HOUSE	AMENDMENT	NO.	

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Offered By

AMEND House Committee Substitute for Senate Bill No. 739, Page 1, Section A, Line 2, by inserting after all of said section and line the following:

"191.227. 1. All physicians, chiropractors, hospitals, dentists, and other duly licensed practitioners in this state, herein called "providers", shall, upon written request of a patient, or guardian or legally authorized representative of a patient, furnish a copy of his or her record of that patient's health history and treatment rendered to the person submitting a written request, except that such right shall be limited to access consistent with the patient's condition and sound therapeutic treatment as determined by the provider. Beginning August 28, 1994, such record shall be furnished within a reasonable time of the receipt of the request therefor and upon payment of a fee as provided in this section.

- 2. Health care providers may condition the furnishing of the patient's health care records to the patient, the patient's authorized representative or any other person or entity authorized by law to obtain or reproduce such records upon payment of a fee for:
- (1) (a) [Copying] <u>Search and retrieval</u>, in an amount not more than [twenty-one] <u>twenty-two</u> dollars and [thirty-six cents] <u>one cent</u> plus <u>copying in an amount of</u> fifty <u>two</u> cents per page for the cost of supplies and labor plus, if the health care provider has contracted for off-site records storage and management, any additional labor costs of outside storage retrieval, not to exceed twenty dollars, as adjusted annually pursuant to subsection 5 of this section; or
- (b) [If the health care provider stores records in an electronic or digital format, and provides the requested records and affidavit, if requested, in an electronic or digital format, not more than five dollars plus fifty cents per page or twenty-five dollars total, whichever is less] The records shall be furnished electronically upon payment of the search, retrieval and copying fees set under this section at the time of the request or one hundred dollars total, whichever is less, if such

Action Taken	 Date	 1

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- <u>a. Requests health records to be delivered electronically</u> in a format of the health care provider's choice;
- b. The health care provider stores such records completely in an electronic health record; and
- c. The health care provider is capable of providing the requested records and affidavit, if requested, in an electronic format;
 - (2) Postage, to include packaging and delivery cost; and
 - (3) Notary fee, not to exceed two dollars, if requested.
- 3. Notwithstanding provisions of this section to the contrary, providers may charge for the reasonable cost of all duplications of health care record material or information which cannot routinely be copied or duplicated on a standard commercial photocopy machine.
- 4. The transfer of the patient's record done in good faith shall not render the provider liable to the patient or any other person for any consequences which resulted or may result from disclosure of the patient's record as required by this section.
- 5. Effective February first of each year, the fees listed in subsection 2 of this section shall be increased or decreased annually based on the annual percentage change in the unadjusted, U.S. city average, annual average inflation rate of the medical care component of the Consumer Price Index for All Urban Consumers (CPI-U). The current reference base of the index, as published by the Bureau of Labor Statistics of the United States Department of Labor, shall be used as the reference base. For purposes of this subsection, the annual average inflation rate shall be based on a twelve-month calendar year beginning in January and ending in December of each preceding calendar year. The department of health and senior services shall report the annual adjustment and the adjusted fees authorized in this section on the department's internet website by February first of each year."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

Action Taken	Date	2