Senate

General Assembly

File No. 738

January Session, 2025

Substitute Senate Bill No. 1437

Senate, April 23, 2025

The Committee on Judiciary reported through SEN. WINFIELD of the 10th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

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:

Section 1. Section 31-294f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2025*):

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

employee obtains and [pays for himself] is paid for by the employee. The employee shall submit to all other physical examinations as required by this chapter. The refusal of an injured employee to submit [himself] to a reasonable examination under this section shall suspend [his] the employee's right to compensation during such refusal.

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

(c) The administrative law judge may penalize a practicing physician, surgeon or a third-party vendor acting on behalf of such physician or surgeon if a medical report is not furnished within thirty days of the date of completion of the report. Penalties imposed by an administrative law judge may include (1) issuance of written notification to the practicing physician, surgeon or a third-party vendor acting on behalf of such physician or surgeon of noncompliance in furnishing a medical report, or (2) an order requiring a physician, surgeon or third-party vendor to appear at a hearing to explain the reasons for not furnishing the report in a timely fashion. If a practicing physician, surgeon or a third-party vendor acting on behalf of such physician or surgeon fails to appear for a hearing to explain the reasons for not furnishing the report in a timely fashion, then the administrative law judge may impose a fine not to exceed five hundred dollars payable to the claimant.

Sec. 2. Section 19a-25g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2025*):

(a) Each institution, as defined in section 19a-490, except a facility operated by the Department of Mental Health and Addiction Services and the hospital and psychiatric residential treatment facility units of the Albert J. Solnit Children's Center, shall, upon receipt of a medical records request directed by the patient or the patient's representative, provide an electronic copy of such patient's medical records to another such institution (1) as soon as feasible, but not later than six days after

such request is received by the institution, if such request is urgent, or (2) not later than seven business days after such request is received, if such request is not urgent. Notwithstanding any **[**other**]** provision of the general statutes, an institution providing an electronic copy of a patient's medical records pursuant to the provisions of this section shall not be required to obtain specific written consent from such patient before providing such electronic copy.

(b) (1) Each institution, as defined in section 19a-490, except a facility operated by the Department of Mental Health and Addiction Services and the hospital and psychiatric residential treatment facility units of the Albert J. Solnit Children's Center, shall, upon receipt of a medical records request directed by the patient or the patient's representative, provide an electronic copy of such patient's medical records to the patient's attorney not later than twenty business days after such request is received. Notwithstanding any provision of the general statutes, an institution providing an electronic copy of a patient's medical records pursuant to the provisions of this subsection shall not be required to obtain specific written consent from such patient before providing such electronic copy.

(2) Nothing in this subsection shall relieve a patient or the patient's authorized representative, including the patient's attorney, from being responsible to pay reasonable charges for copies of records as set forth in section 19a-490b as may apply, provided the maximum charge for records provided to a patient, the patient's attorney or the patient's authorized representative shall be the greater of (A) the fees allowed pursuant to 45 CFR 164.524(c)(4), or (B) two hundred fifty dollars, plus the costs of postage, if necessary, and reasonable costs for imaging copies or materials described in subsection (a) of section 19a-490b. Payment for copies of records provided pursuant to this section is due after the receipt of such records by the patient, the patient's attorney or the patient's authorized representative.

[(b)**]** (c) The provisions of **[**subsection (a)**]** subsections (a) and (b) of this section shall not be construed to require an institution to provide

records (1) in violation of the Health Insurance Portability and Accountability Act of 1996, P.L. 104-191, as amended from time to time, or 45 CFR 160.101 to 45 CFR 164.534, inclusive, as amended from time to time, (2) in response to a direct request from another health care provider, unless such provider can validate that such provider has a health provider relationship with the patient whose records are being requested, or (3) in response to a third-party request.

This act shall take effect as follows and shall amend the following sections:		
Section 1	*October 1, 2025*	31-294f
Sec. 2	*October 1, 2025*	19a-25g

Statement of Legislative Commissioners:
The provisions of Section 1(c)(1) were restructured for clarity.

JUD *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

The bill, which makes various changes to deadlines, fees, and penalties related to patient health records requests, results in no fiscal impact to the state.

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State Impact: None

Municipal Impact: None

OLR Bill Analysis

sSB 1437

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

SUMMARY

This bill makes changes to penalties, deadlines, and fees related to certain patient health records requests. First, it authorizes workers' compensation administrative law judges to penalize physicians, or third-party vendors acting on their behalf, who fail to submit medical reports for workers' compensation cases within 30 days after they are completed.

