS

Senate Research Center

C.S.S.B. 975 By: Madla Health & Human Services 4-18-97 Committee Report (Substituted)

DIGEST

Currently, the disclosure of a patient's hospital records is governed by guidelines in S.B. 667, enacted by the 74th Legislature. Since the implementation of that Act, several problems have arisen regarding the interpretation of its provisions, most notably, the interpretation of the term "court subpoena." This legislation replaces the term "court subpoena" with specific procedural references to the Civil Practice and Remedies Code and the Texas Rules of Civil Procedure, and further establishes the appropriate disclosure of certain health care information by a hospital.

PURPOSE

As proposed, C.S.S.B. 975 provides for the disclosure of health care information by certain health care providers.

RULEMAKING AUTHORITY

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Section 241.151, Health and Safety Code, to define "directory information" and redefine "legally authorized representative." Makes conforming changes.

SECTION 2. Amends Sections 241.152(a) and (c), Health and Safety Code, to prohibit a hospital or an agent or employee of a hospital from disclosing health care information about a patient to any person other than the patient or the patient's legally authorized representative without the written authorization of those persons, with certain exceptions. Provides that a disclosure authorization is valid until the 180th, rather than the 90th, day after the date it is signed unless it provides otherwise or is revoked.

SECTION 3. Amends Section 241.153, Health and Safety Code, to set forth the terms under which a patient's health care information is authorized to be disclosed without the patient's authorization if the disclosure is directory information; authorized by an applicable professional health care licensing act; to a transporting emergency medical services provider; to a member of the clergy specifically designated by the patient; to a qualified organ or tissue procurement organization regarding potential donations; to a prospective health care provider regarding services; to certain persons to facilitate the adequate provision of treatment; to the American Red Cross; to a regional poison control center; to a health care utilization review agent; to facilitate reimbursement to a hospital, rather than to facilitate reimbursement by a health benefit plan to a hospital; to comply with a court order; or related to a judicial proceeding in which the patient is a party and the disclosure is requested under subpoena, rather than to a court pursuant to a court order or court subpoena. Makes conforming changes.

SECTION 4. Amends Section 241.154, Health and Safety Code, to require a hospital or its agent, as promptly as required but not later than the 15th day after the date the request and payment authorized are received, to make certain information available on receipt of a written authorization from a patient or legally authorized representative. Establishes the conditions under which the hospital or its agent is authorized to charge a reasonable fee, and provides that neither is required to permit the release of the information requested until the fee is paid, unless there is a medical emergency. Prohibits a hospital from charging a fee for certain services. Requires the fee for

providing health care information, effective September 1, 1996, and annually thereafter, to be adjusted accordingly based on the most recent changes to the consumer price index as published by the Bureau of Labor Statistics of the U.S. Department of Labor.

SECTION 5. Repealer: Section 241.152(g), Health and Safety Code (regarding hospital fees for providing health care information).

SECTION 6. Emergency clause. Effective date: 90 days after adjournment.

SUMMARY OF COMMITTEE CHANGES

SECTION 2.

Amends Section 241.152, Health and Safety Code, to provide that a disclosure authorization is valid until the 180th, rather than the 90th, day after the date it is signed, unless certain circumstances exist.

SECTION 3.

Amends Section 241.153, Health and Safety Code, to alter the terms by which a patient's health care information may be disclosed without written authorization.

SECTION 4.

Amends Section 241.154, Health and Safety Code, to authorize a hospital or its agent to charge a reasonable fee for execution of an affidavit, among other services. Prohibits a hospital from charging a fee for providing an itemized billing statement to a patient or third-party payor, rather than for an itemized billing statement.

SECTION 6.

Changes the effective date from "upon passage" to "90 days after adjournment".