1   HOUSE BILL NO. 590

2   INTRODUCED BY G. OBLANDER, C. SCHOMER, C. COCHRAN, E. TILLEMAN, N. NICOL, C. SPRUNGER,

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4   S. ESSMANN

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6   A BILL FOR AN ACT ENTITLED: "AN ACT GENERALLY REVISING LAWS RELATED TO ELECTRONIC

7   HEALTH RECORDS; REQUIRING HEALTH CARRIERS TO ESTABLISH AND MAINTAIN CERTAIN

8   APPLICATION PROGRAMMING INTERFACES FOR THE BENEFIT OF THE INSURED; AND PROVIDING

9   ~~EFFECTIVE DATES~~ A DELAYED EFFECTIVE DATE."

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11   BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

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13   NEW SECTION. **Section 1.   Health carrier and patient access to health information.** (1) A health

14   carrier shall establish and maintain the following application programming interfaces for the benefit of the

15   carrier's insureds and contracted providers:

16   (a)   a patient access application programming interface, pursuant to 42 CFR 422.119(a) through

17   422.119(e);

18   (b)   a provider directory application programming interface, pursuant to 42 CFR 422.120;

19   (c)   a provider access application programming interface, pursuant to 42 CFR 422.121(a);

20   (d)   a payer-to-payer exchange application programming interface, pursuant to 42 CFR 422.121(b);

21   and

22   (e)   a prior authorization application programming interface, pursuant to section 42 CFR 422.122.

23   (2)   A health carrier shall establish and maintain each application programming interface provided

24   for in subsection (1) for the health carrier's insured and providers as of July 1, 2026 ~~at the earliest date required~~

25   ~~by the centers for medicare and medcaid services for that type of application programming interface~~.

26   (3)   An application programming interface must comply with standards published by the centers for

27   medicare and medicaid services, including effective dates, enforcement delays, and suspensions.

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1   NEW SECTION. **Section 2.   Privacy of electronic health records.** (1) Except as provided in

2   subsection (2) of this section, a health care provider requesting that a medical laboratory test for a patient is

3   performed may not engage in information blocking as that term is defined in 42 U.S.C. 300jj-52.

4   (2)   The following reports or test results and any other related results must be disclosed to a patient

5   as part of the patient's electronic health record 72 hours after the results are finalized or when the patient's

6   health care provider directs the release of the results, whichever occurs first:

7   (a)   pathology reports or radiology reports that have a reasonable likelihood of showing a finding of

8   new or recurring malignancy;

9   (b)   tests that could reveal genetic markers;

10   (c)   a positive HIV diagnostic test, as that term is defined in 50-16-1003; or

11   (d)   the presence of antigens indicating a hepatitis infection.

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13   NEW SECTION. **Section 3.   Codification instruction.** (1) [Section 1] is intended to be codified as an

14   integral part of Title 33, and the provisions of Title 33 apply to [section 1].

15   (2)   [Section 2] is intended to be codified as an integral part of Title 50, chapter 16, part 8, and the

16   provisions of Title 50, chapter 16, part 8, apply to [section 2].

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18   NEW SECTION. **Section 4.   Severability.** If a part of [this act] is invalid, all valid parts that are

19   severable from the invalid part remain in effect. If a part of [this act] is invalid in one or more of its applications,

20   the part remains in effect in all valid applications that are severable from the invalid applications.

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22   NEW SECTION. **Section 5.   Effective dates.** ~~(1) Except as provided in subsection (2), [this act] is~~

23   ~~effective January 1, 2026.~~

24   ~~(2)   [Section 1] and this section are effective on passage and approval~~ [This act] is effective July 1,

25   2026.

26   - END -