



General Assembly

February Session, 2024

Raised Bill No. 5411

LCO No. 2381



Referred to Committee on JUDICIARY

Introduced by:
(JUD)

***AN ACT CONCERNING REQUESTS FOR HEALTH RECORDS AND
THE FEES CHARGED FOR ACCESS TO SUCH RECORDS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 31-294f of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2024*):

3 (a) An injured employee shall submit [himself] to an examination by
4 a reputable practicing physician or surgeon, at any time while claiming
5 or receiving compensation, upon the reasonable request of the employer
6 or at the direction of the administrative law judge. The examination
7 shall be performed to determine the nature of the injury and the
8 incapacity resulting from the injury. The physician or surgeon shall be
9 selected by the employer from an approved list of physicians and
10 surgeons prepared by the chairperson of the Workers' Compensation
11 Commission and shall be paid by the employer. At any examination
12 requested by the employer or directed by the administrative law judge
13 under this section, the injured employee shall be allowed to have in
14 attendance any reputable practicing physician or surgeon that the
15 employee obtains and [pays for himself] is paid for by the employee.

16 The employee shall submit to all other physical examinations as
17 required by this chapter. The refusal of an injured employee to submit
18 [himself] to a reasonable examination under this section shall suspend
19 [his] the employee's right to compensation during such refusal.

20 (b) All medical reports concerning any injury of an employee
21 sustained in the course of [his] the employee's employment shall be
22 furnished [within] not later than thirty days after the date of completion
23 of the reports, at the same time and in the same manner, to the employer
24 and the employee or [his] the employee's attorney.

25 (c) The administrative law judge may penalize a practicing physician,
26 surgeon or a third-party vendor acting on behalf of such physician or
27 surgeon if a medical report is not furnished within thirty days after the
28 date of completion of the report. Penalties imposed by an administrative
29 law judge shall include (1) issuance of written notification of
30 noncompliance in furnishing a medical report to the practicing
31 physician, surgeon or a third-party vendor acting on behalf of such
32 physician or surgeon, (2) an order requiring a physician, surgeon or
33 third-party vendor to appear at a hearing to explain the reasons for not
34 furnishing the report in a timely fashion, or (3) a fine not to exceed five
35 hundred dollars payable to the claimant.

36 Sec. 2. Section 20-7c of the general statutes is repealed and the
37 following is substituted in lieu thereof (*Effective October 1, 2024*):

38 (a) For purposes of this section, "clinical laboratory" has the same
39 meaning as provided in section 19a-490. "Clinical laboratory" does not
40 include any state laboratory established by the Department of Public
41 Health pursuant to section 19a-26 or 19a-29.

42 (b) Except as provided for in subsection (e) of this section, a provider
43 shall (1) supply to a patient upon request complete and current
44 information possessed by that provider concerning any diagnosis,
45 treatment and prognosis of the patient, and (2) notify a patient of any
46 test results in the provider's possession or requested by the provider for
47 the purposes of diagnosis, treatment or prognosis of such patient. In

48 addition, upon the request of a patient or a provider who orders medical
49 tests on behalf of a patient, a clinical laboratory shall provide medical
50 test results relating to the patient to (A) the patient, or (B) any other
51 provider who is treating the patient for the purposes of diagnosis,
52 treatment or prognosis of such patient.

53 (c) A provider, who requests that his or her patient submit to repeated
54 medical testing at regular intervals, over a specified period of time, for
55 purposes of ascertaining a diagnosis, prognosis or recommended course
56 of treatment for such patient, may issue a single authorization that
57 allows the entity that conducts such medical testing, including, but not
58 limited to, a clinical laboratory, to directly communicate the results of
59 such testing to the patient for the period of time that such testing is
60 requested by the provider.

61 (d) (1) Upon a written request of a patient, a patient's attorney or
62 authorized representative, or pursuant to a written authorization, a
63 provider, or entity acting on behalf of a provider, except as provided in
64 section 4-194, shall furnish to the person making such request a copy of
65 the patient's health record, including but not limited to, bills, x-rays and
66 copies of laboratory reports, contact lens specifications based on
67 examinations and final contact lens fittings given within the preceding
68 three months or such longer period of time as determined by the
69 provider but no longer than six months, records of prescriptions and
70 other technical information used in assessing the patient's health
71 condition. The written request shall specify if a paper or electronic copy
72 of the record is preferred, and if an electronic copy is preferred and is
73 able to be produced, then the provider, or entity acting on behalf of the
74 provider, shall furnish the electronic copy of the requested record. (2)
75 No provider, or entity acting on behalf of the provider, shall refuse to
76 return to a patient original records or copies of records that the patient
77 has brought to the provider from another provider. When returning
78 records to a patient, a provider may retain copies of such records for the
79 provider's file, provided such provider does not charge the patient for
80 the costs incurred in copying such records. No provider, or entity acting
81 on behalf of the provider, shall charge more than [sixty-five cents per

