GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2003

SENATE BILL 654*

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	Short Title: Amend MH Confidentiality Statutes. (Public	:)		
	Sponsors: Senator Metcalf.			
	Referred to: Health & Human Resources.			
	April 1, 2003			
1 2 3 4 5 6 7 8 9 10 11 12	A BILL TO BE ENTITLED AN ACT TO AMEND THE CONFIDENTIALITY PROVISIONS OF CHAPTER 122C OF THE GENERAL STATUTES TO PERMIT IMPLEMENTATION OF MENTAL HEALTH SYSTEM REFORM. The General Assembly of North Carolina enacts: SECTION 1.(a) G.S. 122C-3 is amended by inserting the following term in alphabetical order to read: "§ 122C-3. Definitions. As used in this Chapter, unless another meaning is specified or the context clearly requires otherwise, the following terms have the meanings specified: (1) 'Applicant' means an individual who contacts an area facility for services.			
13 14	" SECTION 1.(b) G.S. 122C-3(14) reads as rewritten:			
15	"§ 122C-3. Definitions.			
16	As used in this Chapter, unless another meaning is specified or the context clearly			
17 18	requires otherwise, the following terms have the meanings specified:			
18 19	(14) "Facility" means any person at one location whose primary purpose in	S		
20	to provide services for the care, treatment, habilitation, o			
21	rehabilitation of the mentally ill, the developmentally disabled, o	r		
22	substance abusers, and includes:			
23	a. An "area facility", which is a facility that is operated by o			
24 25	under contract with the area authority.authority or county	_		
25 26	program. For the purposes of this subparagraph, a contract is a contract, memorandum of understanding, or other written			
20 27	agreement whereby the facility agrees to provide services to one			
28	or more clients of the area authority or county program. A			
29	facility that is providing services under contract with the area			

1		authority is an area facility for purposes of the contracted		
2		services only. Area facilities may also be licensable facilities in		
3		accordance with Article 2 of this Chapter. A State facility is not		
4		an area facility;		
5	b.	A "licensable facility", which is a facility that provides services		
6		for one or more minors or for two or more adults. When the		
7		services offered are provided to individuals who are mentally ill		
8		or developmentally disabled, these services shall be day		
9		services offered to the same individual for a period of three		
10		hours or more during a 24-hour period, or residential services		
11		provided for 24 consecutive hours or more. When the services		
12		offered are provided to individuals who are substance abusers,		
13		these services shall include all outpatient services, day services		
14		offered to the same individual for a period of three hours or		
15		more during a 24-hour period, or residential services provided		
16		for 24 consecutive hours or more. Facilities for individuals who		
17		are substance abusers include chemical dependency facilities;		
18	с.	A "private facility", which is a facility that is either a licensable		
19		facility or a special unit of a general hospital or a part of either		
20		in which the specific service provided is not covered under the		
21		terms of a contract with an area authority;		
22	d.	The psychiatric service of the University of North Carolina		
23		Hospitals at Chapel Hill;		
24	e.	A "residential facility", which is a 24-hour facility that is not a		
25		hospital, including a group home;		
26	f.	A "State facility", which is a facility that is operated by the		
27		Secretary;		
28	g.	A "24-hour facility", which is a facility that provides a		
29		structured living environment and services for a period of 24		
30		consecutive hours or more and includes hospitals that are		
31		facilities under this Chapter; and		
32	h.	A Veterans Administration facility or part thereof that provides		
33		services for the care, treatment, habilitation, or rehabilitation of		
34		the mentally ill, the developmentally disabled, or substance		
35		abusers."		
36		2. G.S. 122C-54(b) reads as rewritten:		
37	"§ 122C-54. Exceptio	ons; abuse reports and court proceedings.		
38	•••			
39		lual is a defendant in a criminal case and a mental examination of		
40	the defendant has been ordered by the court, court as provided in G.S. 15A-1002, the			
41	facility may shall send the results or the report of the mental examination to the clerk of			
42	court, to the district attorney or prosecuting officer, and to the attorney of record for the			
43	-	defendant as provided in G.S. 15A-1002(d)."		
44	SECTION 3	3. G.S. 122C-55 reads as rewritten:		

GENERAL ASSEMBLY OF NORTH CAROLINA

1 "§ 122C-55. Exceptions; care and treatment.

