§ 480.131 Access to medical records for the monitoring of QIOs.

CMS or any person, organization or agency authorized by the Department or Federal statute to monitor a QIO will have access to medical records maintained by institutions or health care practitioners on Medicare patients. The monitor can require copies of the records.

§ 480.132 Disclosure of information about patients.

(a) General requirements for disclosure. Except as specified in §§476.130(d) and 476.140(b) of this chapter and paragraph (b) of this section, a QIO must—

(1) Disclose patient identified information in its possession to the identified patient or the patient’s representative if—

(i) The patient or the patient’s representative requests the information in writing;

(ii) The request by a patient’s representative includes the designation, by the patient, of the representative; and

(iii) Except as provided under paragraph (b) of this section, all other patient and practitioner identifiers have been removed.

(2) Make disclosure to the patient or the patient’s representative within 14 calendar days of receipt of the request.

(b) Exceptions. (1) If a request for information is in connection with an initial denial determination under section 1154(a)(2) of the Act, the QIO must—

(i) Disclose patient identified information in its possession to the identified patient or the patient’s representative if—

(A) The patient or the patient’s representative requests the information in writing;

(B) The request by a patient’s representative includes the designation, by the patient, of the representative; and

(C) Except as provided under paragraph (b) of this section, all other patient and practitioner identifiers have been removed.

(2) Make disclosure to the patient or the patient’s representative within 14 calendar days of receipt of the request.

(3) A QIO must disclose information to the identified individual or institution. A QIO must disclose information to an institution, upon request, information on a practitioner to the extent that the information displays practice or performance patterns of a practitioner or institution in accordance with the procedures for disclosures specified in §§480.137 and 480.138 to—

(A) Federal and State agencies that are responsible for the investigation of fraud and abuse of the Medicare or Medicaid programs, and

(B) Federal and State agencies that are responsible for the investigation of fraud and abuse of the Medicare or Medicaid programs, and

(C) Manner of disclosure. (1) The QIO must disclose patient information directly to the patient or the patient’s representative when the representative has been authorized or appointed to receive that information.

(2) In identifying a representative, the QIO must follow pertinent State law requirements regarding the designation of health care representatives and agents. If the patient is unable to designate a representative and the identity of the representative is not already dictated by State law, the QIO must disclose the information to a person whom the QIO determines is responsible for the patient.

(3) A QIO must disclose quality review study information only as specified in §480.140.

(c) Manner of disclosure. (1) The QIO must disclose patient information directly to the patient or the patient’s representative when the representative has been authorized or appointed to receive that information.

(2) In identifying a representative, the QIO must follow pertinent State law requirements regarding the designation of health care representatives and agents. If the patient is unable to designate a representative and the identity of the representative is not already dictated by State law, the QIO must disclose the information to a person whom the QIO determines is responsible for the patient.

(3) A QIO must disclose quality review study information only as specified in §480.140.