## SENATE BILL 600

K1 SB 802/06 - FIN 71r0664

By: Senator Kittleman

Introduced and read first time: February 2, 2007

Assigned to: Finance

## A BILL ENTITLED

1 AN ACT concerning

Workers' Compensation Commission – Authorization for Release of Medical Information – Work–Related Injury or Occupational Disease

- FOR the purpose of requiring an authorization for the release of certain medical information to be filed with the Workers' Compensation Commission when a claim is filed for an alleged work-related injury or occupational disease; requiring a health care provider to disclose certain medical information on receipt of a certain authorization filed with the Commission; and generally relating to the authorization for the release of medical information in a certain manner and the filing of workers' compensation claims.
- 11 BY repealing and reenacting, with amendments,
- 12 Article Health General
- 13 Section 4–303
- 14 Annotated Code of Maryland
- 15 (2005 Replacement Volume and 2006 Supplement)
- 16 BY repealing and reenacting, with amendments,
- 17 Article Labor and Employment
- 18 Section 9–709, 9–710, and 9–711
- 19 Annotated Code of Maryland
- 20 (1999 Replacement Volume and 2006 Supplement)
- 21 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
- 22 MARYLAND, That the Laws of Maryland read as follows:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1	Article - Health - General
2	4–303.
3 4	(a) A health care provider shall disclose a medical record on the authorization of a person in interest in accordance with this section.
5 6	(b) Except as otherwise provided in [subsection (c)] SUBSECTIONS (C) AND (D) of this section, an authorization shall:
7	(1) Be in writing, dated, and signed by the person in interest;
8	(2) State the name of the health care provider;
9	(3) Identify to whom the information is to be disclosed;
10 11	(4) State the period of time that the authorization is valid, which may not exceed 1 year, except:
12 13	(i) In cases of criminal justice referrals, in which case the authorization shall be valid until 30 days following final disposition; or
14 15 16	(ii) In cases where the patient on whom the medical record is kept is a resident of a nursing home, in which case the authorization shall be valid until revoked, or for any time period specified in the authorization; and
17 18	(5) Apply only to a medical record developed by the health care provider unless in writing:
19 20	(i) The authorization specifies disclosure of a medical record that the health care provider has received from another provider; and
21	(ii) The other provider has not prohibited redisclosure.
22 23	(c) A health care provider shall disclose a medical record on receipt of a preauthorized form that is part of an application for insurance.
24 25 26 27	(D) A HEALTH CARE PROVIDER SHALL DISCLOSE A MEDICAL RECORD ON RECEIPT OF AN AUTHORIZATION FOR THE RELEASE OF RELEVANT MEDICAL INFORMATION THAT IS FILED WITH THE WORKERS' COMPENSATION COMMISSION.

2	interest may revoke an authorization in writing.
3 4	(2) A revocation of an authorization becomes effective on the date of receipt by the health care provider.
5 6	(3) A disclosure made before the effective date of a revocation is no affected by the revocation.
7 8	[(e)] <b>(F)</b> A copy of the following shall be entered in the medical record of patient or recipient:
9	(1) A written authorization;
10	(2) Any action taken in response to an authorization; and
11	(3) Any revocation of an authorization.
12	Article - Labor and Employment
13	9–709.
14 15 16	(a) Except as provided in subsection (c) of this section, if a covered employer suffers an accidental personal injury, the covered employee, within 60 days after the date of the accidental personal injury, shall file with the Commission:
17	(1) a claim application form; [and]
18 19	(2) AN AUTHORIZATION FOR THE SIMULTANEOUS RELEASE OF ALL RELEVANT MEDICAL INFORMATION; AND
20 21	[(2)] (3) if the covered employee was attended by a physician chose by the covered employee, the report of the physician.
22 23 24	(b) (1) Unless excused by the Commission under paragraph (2) of this subsection, failure to file a claim in accordance with subsection (a) of this section bar a claim under this title.
25 26	(2) The Commission may excuse a failure to file a claim in accordance with subsection (a) of this section if the Commission finds:

1 2	(i) that the employer or its insurer has not been prejudiced by the failure to file the claim; or
3	(ii) another sufficient reason.
4 5 6	(3) Notwithstanding paragraphs (1) and (2) of this subsection, if a covered employee fails to file a claim within 2 years after the date of the accidental personal injury, the claim is completely barred.
7 8 9	(c) If a covered employee is disabled due to an accidental personal injury from ionizing radiation, the covered employee shall file a claim with the Commission within 2 years after:
10	(1) the date of disablement; or
11 12	(2) the date when the covered employee first knew that the disablement was due to ionizing radiation.
13 14 15 16	(d) (1) If it is established that a failure to file a claim in accordance with this section was caused by fraud or by facts and circumstances amounting to an estoppel, the covered employee shall file a claim with the Commission within 1 year after:
17	(i) the date of the discovery of the fraud; or
18 19	(ii) the date when the facts and circumstances that amount to estoppel ceased to operate.
20 21	(2) Failure to file a claim in accordance with paragraph (1) of this subsection bars a claim under this title.
22	9–710.
23 24	(a) This section does not apply to a claim for death due to an accidental personal injury from ionizing radiation.
25 26 27	(b) If a covered employee dies from an accidental personal injury, the dependents of the covered employee or an individual on their behalf shall, within 18 months after the date of death, file with the Commission:
28	(1) a claim application form;

1 2	(2) AN AUTHORIZATION FOR THE SIMULTANEOUS RELEASE OF ALL RELEVANT MEDICAL INFORMATION;
3	[(2)] <b>(3)</b> proof of death;
4 5	[(3)] <b>(4)</b> certificates of any physician who attended the covered employee; and
6 7	[(4)] <b>(5)</b> any other proof that the Commission may require by regulation.
8 9 10 11	(c) (1) If it is established that a failure to file a claim in accordance with this section was caused by fraud or by facts and circumstances amounting to an estoppel, the dependents of the covered employee or an individual on their behalf shall file a claim [application] with the Commission within 1 year after:
12	(i) the date of the discovery of the fraud; or
13 14	(ii) the date when the facts and circumstances that amount to estoppel cease to operate.
15 16	(2) Failure to file a claim [application] in accordance with paragraph (1) of this subsection bars a claim under this title.
17	9–711.
18 19 20 21 22 23	(a) If a covered employee suffers a disablement or death as a result of an occupational disease, the covered employee or the dependents of the covered employee shall file a claim <b>APPLICATION FORM AND AN AUTHORIZATION FOR THE SIMULTANEOUS RELEASE OF ALL RELEVANT MEDICAL INFORMATION</b> with the Commission within 2 years, or in the case of pulmonary dust disease within 3 years, after the date:
24	(1) of disablement or death; or
25 26 27	(2) when the covered employee or the dependents of the covered employee first had actual knowledge that the disablement was caused by the employment.

Unless waived under subsection (c) of this section, failure to file a claim

in accordance with subsection (a) of this section bars a claim under this title.

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- The defense of failure to file a claim in accordance with subsection (a) of 1 (c) 2 this section is waived if the employer or its insurer: fails to raise the defense of the failure to file the claim at a hearing 3 **(1)** on the claim before the Commission makes any award or decision; 4 5 (2)pays compensation for the disability or death resulting from the 6 occupational disease; or 7 (3)by its affirmative conduct leads the covered employee or other 8 claimant to reasonably believe that the requirement of filing a claim has been waived.
- 9 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 10 October 1, 2007.