2 Any area or State facility or the psychiatric service of the University of North (a) 3 Carolina Hospitals at Chapel Hill may share confidential information regarding any client of that facility with any other area or State facility or the psychiatric service of the 4 5 University of North Carolina Hospitals at Chapel Hill when necessary to coordinate 6 appropriate and effective care, treatment or habilitation of the client and when failure to share this information would be detrimental to the care, treatment or habilitation of the 7 8 elient. the client. For the purposes of this subsection, coordinate means the provision, 9 coordination, or management of mental health, developmental disabilities, and 10 substance abuse services and related services by one or more facilities and includes the referral of a client from one facility to another. Under the circumstances described in 11 12 this subsection, the consent of the client or legally responsible person is not required for this information to be furnished, and the information may be furnished despite objection 13 14 by the client.

15 (a1) Any State or area facility or the psychiatric service of the University of North Carolina Hospitals at Chapel Hill may share confidential information regarding any 16 17 client of that facility with the Secretary, and the Secretary may share confidential 18 information regarding any client with an area or State facility or the psychiatric service of the University of North Carolina Hospitals at Chapel Hill when the responsible 19 20 professional or the Secretary determines that disclosure is necessary to coordinate 21 appropriate and effective care, treatment or habilitation of the client and that failure to share this information would be detrimental to the care, treatment or habilitation of the 22 23 client. Under the circumstances described in this subsection, the consent of the client or 24 legally responsible person is not required for this information to be furnished, and the information may be furnished despite objection by the client.client. 25

Any area or State facility or the psychiatric service of the University of North 26 (a2) Carolina Hospitals at Chapel Hill may share confidential information regarding any 27 client of that facility with any other area facility or State facility or the psychiatric 28 service of the University of North Carolina Hospitals at Chapel Hill when necessary to 29 conduct payment activities relating to an individual served by the facility. Payment 30 activities are activities undertaken by a facility to obtain or provide reimbursement for 31 32 the provision of services and may include, but are not limited to, determinations of eligibility or coverage, coordination of benefits, determinations of cost sharing amounts, 33 claims management, claims processing, claims adjudication, claims appeals, billing and 34 collection activities, medical necessity reviews, utilization management and review, 35 precertification and preauthorization of services, concurrent and retrospective review of 36 services, and appeals related to utilization management and review. 37

38 (a3) Whenever there is reason to believe that a client is eligible for benefits 39 through a Department program, any State or area facility or the psychiatric service of 40 the University of North Carolina Hospitals at Chapel Hill may share confidential 41 information regarding any client of that facility with the Secretary, and the Secretary 42 may share confidential information regarding any client with an area facility or State 43 facility or the psychiatric services of the University of North Carolina Hospitals at 44 Chapel Hill. Disclosure is limited to that information necessary to establish initial

GENERAL ASSEMBLY OF NORTH CAROLINA

<u>eligibility for benefits, determine continued eligibility over time, and obtain</u>
 <u>reimbursement for the costs of services provided to the client.</u>

3 An area authority or county program may share confidential information (a4) regarding any client with any area facility, and any area facility may share confidential 4 5 information regarding any client of that facility with the area authority or county 6 program, when the area authority or county program determines the disclosure is necessary to develop, manage, monitor, or evaluate the area authority's or county 7 8 programs network of qualified providers as provided in G.S. 122C-115.2(b)(1)b., G.S. 9 122C-141(a), the State Plan, and rules of the Secretary. For the purposes of this 10 subsection, the purposes or activities for which confidential information may be disclosed include, but are not limited to, quality assessment and improvement activities, 11 12 provider accreditation and staff credentialing, developing contracts and negotiating rates, investigating and responding to client grievances and complaints, evaluating 13 14 practitioner and provider performance, auditing functions, on-site monitoring, conducting consumer satisfaction studies and collecting and analyzing performance 15 data. 16

17 (a5) Any area facility may share confidential information with any other area
 18 facility regarding an applicant when necessary to determine whether the applicant is
 19 eligible for area facility services.

(b) A facility, physician, or other individual responsible for evaluation,
management, supervision, or treatment of respondents examined or committed for
outpatient treatment under the provisions of Article 5 of this Chapter may request,
receive, and disclose confidential information to the extent necessary to enable them to
fulfill their responsibilities.

25 (c) A facility may furnish confidential information in its possession to the Department of Correction when requested by that department regarding any client of 26 27 that facility when the inmate has been determined by the Department of Correction to be in need of treatment for mental illness, developmental disabilities, or substance abuse. 28 29 The Department of Correction may furnish to a facility confidential information in its possession about treatment for mental illness, developmental disabilities, or substance 30 abuse that the Department of Correction has provided to any present or former inmate if 31 32 the inmate is presently seeking treatment from the requesting facility or if the inmate 33 has been involuntarily committed to the requesting facility for inpatient or outpatient treatment. Under the circumstances described in this subsection, the consent of the 34 35 client or inmate shall not be required in order for this information to be furnished and the information shall be furnished despite objection by the client or inmate. Confidential 36 37 information disclosed pursuant to this subsection is restricted from further disclosure.