Second, the bill sets deadlines and fees for certain licensed health care institutions to transfer an electronic copy of a patient's medical records to the patient's attorney upon receiving a medical records request directed by the patient or the patient's representative. It generally requires the transfer to occur within 20 business days after receiving the request and does not require the institution to get specific written consent from the patient before doing so.

The bill also limits the fees for these records requests to the greater of (1) $250, plus postage and reasonable costs for imaging and materials (e.g., slides or tissue blocks) or (2) the fees allowed under federal law. (Federal law allows charging reasonable, cost-based fees that include only the cost of related labor, supplies, and postage.)

EFFECTIVE DATE: October 1, 2025

WORKERS' COMPENSATION MEDICAL REPORTS

The bill authorizes workers' compensation administrative law judges to penalize practicing physicians, or third-party vendors acting on their behalf, who fail to submit medical reports for workers' compensation

cases within 30 days after they are completed as required under existing law. Under the bill, penalties must include the following:

1. a written noncompliance notice to the physician or third-party vendor or

2. an order requiring the physician or third-party vendor to appear at a hearing and explain the reasons for not meeting the report deadline.

Additionally, the bill subjects physicians, or third-party vendors acting on their behalf, who fail to appear for these hearings to a fine of up to $500 payable to the workers' compensation claimant.

Existing law requires workers' compensation claimants, when seeking or receiving compensation, to submit to a physician evaluation when an administrative law judge orders it or an employer reasonably requests it. Physicians must submit all medical reports for these claimants within 30 days after the date they are completed to the employer and the employee (claimant) or the employee's attorney.

TRANSFER OF MEDICAL RECORDS TO PATIENTS' ATTORNEYS

The bill sets deadlines and fees for licensed health care institutions to transfer an electronic copy of a patient's medical records to the patient's attorney upon receiving a medical records request directed by the patient or the patient's representative. Under the bill, the transfer must occur within 20 business days after receiving the request and the institution does not need specific written consent from the patient before doing so.

The bill exempts from these requirements (1) Department of Mental Health and Addiction Services-operated facilities and (2) the hospital and psychiatric residential treatment facility units of the Albert J. Solnit Children's Center.

The bill requires a patient or his or her representative (e.g., attorney) to pay reasonable fees to get copies of these patient records but sets new

limits on them. Under current law, a health care institution may charge up to 65 cents per page, including any applicable research or handling fees, related costs, and first-class postage, to supply a patient's health record. Patients may also be charged an additional amount needed to cover the cost of material for (1) x-ray copies or (2) furnishing an original retained slide or tissue block or a new section cut from a retained tissue block (CGS § 19a-490b).

The bill instead limits these fees to the greater of (1) $250, plus postage and reasonable costs for imaging and materials, or (2) the fees allowed under federal law. (Federal law allows charging reasonable, cost-based fees that include only the cost of related labor, supplies, and postage.) Payment is due after the patient or representative receives the records.

(A separate law, unchanged by the bill, sets a limit of 65 cents per page (including fees, costs, and postage) for medical records requests to individual licensed health care providers (CGS § 20-7c).)

Additionally, the bill specifies that its provisions do not require institutions to transfer records in the following circumstances:

1. if doing so would violate the federal Health Insurance Portability and Accountability Act (HIPAA) or related regulations, which set limits and rules on disclosing protected health information;

2. in response to a direct request from another provider unless the provider can validate that he or she has a health provider relationship with the patient; or

3. in response to a third-party request.

BACKGROUND

Related Bill

SB 1508 (File 711), favorably reported by the Public Health Committee, changes the fees related to patient health records requests by replacing current law's fee of 65 cents per page with fees that vary based on who requests the records, the type of records, and the number

of pages.

HB 7227 (File 635), favorably reported by the Government Administration and Elections Committee, generally caps how much licensed health care providers can charge a patient or the patient's attorney for copies of the patient's medical records at the lesser of (1) the fees allowed under federal regulations or (2) $250, plus first-class postage and certain reasonable costs, if applicable. It makes those that do not comply with the fee limits ineligible for certain state contracts.

COMMITTEE ACTION

Judiciary Committee

Joint Favorable Substitute
Yea 41 Nay 0 (04/04/2025)