



General Assembly

January Session, 2019

Raised Bill No. 7301

LCO No. 5212



Referred to Committee on PUBLIC HEALTH

Introduced by:
(PH)

**AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING REMOTE ACCESS TO
ELECTRONIC MEDICAL RECORDS BY THE DEPARTMENT OF
PUBLIC HEALTH.**

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

1 Section 1. Section 19a-215 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2019*):

3 (a) For the purposes of this section:

4 (1) "Clinical laboratory" means any facility or other area used for
5 microbiological, serological, chemical, hematological,
6 immunohematological, biophysical, cytological, pathological or other
7 examinations of human body fluids, secretions, excretions or excised
8 or exfoliated tissues, for the purpose of providing information for the
9 diagnosis, prevention or treatment of any human disease or
10 impairment, for the assessment of human health or for the presence of
11 drugs, poisons or other toxicological substances.

12 (2) "Commissioner's list of reportable diseases, emergency illnesses
13 and health conditions" and "commissioner's list of reportable

14 laboratory findings" means the lists developed pursuant to section 19a-
15 2a.

16 (3) "Confidential" means confidentiality of information pursuant to
17 section 19a-25.

18 (4) "Health care provider" means a person who has direct or
19 supervisory responsibility for the delivery of health care or medical
20 services, including licensed physicians, nurse practitioners, nurse
21 midwives, physician assistants, nurses, dentists, medical examiners
22 and administrators, superintendents and managers of health care
23 facilities.

24 (5) "Reportable diseases, emergency illnesses and health conditions"
25 means the diseases, illnesses, conditions or syndromes designated by
26 the Commissioner of Public Health on the list required pursuant to
27 section 19a-2a.

28 (b) A health care provider shall report each case occurring in such
29 provider's practice, of any disease on the commissioner's list of
30 reportable diseases, emergency illnesses and health conditions to the
31 director of health of the town, city or borough in which such case
32 resides and to the Department of Public Health, no later than twelve
33 hours after such provider's recognition of the disease. Such reports
34 shall be in writing, by telephone or in an electronic format approved
35 by the commissioner. [Such reports of disease shall be confidential and
36 not open to public inspection except as provided for in section 19a-25.]

37 (c) A clinical laboratory shall report each finding identified by such
38 laboratory of any disease identified on the commissioner's list of
39 reportable laboratory findings to the Department of Public Health not
40 later than forty-eight hours after such laboratory's finding. A clinical
41 laboratory that reports an average of more than thirty findings per
42 month shall make such reports electronically in a format approved by
43 the commissioner. Any clinical laboratory that reports an average of
44 less than thirty findings per month shall submit such reports, in

45 writing, by telephone or in an electronic format approved by the
46 commissioner. [All such reports shall be confidential and not open to
47 public inspection except as provided for in section 19a-25.] The
48 Department of Public Health shall provide a copy of all such reports to
49 the director of health of the town, city or borough in which the affected
50 person resides or, in the absence of such information, the town where
51 the specimen originated.

52 (d) When a local director of health, the local director's authorized
53 agent or the Department of Public Health receives a report of a disease
54 or laboratory finding on the commissioner's lists of reportable diseases,
55 emergency illnesses and health conditions and laboratory findings, the
56 local director of health, the local director's authorized agent or the
57 Department of Public Health may contact first the reporting health
58 care provider and then the person with the reportable finding to obtain
59 such information as may be necessary to lead to the effective control of
60 further spread of such disease. In the case of reportable communicable
61 diseases and laboratory findings, this information may include
62 obtaining the identification of persons who may be the source or
63 subsequent contacts of such infection.

64 (e) The Department of Public Health shall have access, including
65 remote access, in a manner approved by the Commissioner of Public
66 Health, to each electronic medical record that concerns a reportable
67 disease, emergency illness or health condition listed by the
68 commissioner pursuant to subdivision (9) of section 19a-2a that occurs
69 at a hospital, as defined in section 19a-490, licensed pursuant to
70 chapter 368v.

71 [(e)] (f) All personal information obtained from disease prevention
72 and control investigations as performed in subsections (c) and (d) of
73 this section including the health care provider's name and the identity
74 of the reported case of disease and suspected source persons and
75 contacts shall not be divulged to anyone and shall be held strictly
76 confidential pursuant to section 19a-25, by the local director of health
77 and the director's authorized agent and by the Department of Public

78 Health.

79 ~~[(f)]~~ (g) Any person who violates any reporting or confidentiality
80 provision of this section shall be fined not more than five hundred
81 dollars. No provision of this section shall be deemed to supersede
82 section 19a-584.

83 Sec. 2. Subsection (c) of section 19a-72 of the general statutes is
84 repealed and the following is substituted in lieu thereof (*Effective*
85 *October 1, 2019*):

86 (c) The Department of Public Health shall be provided such access
87 to the records of any health care provider, as the department deems
88 necessary, and remote access to the records of any hospital to perform
89 case finding or other quality improvement audits to ensure
90 completeness of reporting and data accuracy consistent with the
91 purposes of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2019</i>	19a-215
Sec. 2	<i>October 1, 2019</i>	19a-72(c)

PH *Joint Favorable*