(d) A responsible professional may disclose confidential information when in his
 opinion there is an imminent danger to the health or safety of the client or another
 individual or there is a likelihood of the commission of a felony or violent
 misdemeanor.

42 (e) A responsible professional may exchange confidential information with a 43 physician or other health care provider who is providing emergency medical services to

a client. Disclosure of the information is limited to that necessary to meet the 1 2 emergency as determined by the responsible professional.

3 A State facility may furnish client identifying information to the Department (e1) for the purpose of maintaining an index of clients served in State facilities which may 4 5 be used by State facilities only if that information is necessary for the appropriate and 6 effective evaluation, care and treatment of the client.

A responsible professional may disclose an advance instruction for mental 7 (e2) 8 health treatment or confidential information from an advance instruction to a physician, 9 psychologist, or other qualified professional when the responsible professional 10 determines that disclosure is necessary to give effect to or provide treatment in accordance with the advance instruction. 11

12 A facility may disclose confidential information to a provider of support (f)13 services whenever the facility has entered into a written agreement with a person to 14 provide support services and the agreement includes a provision in which the provider 15 of support services acknowledges that in receiving, storing, processing, or otherwise dealing with any confidential information, he will safeguard and not further disclose the 16 17 information.

18 (g) Whenever there is reason to believe that the client is eligible for financial 19 benefits through a governmental agency, a facility may disclose confidential 20 information to State State, local, or federal government agencies. Disclosure Except as 21 provided in G.S. 122C-55(a3), disclosure is limited to that confidential information necessary to establish financial benefits for a client. After establishment of these 22 23 benefits, the consent of the client or his legally responsible person is required for further 24 release of confidential information under this subsection.

25 (h) Within a facility, employees, students, consultants or volunteers involved in the care, treatment, or habilitation of a client may exchange confidential information as 26 27 needed for the purpose of carrying out their responsibility in serving the client.

Upon specific request, a responsible professional may release confidential 28 (i) 29 information to a physician or psychologist who referred the client to the facility.

30 Upon request of the next of kin or other family member who has a legitimate (i) role in the therapeutic services offered, or other person designated by the client or his 31 32 legally responsible person, the responsible professional shall provide the next of kin or 33 other family member or the designee with notification of the client's diagnosis, the 34 prognosis, the medications prescribed, the dosage of the medications prescribed, the 35 side effects of the medications prescribed, if any, and the progress of the client, provided that the client or his legally responsible person has consented in writing, or the 36 client has consented orally in the presence of a witness selected by the client, prior to 37 38 the release of this information. Both the client's or the legally responsible person's 39 consent and the release of this information shall be documented in the client's medical 40 record. This consent shall be valid for a specified length of time only and is subject to revocation by the consenting individual. 41

42 Notwithstanding the provisions of G.S. 122C-53(b) or G.S. 122C-206, upon (k) request of the next of kin or other family member who has a legitimate role in the 43 therapeutic services offered, or other person designated by the client or his legally 44

GENERAL ASSEMBLY OF NORTH CAROLINA

responsible person, the responsible professional shall provide the next of kin, or family member, or the designee, notification of the client's admission to the facility, transfer to another facility, decision to leave the facility against medical advice, discharge from the facility, and referrals and appointment information for treatment after discharge, after notification to the client that this information has been requested.

6 (1) In response to a written request of the next of kin or other family member 7 who has a legitimate role in the therapeutic services offered, or other person designated 8 by the client, for additional information not provided for in subsections (j) and (k) of 9 this section, and when such written request identifies the intended use for this 10 information, the responsible professional shall, in a timely manner:

- 11 (1) Provide the information requested based upon the responsible 12 professional's determination that providing this information will be to 13 the client's therapeutic benefit, and provided that the client or his 14 legally responsible person has consented in writing to the release of the 15 information requested; or
- 16 (2) Refuse to provide the information requested based upon the 17 responsible professional's determination that providing this 18 information will be detrimental to the therapeutic relationship between 19 client and professional; or
- 20(3)Refuse to provide the information requested based upon the21responsible professional's determination that the next of kin or family22member or designee does not have a legitimate need for the23information requested.

(m) The Commission for Mental Health, Developmental Disabilities, and
Substance Abuse Services shall adopt rules specifically to define the legitimate role
referred to in subsections (j), (k), and (l) of this section."

27 **SECTION 4.** This act is effective when it becomes law.