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HEALTH INFORMATION EXCHANGE AMENDMENTS
2019 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Brad M. Daw
Senate Sponsor: Allen M. Christensen
LONG TITLE
General Description:
This bill amends provisions relating to the electronic exchange of clinical information.
Highlighted Provisions:
This bill:
 exempts certain persons from civil liability relating to the access or review of
certain clinical health information.
Money Appropriated in this Bill:
None
Other Special Clauses:
None
Utah Code Sections Affected:
AMENDS:
26-1-37 , as last amended by Laws of Utah 2013, Chapter 167
Be it enacted by the Legislature of the state of Utah:
Section 1. Section 26-1-37 is amended to read:
26-1-37. Duty to establish standards for the electronic exchange of clinical health
information Immunity.
(1) For purposes of this section:
(a) "Affiliate" means an organization that directly or indirectly through one or more
intermediaries controls, is controlled by, or is under common control with another
organization.

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30	(b) "Clinical health information" shall be defined by the department by administrative
31	rule adopted in accordance with Subsection (2).
32	(c) "Electronic exchange":
33	(i) includes:
34	(A) the electronic transmission of clinical health data via Internet or extranet; and
35	(B) physically moving clinical health information from one location to another using
36	magnetic tape, disk, or compact disc media; and
37	(ii) does not include exchange of information by telephone or fax.
38	(d) "Health care provider" means a licensing classification that is either:
39	(i) licensed under Title 58, Occupations and Professions, to provide health care; or
40	(ii) licensed under Chapter 21, Health Care Facility Licensing and Inspection Act.
41	(e) "Health care system" shall include:
42	(i) affiliated health care providers;
43	(ii) affiliated third party payers; and
44	(iii) other arrangement between organizations or providers as described by the
45	department by administrative rule.
46	(f) "Qualified network" means an entity that:
47	(i) is a non-profit organization;
48	(ii) is accredited by the Electronic Healthcare Network Accreditation Commission, or
49	another national accrediting organization recognized by the department; and
50	(iii) performs the electronic exchange of clinical health information among multiple
51	health care providers not under common control, multiple third party payers not under common
52	control, the department, and local health departments.
53	(g) "Third party payer" means:
54	(i) all insurers offering health insurance who are subject to Section 31A-22-614.5; and
55	(ii) the state Medicaid program.
56	(2) (a) In addition to the duties listed in Section $26-1-30$, the department shall, in
57	accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act:

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58 (i) define: (A) "clinical health information" subject to this section; and 59 60 (B) "health system arrangements between providers or organizations" as described in 61 Subsection (1)(e)(iii); and (ii) adopt standards for the electronic exchange of clinical health information between 62 63 health care providers and third party payers that are for treatment, payment, health care operations, or public health reporting, as provided for in 45 C.F.R. Parts 160, 162, and 164, 64 Health Insurance Reform: Security Standards. 65 66 (b) The department shall coordinate its rule making authority under the provisions of 67 this section with the rule making authority of the Insurance Department under Section 68 31A-22-614.5. 69 (c) The department shall establish procedures for developing the rules adopted under this section, which ensure that the Insurance Department is given the opportunity to comment 70 71 on proposed rules. 72 (3) (a) Except as provided in Subsection (3)(e), a health care provider or third party 73 payer in Utah is required to use the standards adopted by the department under the provisions 74 of Subsection (2) if the health care provider or third party payer elects to engage in an 75 electronic exchange of clinical health information with another health care provider or third party payer. 76 77 (b) A health care provider or third party payer may disclose information to the department or a local health department, by electronic exchange of clinical health information, 78 79 as permitted by Subsection 45 C.F.R. Sec. 164.512(b). 80 (c) When functioning in its capacity as a health care provider or payer, the department 81 or a local health department may disclose clinical health information by electronic exchange to 82 another health care provider or third party payer. 83 (d) An electronic exchange of clinical health information by a health care provider, a third party payer, the department, [or] a local health department, or a qualified network is a 84 85 disclosure for treatment, payment, or health care operations if it complies with Subsection

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86 (3)(a) or (c) and is for treatment, payment, or health care operations, as those terms are defined 87 in 45 C.F.R. Parts 160, 162, and 164. (e) A health care provider or third party payer is not required to use the standards 88 89 adopted by the department under the provisions of Subsection (2) if the health care provider or third party payer engage in the electronic exchange of clinical health information within a 90 91 particular health care system. 92 (4) Nothing in this section shall limit the number of networks eligible to engage in the 93 electronic data interchange of clinical health information using the standards adopted by the 94 department under Subsection (2)(a)(ii). 95 (5) (a) The department, a local health department, a health care provider, a third party paver, or a qualified network is not subject to civil liability for a disclosure of clinical health 96 97 information if the disclosure is in accordance [both] with: 98 (i) Subsection (3)(a); and [with] 99 (ii) Subsection (3)(b), [(3)(c), or (3)(d)] (c), or (d). 100 (b) The department, a local health department, a health care provider, a third party 101 payer, or a qualified network that accesses or reviews clinical health information from or through the electronic exchange in accordance with the requirements in this section is not 102 103 subject to civil liability for the access or review. 104 (6) Within a qualified network, information generated or disclosed in the electronic 105 exchange of clinical health information is not subject to discovery, use, or receipt in evidence

106 in any legal proceeding of any kind or character.