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## HOUSE COMMITTEE OF REFERENCE REPORT

| February 27, 2024   |
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| Chair of Committee Date   |
| Committee on <u>Health &amp; Human Services</u> .   |
| After consideration on the merits, the Committee recommends the following:  |
| HB24-1217 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:               |
| Amend printed bill, page 3, lines 4 and 5, strike "FOR INDIVIDUALS SEEKING" and substitute "REGARDING".   |
| Page 3, line 7, strike "Constitutes" and substitute "Must contain all elements necessary to constitute".  |
| Page 3, line 9, strike "Constitutes" and substitute "Must contain all elements necessary to constitute".  |
| Page 3, strike lines 13 through 16.   |
| Page 3, strike lines 17 through 20 and substitute:  |
| "(I) CLEARLY STATES THAT THE RELEASE FORM PERMITS DISCLOSURE OF AN INDIVIDUAL'S PROTECTED HEALTH INFORMATION BUT DOES NOT REQUIRE DISCLOSURE;". |
| Renumber succeeding subparagraphs accordingly.  |
| Page 3, line 22, strike "HAVE CONSENTED" and substitute "THE INDIVIDUAL HAS AUTHORIZED".  |
| Page 4, line 4, strike "SIX" and substitute "TWELVE".   |

Page 4, strike lines 11 through 14 and substitute:

"(3) NOTHING IN THIS SECTION REQUIRES A PERSON TO USE OR

RELY ON THE RELEASE FORM CREATED PURSUANT TO THIS SECTION WHEN

- 1 AUTHORIZATION FOR DISCLOSURE OF PROTECTED HEALTH INFORMATION 2 IS REQUIRED UNDER HIPAA OR 42 CFR 2.
  - (4) NOTHING IN THIS SECTION REQUIRES AUTHORIZATION WHEN DISCLOSURE OF PROTECTED HEALTH INFORMATION IS PERMITTED WITHOUT AUTHORIZATION UNDER HIPAA OR 42 CFR 2.
- 6 (5) If a release form conflicts or is inconsistent with 7 ANOTHER AUTHORIZATION OR CONSENT FORM FOR AN INDIVIDUAL, A 8 PROVIDER OR COVERED ENTITY MAY CHOOSE WHETHER TO RELY UPON THE 9 RELEASE FORM AND INCURS NO LIABILITY AS A CONSEQUENCE OF
- 10 CHOOSING TO RELY UPON THE RELEASE FORM OR TO NOT RELY UPON THE
- 11 RELEASE FORM. A PROVIDER OR COVERED ENTITY INCURS NO LIABILITY
- 12 FOR NOT DISCLOSING INFORMATION PROVIDED IN A RELEASE FORM IF THE
- 13 PROVIDER OR COVERED ENTITY HAS A GOOD FAITH, REASONABLE BELIEF
- 14 THAT THE INDIVIDUAL HAS REVOKED THE RELEASE FORM. A PROVIDER OR
- 15 COVERED ENTITY IS PRESUMED TO HAVE ACTED IN GOOD FAITH AND WITH
- 16 A REASONABLE BELIEF. THIS PRESUMPTION MAY BE REBUTTED BY CLEAR
- 17 AND CONVINCING EVIDENCE.".

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- 18 Renumber succeeding subsections accordingly.
- 19 Page 5, after line 27 insert:
- 20 "(g) DISCUSS THE ROLE OF THE CENTRALIZED DIGITAL CONSENT
- 21 REPOSITORY IN CRISIS SITUATIONS AND HOW TO ENSURE EMERGENT
- 22 INFORMATION IS COMMUNICATED IN A TIMELY MANNER BETWEEN A
- 23 PATIENT, A PROVIDER OR FACILITY, AND OTHER AUTHORIZED PERSONS;".
- 24 Reletter succeeding paragraphs accordingly.
- 25 Page 6, line 11, before "LICENSED" insert "A REPRESENTATIVE OF A
- 26 HEALTH INFORMATION ORGANIZATION NETWORK; A REPRESENTATIVE OF
- 27 A HOSPITAL;".
- 28 Page 6, line 12, strike "PROVIDERS INCLUDING," and substitute
- 29 "PROVIDERS, INCLUDING".
- 30 Page 7, after line 16 insert:
- 31 "(VII) FAMILY HISTORY, RELATIONSHIPS, OR SOCIAL CONTEXT;".
- 32 Renumber succeeding subparagraphs accordingly.
- Page 8, line 17, strike "ENTITY." and substitute "ENTITY, UNLESS A

- 1 PATIENT HAS AUTHORIZED THE DISCLOSURE OF THE PATIENT'S FORM OR OF
- 2 THE PATIENT'S FULL MENTAL HEALTH RECORD OR UNLESS A COURT OR
- 3 OTHER LEGAL AUTHORITY HAS ORDERED SUCH DISCLOSURE.".
- 4 Page 8, after line 25 insert:
- 5 "(e) If a patient explicitly objects to a covered entity
- 6 RECEIVING INFORMATION REGARDING THE PATIENT FROM A SPECIFIC
- 7 INDIVIDUAL, THE COVERED ENTITY SHALL NOT ACCEPT INFORMATION
- 8 FROM THE SPECIFIC INDIVIDUAL.".

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