82 page, including] than the following for a paper copy of a health record:
83 (A) Seventy-five cents per page for pages one to twenty-five, (B) fifty
84 cents per page for pages twenty-six to fifty, (C) twenty-five cents per
85 page for pages fifty-one to ninety-nine, and (D) ten cents per page for
86 page one hundred and each succeeding page thereafter. Such fees shall
87 include any [research fees, handling] clerical fees or related costs, and
88 the cost of first class postage, if applicable, for furnishing a health record
89 pursuant to this subsection, except such provider, or entity acting on
90 behalf of the provider, may charge a patient the amount necessary to
91 cover the cost of materials for furnishing a copy of an x-ray, provided
92 no such charge shall be made for furnishing a health record or part
93 thereof to a patient, a patient's attorney or authorized representative if
94 the record or part thereof is necessary for the purpose of supporting a
95 claim or appeal under any provision of the Social Security Act or a claim
96 or appeal for veterans' benefits under any provision of Title 38 of the
97 United States Code or chapter 506 and the request is accompanied by
98 documentation of the claim or appeal. If an electronic copy of the health
99 record is requested and furnished, the provider, or an entity acting on
100 behalf of the provider, shall charge the requestor not more than thirty-
101 five cents per page with a maximum fee of two hundred fifty dollars per
102 record. No provider, or entity acting on behalf of a provider, shall
103 charge a research fee or handling fee for a paper or electronic health
104 record unless the patient, the patient's attorney or authorized
105 representative requests that the provider, or an entity acting on behalf
106 of the provider, make redactions to the requested health record. If a
107 research fee or handling fee is charged, such fee shall not exceed fifty
108 dollars. If a patient, a patient's attorney or authorized representative
109 makes a request of the provider, or an entity acting on behalf of a
110 provider, to expedite the furnishing of a health record within seventy-
111 two hours of the time of receipt of such request, a provider, or entity
112 acting on behalf of a provider, may charge not more than an additional
113 fee of fifty dollars to expedite the furnishing of the health record. On
114 and after January 1, 2025, the Commissioner of Public Health shall
115 publish on the department's Internet web site, the fees prescribed for the
116 furnishing of paper or electronic copies of a health record pursuant to

117 this subdivision. On January 1, 2026, and each January first thereafter,
118 the Commissioner of Public Health shall adjust the fee schedule
119 prescribed in this subdivision for the furnishing of paper or electronic
120 copies of a health record, based upon the consumer price index
121 calculator published by the United States Bureau of Labor and Statistics.
122 (3) A provider, or an entity acting on behalf of a provider, shall furnish
123 a health record requested pursuant to this section [within] not later than
124 thirty days after the date of receipt of the request. If such provider, or an
125 entity acting on behalf of a provider, fails to furnish the health record
126 requested to the requestor not later than thirty days after the date of
127 receipt of request, the fee charged to furnish such health record shall be
128 reduced by fifty per cent. If such provider, or an entity acting on behalf
129 of a provider, fails to furnish the health record requested to the
130 requestor not later than sixty days after the date of receipt of the request,
131 the fee charged to furnish such health record shall be reduced by
132 seventy-five per cent. If such provider, or an entity acting on behalf of a
133 provider, fails to furnish the health record requested to the requestor not
134 later than ninety days after the date of receipt of the request, the fee
135 charged to furnish such health record shall be reduced by ninety per
136 cent. Nothing in this subsection shall be construed to require a provider,
137 or an entity acting on behalf of a provider, to furnish a requested health
138 record until such time as a medical authorization form that is compliant
139 with the provisions of the Health Insurance Portability and
140 Accountability Act of 1996, P.L. 104-191, as amended from time to time,
141 has been submitted to the provider, or an entity acting on behalf of a
142 provider. (4) No health care provider, or entity acting on behalf of the
143 provider, who has purchased or assumed the practice of a provider who
144 is retiring or deceased, may refuse to return original records or copied
145 records to a patient who decides not to seek care from the successor
146 provider. When returning records to a patient who has decided not to
147 seek care from a successor provider, such provider may not charge a
148 patient for costs incurred in copying the records of the retired or
149 deceased provider.

