

HOUSE BILL NO. 590

INTRODUCED BY G. OBLANDER, C. SCHOMER, C. COCHRAN, E. TILLEMANN, N. NICOL, C. SPRUNGER,
S. FITZPATRICK, B. LER, J. ETCHART, L. BREWSTER, B. MITCHELL, K. SEEKINS-CROWE, S. MANESS,
S. ESSMANN

A BILL FOR AN ACT ENTITLED: "AN ACT GENERALLY REVISING LAWS RELATED TO ELECTRONIC
HEALTH RECORDS; REQUIRING HEALTH CARRIERS TO ESTABLISH AND MAINTAIN CERTAIN
APPLICATION PROGRAMMING INTERFACES FOR THE BENEFIT OF THE INSURED; AND PROVIDING
EFFECTIVE DATES A DELAYED EFFECTIVE DATE."

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

NEW SECTION. Section 1. Health carrier and patient access to health information. (1) A health
carrier shall establish and maintain the following application programming interfaces for the benefit of the
carrier's insureds and contracted providers:

- (a) a patient access application programming interface, pursuant to 42 CFR 422.119(a) through
422.119(e);
 - (b) a provider directory application programming interface, pursuant to 42 CFR 422.120;
 - (c) a provider access application programming interface, pursuant to 42 CFR 422.121(a);
 - (d) a payer-to-payer exchange application programming interface, pursuant to 42 CFR 422.121(b);
- and
- (e) a prior authorization application programming interface, pursuant to section 42 CFR 422.122.

(2) A health carrier shall establish and maintain each application programming interface provided
for in subsection (1) for the health carrier's insured and providers AS OF JULY 1, 2026 ~~at the earliest date~~
~~required by the centers for medicare and medicaid services for that type of application programming interface.~~

(3) An application programming interface must comply with standards published by the centers for
medicare and medicaid services, including effective dates, enforcement delays, and suspensions.

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), [t his act] is~~
23 ~~effective January 1, 2026.~~

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25 (2) ~~— [Section 1] and this section are effective on passage and approval [THIS ACT] IS EFFECTIVE JULY~~
26 ~~1, 2026.~~

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