

## CONNECTICUT

Connecticut statutorily grants patients the right of access to their medical records maintained by health care providers, health care institutions, insurance entities and other specified entities. The state does not have a general, comprehensive statute prohibiting the disclosure of confidential medical information. Rather, these privacy protections are addressed in statutes governing specific entities or medical conditions.

### I. PATIENT ACCESS

#### A. Employers

Within a reasonable time after receipt of a written request from an employee, an employer must permit an inspection of any medical records pertaining to the employee that the employer maintains. [Conn. Gen. Stat. § 31-128c.] The inspection must take place during regular business hours at a location at or reasonably near the employee's place of employment. Access must be given to either a physician chosen by the employee or by a physician chosen by the employer with the employee's consent. An employer must allow the inspection of any particular employee's medical records no more than twice during a calendar year. [Conn. Gen. Stat. § 31-128h.]

Similarly, an employer must provide an employee's physician with a copy of the employee's medical records within a reasonable time after receipt of a written request from the employee. The request must be in writing and reasonably identify the materials to be copied. [Conn. Gen. Stat. § 31-128g.] The employer may charge a fee for copying the records. [*Id.*] The fee must be reasonably related to the cost of supplying the requested documents. [*Id.*]

If an employee disagrees with any of the information contained in his medical records, he may request that the employer remove or correct the information. [Conn. Gen. Stat. § 31-128e.] If the employer does not agree to the removal or correction, the employee may submit a written statement explaining his position. The statement must be maintained as part of the employee's medical records and must accompany any transmittal or disclosure made to a third party. [*Id.*]

#### B. Health Care Providers, Including Physicians, Dentists and Pharmacists

##### 1. Scope

The Health Care Records Act applies to health care providers, including physicians, dentists, pharmacists, chiropractors, and certain other licensed health care providers. [Conn. Gen. Stat. §§ 20-7c; 20-7b (defining "provider" as "any person or organization that furnishes health care services and is licensed or certified to furnish such services pursuant to chaps. 370 to 373 (inclusive) 375 to 384a (inclusive), 388, 389, 399 or is licensed or certified under 368d").]

The records encompassed by the Act include bills, x-rays, copies of lab reports, contact lens specifications, records of prescriptions and other technical information used in assessing the patient's health condition. [Conn. Gen. Stat. § 20-7c.] These provisions do not apply to health care information related to a psychiatric or psychological condition. [Conn. Gen. Stat. § 20-7c(d).]

## 2. Requirements

Upon request, a health care provider is generally required to supply to a patient complete and current information concerning any diagnosis, treatment and prognosis of the patient that the provider possesses. A provider is also required to notify a patient of any test result in the provider's possession that indicates a need for further treatment or diagnosis. [Conn. Gen. Stat. § 20-7c(a).]

A patient (his attorney or authorized representative) may submit a written request for a copy of his health record. The provider must furnish the copy within 30 days of receipt of the request. [Conn. Gen. Stat. § 20-7c.]

**Copying fees.** The maximum charge for furnishing copies is 45 cents per page (which includes any research fees, handling fees or related costs) plus postage. [Conn. Gen. Stat. § 20-7c(b).] The provider may charge a patient the amount necessary to cover the cost of necessary materials for furnishing a copy of an x-ray. [*Id.*]

**Denial of Access.** Access may be denied if the provider reasonably determines that the information is detrimental to the physical or mental health of the patient, or is likely to cause the patient to harm himself or another. [Conn. Gen. Stat. § 20-7c(c).] In this circumstance, the information may be provided to an appropriate third party or another provider who may release the information to the patient. [*Id.*]

## 3. Remedies and Penalties

**Right to Sue.** When a patient is denied access to his information because it has been determined that his access may be detrimental to his health or likely to cause harm, the patient has the right to file a petition within 30 days of the refusal with the superior court for an order requiring the provider to disclose the information. [Conn. Gen. Stat. § 20-7c(c).]

## C. Health Care Institutions, including Hospitals, Nursing Homes and others

Upon the written request of a patient, his attorney or authorized representative, all licensed health care institutions, including hospitals, nursing homes and others must furnish to the patient a copy of his health record. [Conn. Gen. Stat. § 19a-490b. *See also* "Hospitals Receiving State Aid," below.] The health records covered by this requirement include, but are not limited to, copies of bills, laboratory reports, prescriptions and other technical information used in assessing the patient's health. [*Id.*] A patient also has the right to designate a health care provider to review original tissue slides or pathology blocks. [*Id.*]

The maximum charge for furnishing copies is 65 cents per page plus postage and retrieval expenses. [*Id.*] The health care institution may not deny the patient access to his records due to his inability to pay the required fees. [*Id.*] A patient generally may

show inability to pay by presenting an affidavit attesting to his inability to pay the fees.

## D. Hospitals Receiving State Aid

Upon the demand of any patient who has been discharged, his physician or authorized attorney, a hospital that receives state aid must permit the patient to examine and copy his hospital records, including the history, bedside notes, charts, pictures and plates. [Conn. Gen. Stat. § 4-104.]

### Remedies and Penalties

**Right to Sue.** If a patient who has been discharged is denied access to his hospital records, he may file a written motion in the Superior Court seeking disclosure and production of the records before the judge. [Conn. Gen. Stat. § 4-105.] The custodian of the hospital records may be imprisoned, fined, or both if he fails to comply with any resulting judicial order to produce the records. [*Id.*]

## E. Insurance Entities, Including HMOs

### 1. Scope

The Connecticut Insurance Information and Privacy Protection Act applies to insurance entities including fee for service insurers, HMOs, insurance agents and insurance support organizations. [Conn. Gen. Stat. §§ 38a-175 (defining “health care center” as including HMOs); 38a-977 (detailing entities and persons covered); 38a-976 (defining “insurance institutions” as including health care centers).]