150 (e) If a provider reasonably determines that the information is

151 detrimental to the physical or mental health of the patient, or is likely to
152 cause the patient to harm himself, herself or another, the provider may
153 withhold the information from the patient. The information may be
154 supplied to an appropriate third party or to another provider who may
155 release the information to the patient. If disclosure of information is
156 refused by a provider under this subsection, any person aggrieved
157 thereby may, within thirty days of such refusal, petition the superior
158 court for the judicial district in which such person resides for an order
159 requiring the provider to disclose the information. Such a proceeding
160 shall be privileged with respect to assignment for trial. The court, after
161 hearing and an in camera review of the information in question, shall
162 issue the order requested unless it determines that such disclosure
163 would be detrimental to the physical or mental health of the person or
164 is likely to cause the person to harm himself, herself or another.

165 (f) The provisions of this section shall not apply to any information
166 relative to any psychiatric or psychological problems or conditions.

167 (g) In the event that a provider abandons his or her practice, the
168 Commissioner of Public Health may appoint a licensed health care
169 provider to be the keeper of the records, who shall be responsible for
170 disbursing the original records to the provider's patients, upon the
171 request of any such patient.

172 (h) The Commissioner of Public Health shall adopt regulations, in
173 accordance with the provisions of chapter 54, to carry out the provisions
174 of this section.

175 Sec. 3. Section 19a-490b of the general statutes is repealed and the
176 following is substituted in lieu thereof (*Effective October 1, 2024*):

177 (a) Upon the written request of a patient or the patient's attorney or
178 authorized representative, or pursuant to a written authorization, an
179 institution licensed pursuant to this chapter, or an entity acting on
180 behalf of such institution, shall furnish to the person making such
181 request a copy of the patient's health record, including but not limited
182 to, copies of bills, laboratory reports, prescriptions and other technical

183 information used in assessing the patient's health condition. The written
184 request shall specify if a paper or electronic copy of the record is
185 preferred, and if an electronic copy is preferred and is able to be
186 produced, then the institution or an entity acting on behalf of the
187 institution shall furnish the electronic copy of the requested record. In
188 addition, an institution shall provide the patient or the patient's
189 designated health care provider with a reasonable opportunity to
190 examine retained tissue slides and retained pathology tissue blocks.
191 Upon the written request of the patient, the patient's attorney or the
192 patient's designated health care provider, an institution shall send the
193 original retained tissue slide or original retained tissue block directly to
194 the patient's designated licensed institution, laboratory or physician. If
195 the original slide or block is not available or if a new section cut of the
196 original slide or block is a fair representation of the original slide or
197 block, then the institution may send the new section cut, which is clearly
198 labeled as a new section cut, to the patient's designated health care
199 provider. Any patient or the patient's attorney or authorized
200 representative who is provided with an original retained slide, tissue
201 block or a new section under the provisions of this subsection shall be
202 solely responsible for safeguarding and returning the slide, block or new
203 section to the institution. Any institution or laboratory that has released
204 an original slide, an original tissue block or new section pursuant to the
205 provisions of this subsection shall not be subject to any liability arising
206 out of releasing or not retaining the slide, block or new section and no
207 cause of action for damages shall arise against any such institution for
208 releasing or not retaining the slide, block or new section. No such
209 institution, or an entity acting on behalf of such institution, shall charge
210 more than [sixty-five cents per page, including] the following for a
211 paper copy of a health record: (A) Seventy-five cents per page for pages
212 one to twenty-five, (B) fifty cents per page for pages twenty-six to fifty,
213 (C) twenty-five cents per page for pages fifty-one to ninety-nine, and (D)
214 ten cents per page for page one hundred and each succeeding page
215 thereafter. Such fees shall include any [research fees,] clerical fees,
216 [handling fees] or related costs, and the cost of first class postage, if
217 applicable, for furnishing or providing access to a health record

