

**HOUSE BILL NO. 1234**

Introduced by

Representative DeKrey

1 A BILL for an Act to amend and reenact section 23-12-14 of the North Dakota Century Code,  
2 relating to consent to release of medical records.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1. AMENDMENT.** Section 23-12-14 of the 1999 Supplement to the North  
5 Dakota Century Code is amended and reenacted as follows:

6 **23-12-14. Copies of medical records.**

- 7 1. As used in this section, "medical provider" means a licensed individual or licensed  
8 facility providing health care services. This section applies to every medical  
9 provider unless expressly provided otherwise by law. Upon the written request of a  
10 medical provider's patient or any person authorized by a patient, the medical  
11 provider shall:
- 12 a. Provide a free copy of a patient's medical records to a medical provider  
13 designated by the patient or the person authorized by the patient if the  
14 records are requested for the purpose of transferring that patient's medical  
15 care to another medical provider for the continuation of medical treatment.
  - 16 b. Provide a copy of a patient's medical records requested for any purpose other  
17 than the continuation of care for a maximum charge of twenty dollars for the  
18 first twenty-five pages and seventy-five cents per page for every page beyond  
19 twenty-five. This charge includes any administrative fee, retrieval fee, and  
20 postage expense.
- 21 2. A written medical records release must be for a specific stated time, but not to  
22 exceed three years or until revoked in writing by the patient. A written medical  
23 records release does not expire after three years, however, if a patient or the

- 1            patient's authorized representative expressly gives consent to release of medical  
2            records to:
- 3            a. A medical provider being advised or consulted concerning the current  
4            treatment of the patient; or
- 5            b. An accident and health insurer, a health service plan corporation, a health  
6            maintenance organization, or a third-party administrator for purposes of  
7            payments of claims, fraud investigation, or quality of care review and studies.