

311A.190 Information furnished to board by providers and program -- Patient care record report form -- Annual reports -- Confidentiality -- Report to medical facility, ambulance provider, and patient -- Records -- Disclosure and admissibility of data and records -- Cabinet access to data.

- (1) Each licensed ambulance provider, mobile integrated healthcare program, and medical first response provider as defined in this chapter shall collect and provide to the board patient care record data and information required by the board by this chapter and administrative regulation.
- (2) The board shall develop a patient care record form for the use of each class of ambulance provider, mobile integrated healthcare program, and medical first response provider containing the data required in subsection (1) of this section. An ambulance provider, mobile integrated healthcare program, or medical first response provider may utilize any patient care record form it chooses in lieu of or in addition to the board developed patient care record form. However, the data captured on the patient care record form utilized by the ambulance service, mobile integrated healthcare program, or medical first response provider shall include at least the data that is required by the administrative regulations promulgated pursuant to subsection (1) of this section.
- (3) An ambulance provider, mobile integrated healthcare program, or medical first response provider shall report the required patient care record data as prescribed through administrative regulations promulgated by the board by transmitting the required data and information to the board in an electronic format. If the board requires the use of a specific electronic format, it shall provide a copy of the file layout requirements, in either written or electronic format, to the licensed ambulance provider or medical first response provider at no charge.
- (4) The board shall publish a comprehensive annual report reflecting the data collected, injury and illness data, treatment utilized, and other information deemed important by the board. The annual report shall not include patient identifying information or any other information identifying a natural person. A copy of the comprehensive annual report, if issued, shall be forwarded to the Governor and the General Assembly.
- (5) Ambulance provider, mobile integrated healthcare program and medical first response provider patient care records and the information transmitted electronically to the board shall be confidential and in compliance with HIPAA privacy rules referenced in 45 C.F.R. pt. 164. No person shall make an unauthorized release of information on an ambulance provider, mobile integrated healthcare program, or medical first response provider patient care record. Only the patient or the patient's parent or legal guardian if the patient is a minor, or the patient's legal guardian or person with proper power of attorney if the patient is under legal disability as being incompetent or mentally ill, or a court of competent jurisdiction may authorize the release of information on a patient's care record or the inspection or copying of the patient care record. Any authorization for the release of information or for inspection or copying of a patient care record shall be in writing.
- (6) An ambulance provider or medical first response provider that collects patient data

through electronic means shall have the means of providing a patient care record or summary report that includes all required data elements to the medical care facility. A copy of the medical first response patient care record or summary report of the patient care record and patient information shall be made available to the ambulance service that transports the patient. A copy of the ambulance transportation and medical report forms shall be made available to any medical care facility to which a patient is transported and shall be included in the patient's medical record by that facility. If a patient is not transported to a medical facility, the copy of the patient care record that is to be given to the transporting ambulance provider or medical care facility shall be given to the patient or to the patient's parent or legal guardian upon request. If the ambulance provider, medical facility, patient, or patient's legal guardian refuses delivery of their patient care record or is unavailable to receive the form, that copy of the patient care record shall be returned to the medical first response provider or ambulance provider and destroyed.

- (7) All ambulance services and mobile integrated healthcare programs shall be required to keep adequate reports and records to be maintained at the ambulance base headquarters and to be available for periodic review as deemed necessary by the board. Required records and reports are as follows:
 - (a) Employee records, including a resume of each employee's training and experience and evidence of current certification or licensure; and
 - (b) Health records of all personnel including records of all illnesses or accidents occurring while on duty.
- (8) Data and records generated and kept by the board or its contractors regarding the evaluation of emergency medical care, mobile integrated healthcare programs, and trauma care in the Commonwealth, including the identities of patients, emergency medical services personnel, ambulance providers, medical first-response providers, and emergency medical facilities, shall be confidential, shall not be subject to disclosure under KRS 61.805 to 61.850 or KRS 61.870 to 61.884, shall not be admissible in court for any purpose, and shall not be subject to discovery. However, nothing in this section shall limit the discoverability or admissibility of patient medical records regularly and ordinarily kept in the course of a patient's treatment that otherwise would be admissible or discoverable.
- (9) The Cabinet for Health and Family Services shall have complete and immediate access to all data and records maintained by the board or its contractors and may use information contained in the data and records to fulfill its responsibilities and requirements for health facilities and services, including but not limited to those duties assigned to the cabinet by KRS 194A.101, 216.2920 to 216.2929, and 216B.042.

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History: Amended 2022 Ky. Acts ch. 126, sec. 7, effective July 14, 2022. -- Amended 2019 Ky. Acts ch. 100, sec. 20, effective June 27, 2019. -- Created 2002 Ky. Acts ch. 211, sec. 36, effective July 15, 2002.