COUNCIL OF THE DISTRICT OF COLUMBIA

NOTICE

D. C. Law 2-112

"Medical Records Act of 1978"

Pursuant to Section 412 of the District of Columbia Self-Government and Governmental Reorganization Act, P. L. 93-198, "the Act", the Council of the District of Columbia adopted Bill No. 2-233, on first, amended first, and second readings May 30, 1978, June 13, 1978, and June 27, 1978, respectively. Following expiration of the ten-day period provided the Mayor, which no action was taken, pursuant to Section 404(e) of the Act, this legislation was assigned Act No. 2-236, published in the August II, 1978, edition of the D.C. Register and transmitted to both Houses of Congress for a 30-day review, in accordance with Section 602 (c)(1) of the Act.

The Council of the District of Columbia hereby gives notice that the 30-day Congressional review period has expired and, therefore cites the following legislation as D. C. Law 2-112, effective September 29, 1973.

STERLING TUCKER Chairman of the Council 0.C. Law

2-112

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

Septemper 29, 1978

To promote and facilitate medical studies, research, education and the performance of obligations of medical review committees in the District of Columbia concerning medical records, information and data.

3E IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA.

That this act may be cited as the "Medical Records Act of 1978".

- Sec. 2. For the purposes of this act:
- (a) The term "extended care facility" means a residential facility providing medical services consistent with accepted professional, therapeutic and medical care concepts and practices as well as current health programs and legislation. The term shall include and refer to the following levels of care:
- or distinct parts thereof primarily engaged in providing to in-patients continuous professional nursing coverage and mealth related services under the direct supervision of physicians. Skilled care facilities are solely limited to those facilities which provide twenty-four (24) hour professional nursing services and a complete program of

nealth related and rehabilitative services under the direct supervision of a full-time Medical Director or principal onysicians; and

- (2) intermediate nursing care facilities, that is, facilities or distinct parts thereof primarily engaged in providing professional nursing services provided under the direction of a physician to individuals who do not have such an illness, disease, injury or other condition as to require the degree of care and treatment which a hospital or skilled nursing facility is designed to provide, Services include both regular and continuous health related services.
- (b) The term "medical staff committee" means a peer review committee of a hospital or extended care facility.
- means any committee of a mospital or extended care facility which reviews, on a sample or other basis, admissions to such hospital or facility, the duration of stays therein and the professional services furnished: (1) with respect to the medical necessity of the services; and (2) for the purpose of promoting the most efficient use of the services and facilities available in the hospital or extended care facility.
- (d) The term "beer review committee" means any committee of a professional medical society or psychological.

association composed of persons engaged in the practice of medicine or psychology in the District of Columbia which reviews or receives and hears complaints with respect to the quality of medical or psychological services furnished by a person engaged in the practice of medicine or psychology in the District of Columbia.

- (e) The term "primary health record" means the record of continuing care kept by a physician, osychologist, nospital or extended care facility regarding a patient which reflects the diagnostic and therapeutic services rendered by the physician, psychologist, hospital or extended care facility to the patient.
- (f) The term "tissue review committee" means any committee of a hospital or extended care facility which conducts a continuous review of the results of surgical operations with respect to the removal of tissue or blood from patients in the hospital or extended care facility.
- Sec. 3. (a) Any person in the District of Columbia may transmit, upon request and, if required by the provisions of D.C. Code, sec. 14-307, with the consent of the patient, to any medical utilization review committee, peer review committee, tissue review committee or medical staff committee, poerating in the District of Columbia, any report, note, record or other data or other information

which such person properly has in his possession relating to the medical or psychological services provided to any person.

- (b) No person who provides any report, note, record or other data or information pursuant to subsection (a) of this section shall be liable to any other person for damages or equitable relief by reason of his providing such report, note, record or other data or information unless the information provided was false and the person providing such information knew, or had reason to believe, that the information was false.
- Sec. 4. No member of a medical utilization review committee, a peer review committee, a medical staff committee or a tissue review committee, operating in the District of Columbia, shall be liable to any other person for damages or equitable relief by reason of any action taken or recommendation made by the member or by the committee to which the member belongs, if the action taken was within the scope of the functions of the committee and if the committee member acted in the reasonable belief that his action was warranted by the facts known to him after reasonable effort to obtain the facts of the matter.
- Sec. 5. Any publication by any medical utilization review committee, medical staff

committee or tissue review committee small keep confidential the identity of any patient whose concition, care or treatment was a part thereof.

Sec. 6. (a) Absent a showing of extraordinary medessity, the minutes, analyses, preliminary and final findings and reports of a medical utilization review committee, peer review committee, medical staff committee or tissue review committee shall not be subject to discovery or admissible into evidence in any civil or administrative proceeding. This qualified privilege does not extend to primary mealth records or to any oral or written statements submitted to or presented before a medical utilization review committee, peer review committee, medical staff committee or tissue review committee.

(b) This section shall not affect the right of any individual employed by or formerly employed by, working for or formerly working for or associated with or formerly associated with a hospital or extended care facility operating within the District of Columbia, a professional medical society or psychological association operating within the District of Columbia, a medical school engaged in research within the District of Columbia, a department, agency or instrumentality of the federal government operating within the District of Columbia or a department or

agency of the District of Columbia government to admit into evidence or subject to discovery the minutes and reports of a medical utilization review committee, peer review committee, medical staff committee or tissue review committee for the limited purpose of adjudicating the appropriateness of an adverse action affecting the employment, work or association or the termination of employment, work or association of such person by such institution.

Sec. 7. This act shall take effect pursuant to section 502(c)(1) of the District of Columbia Self-Government and Governmental Reorganization Act.

RECORD OF OFFICIAL COUNCIL ACTION

Dacket No: Bill 2-233

First Reading Action: May 30, 1978 X VOICZ VOTE: Adopted Unanimously (2abs) Barry, Spaulding in Secretary to the Council / ROLL CALL VOTE: EQUINGLE HENGER : AFE | MAP | M.V. | MAIL COUNCIL HENGER | AFE : MAT | M.V. | M.E. | EQUINCIL HENGER | AFE : MAT | M.V. | MAE TUCKER SPAULDING I MASON HARDY. MCCRE. D. WILSON BARRY L'MOGRE, :. CTARKE 1 ROLARK DECEN SACKTITON Secrementy to the Council Amended First Reading Action: June 13, 1978 / VOICE VOTE: Adopted Unanimously (2abs) JMoore, Barry Jamely a sively ROLL CALL VOTE: MINER POSEN | APE | TAP | TAP | AND DESIGNED PROCES | APT | TAP | TAP | TAP | SUREE OCCURS | APE | TAP | TAP | SPAULDING 1 MASON THEOY IMCCRE, D. IVILION MUCCAE, I. 34227 CLARKE IZOLARK I SHOTI TON JECCN Eministra Vera 12 Seministrate 12, 7,-1144 Tetrat Secretary to the Council First Reading or Emergency Action: June 27, 1978 VOICE VOTE: Adopted Unanimously (Zabs) Barry, Dixon Intrace Chame ROLL CALL VOTE: CRUMENT -CHARM AND THE TARENTS, AME CRUMEN, ACCOUNTS AND THE COUNTY AND CRUMEN AND THE TARE THE TARE MOSSON TTCXER. INCORE. D. WILSON YOLKE CONTINUE MCCRI, J. BARRY BCLARK CLARKE SECTION BEKCH

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