218 pursuant to this subsection, except such an institution, or entity acting
219 on behalf of the institution, may charge the amount necessary to cover
220 its cost of materials for furnishing a copy of an x-ray or for furnishing
221 an original retained slide, an original tissue block or a new section cut
222 from a retained pathology tissue block. If an electronic copy of the health
223 record is requested and furnished, the institution, or an entity acting on
224 behalf of the institution, shall charge the requestor not more than thirty-
225 five cents per page with a maximum fee of two hundred fifty dollars per
226 record. No institution, or entity acting on behalf of an institution, shall
227 charge a research fee or handling fee for a paper or electronic health
228 record unless the patient, the patient's attorney or authorized
229 representative, requests that the institution, or an entity acting on behalf
230 of the institution, make redactions to the requested health record. If a
231 research fee or handling fee is charged, such fee shall not exceed fifty
232 dollars. If a patient, a patient's attorney or authorized representative
233 makes a request of the institution, or an entity acting on behalf of an
234 institution, to expedite the furnishing of a health record within seventy-
235 two hours of the time of receipt of such request, the institution, or entity
236 acting on behalf of the institution, may charge not more than an
237 additional fee of fifty dollars to expedite the furnishing of the health
238 record. On and after January 1, 2025, the Commissioner of Public Health
239 shall publish on the department's Internet web site, the fees prescribed
240 for the furnishing of paper or electronic copies of a health record
241 pursuant to this subsection. On January 1, 2026, and each January first
242 thereafter, the Commissioner of Public Health shall adjust the fee
243 schedule prescribed in this subsection for the furnishing of paper or
244 electronic copies of a health record, based upon the consumer price
245 index calculator published by the United States Bureau of Labor and
246 Statistics. For purposes of this subsection, "health care provider" means
247 an institution or laboratory licensed under this chapter or licensed in the
248 state where located, a physician licensed under chapter 370 or licensed
249 in the state where located or an advanced practice registered nurse
250 licensed under chapter 378 or licensed in the state where located.

251 (b) No institution licensed pursuant to this chapter shall charge for

252 furnishing a health record or part thereof to a patient, his attorney or
253 conservator if the record or part thereof is necessary for the purpose of
254 supporting a claim or appeal under any provision of the Social Security
255 Act or a claim or appeal for veterans' benefits under any provision of
256 Title 38 of the United States Code or chapter 506 and the request for the
257 records is accompanied by documentation of the claim or appeal. An
258 institution shall furnish the requested record [within] not later than
259 thirty days [of] after the date of receipt of the request, unless the request
260 was received in less than thirty days subsequent to the date the patient
261 was discharged, in which case the institution shall furnish the requested
262 record upon its completion. If such institution, or an entity acting on
263 behalf of an institution, fails to furnish the health record requested to
264 the requestor not later than thirty days after the date of receipt of the
265 request, the fee charged to furnish such health record shall be reduced
266 by fifty per cent. If such institution, or an entity acting on behalf of an
267 institution, fails to furnish the health record requested to the requestor
268 not later than sixty days after the date of receipt of the request, the fee
269 charged to furnish such health record shall be reduced by seventy-five
270 per cent. If such institution, or an entity acting on behalf of an
271 institution, fails to furnish the health record requested to the requestor
272 not later than ninety days after the date of receipt of the request, the fee
273 charged to furnish such health record shall be reduced by ninety per
274 cent. Nothing in this subsection shall be construed to require an
275 institution, or an entity acting on behalf of an institution, to furnish a
276 requested health record until such time as a medical authorization form
277 that is compliant with the provisions of the Health Insurance Portability
278 and Accountability Act of 1996, P.L. 104-191, as amended from time to
279 time, has been submitted to the institution, or an entity acting on behalf
280 of an institution.

281 (c) Each institution licensed pursuant to this chapter shall maintain
282 information regarding each patient's status as a veteran, as defined in
283 subsection (a) of section 27-103. Said information shall be made
284 available, upon request, to any duly authorized representative of the
285 Department of Veterans Affairs.

286 (d) No institution may deny a person the records available under
287 subsection (a) of this section because of the person's inability to pay the
288 required fees. An affidavit from such person attesting to an inability to
289 pay such fees shall be presumptive evidence thereof.

290 (e) Each institution licensed pursuant to this chapter that ceases to
291 operate shall, at the time it relinquishes its license to the department,
292 provide to the department a certified document specifying: (1) The
293 location at which patient health records will be stored; (2) the procedure
294 that has been established for patients, former patients or their
295 authorized representatives to secure access to such health records; (3)
296 provisions for storage, should the storage location cease to operate or
297 change ownership; and (4) that the department is authorized to enforce
298 the certified document should the storage location cease to operate or
299 change ownership. An institution that fails to comply with the terms of
300 a certified document provided to the department in accordance with
301 this subsection shall be assessed a civil penalty not to exceed one
302 hundred dollars per day for each day of noncompliance with the terms
303 of the certified agreement.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2024</i>	31-294f
Sec. 2	<i>October 1, 2024</i>	20-7c
Sec. 3	<i>October 1, 2024</i>	19a-490b

Statement of Purpose:

To establish time and cost parameters relating to requests for health records.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]