The Act covers “personal information,” including “medical record information,” which is gathered in connection with an insurance transaction. [Conn. Gen. Stat. § 38a-976 (defining “personal information”).] “Medical record information” is personal information that (1) relates to the physical, mental or behavioral health condition, medical history or medical treatment of an individual or his family member, and (2) is obtained from a medical professional, medical care institution, pharmacy, pharmacist or an individual, the individual’s spouse, parent or legal guardian, or from the provision of or payment for health care to or on behalf of the individual or his family. [Conn. Gen. Stat. § 38a-976 (defining “medical record information”).] The Act does not apply to medical information that has had all personal identifiers removed. [Conn. Gen. Stat. § 38a-976(r).]

With respect to health insurance, the rights granted by the Act extend to Connecticut residents who are the subject of the information collected, received or maintained in connection with insurance transactions and applicants, individuals or policyholders who engage in or seek to engage in insurance transactions. [Conn. Gen. Stat. § 38a-977.]

### 2. Requirements

An insurance company, HMO, or other insurance entity must permit the individual to inspect and copy his personal information in person or to obtain a copy of it by mail, whichever the individual prefers, within 30 business days of receiving a written request and proper identification from an individual. [Conn. Gen. Stat. §§ 38a-983; 38a-976.] If the personal information is in coded form, an accurate translation in plain language must be provided in writing. [Conn. Gen. Stat. § 38a-983(a).]

**Copying fees.** The insurance entity can impose a reasonable fee to cover copying costs. [Conn. Gen. Stat. § 38a-983(d).]

In addition to giving the individual a copy of his personal information, the insurance entity must also give the individual a list of the of the persons to whom it has disclosed such personal information within two years prior to the request for access, if that information is recorded. If such an accounting of disclosures is not recorded, the entity must inform the individual of the names of those persons to whom it normally discloses personal information. [Conn. Gen. Stat. § 38a-983(a).]

Medical record information provided to the insurance entity by a medical professional or medical care institution that is requested may be supplied either directly to the requesting individual or to a medical professional designated by the individual, at the option of the insurance entity. [Conn. Gen. Stat. § 38a-983(c).]

**Right to Amend.** A person has a statutory right to have any factual error corrected and any misrepresented or misleading entry amended or deleted, in accordance with stated procedures. [Conn. Gen. Stat. § 38a-984.] Within 30 business days from the date of receipt of a written request, the insurance institution, agent or support organization must either: (1) correct, amend or delete the portion of recorded personal information in dispute; or (2) notify the individual of its refusal to make the correction, amendment or deletion, the reasons for the refusal, and the individual's right to file a statement of disagreement. [*Id.*]

### 3. Remedies and Penalties

**Right to Sue.** A person whose rights under this statute are violated has the right to file a civil action seeking equitable relief within two years of the violation. [Conn. Gen. Stat. § 38a-995.] The court may award costs and reasonable attorney's fees to the prevailing party. [*Id.*]

**Fines and Penalties.** The Insurance Commissioner may hold hearings and impose administrative remedies, including, in the case of intentional violations, monetary fines. [Conn. Gen. Stat. §§ 38a-990 through 38a-993.] A cease and desist order and fine not to exceed \$2,000 per violation or \$20,000 for multiple negligent violations may be imposed. [Conn. Gen. Stat. § 38a-993.]

## F. Mental Health Facilities

The Patients' Bill of Rights applies to any hospital, clinic, ward, psychiatrist's office or other facility, public or private, which provides inpatient or outpatient services relating to the diagnosis or treatment of a patient's mental condition. [Conn. Gen. Stat. §§ 17a-548; 52-146d (defining "mental health facility").]

Under the Patients' Bill of Rights, following discharge from a mental health facility (or in connection with litigation related to hospitalization), any patient treated by a psychiatrist for diagnosis or treatment has the right to inspect and make copies of his records. [Conn. Gen. Stat. §§ 17a-548(b); 17a-540(a) and (b) (defining "patient" and "facility").] The patient must submit a written request to view or copy his records. [Conn. Gen. Stat. § 17a-548(b).]

Generally, the facility may deny access to any portion of a patient's record if it determines that disclosure would: create a substantial risk that the patient would inflict life-threatening injury to self or others; cause a severe deterioration in mental state of the patient; constitute an invasion of privacy of another person; or violate an assurance of confidentiality furnished to another person. [Conn. Gen. Stat. § 17a-548(b).] A patient who is seeking access to his records in connection with any litigation related to hospitalization is not subject to the above restrictions on access. [Id.]

### **Remedies and Penalties**

**Right to sue.** Any patient aggrieved by a facility's refusal to grant access to his records may petition the Superior Court for relief in accordance with specified procedures. [Conn. Gen. Stat. §§ 17a-548(b); 4-105.]

## **G. State and Local Government**

### **1. Scope**

The Personal Data Act [Conn. Gen. Stat. §§ 4-190 through 4-198] imposes on state agencies a variety of duties related to the personal data that they maintain. The Act applies to every state or municipal board, commission, department or officer, courts, Governor, Lieutenant Governor, Attorney General, and town or regional board of education, that maintains a personal data system. [Conn. Gen. Stat. §§ 4-190 (defining "agency") and 4-193. It does not apply to the state legislature. [Conn. Gen. Stat. § 4-190.]

The Act applies to "personal data," including information about a person's medical or emotional condition or history which because of name, identifying number, mark or description can be readily associated with a particular person.

Persons who have rights under the Personal Data Act include an individual of any age concerning whom personal data is maintained, or a person's attorney or authorized representative. [Conn. Gen. Stat. § 4-190 (defining "person").]

### **2. Requirements**

State agencies may maintain only that information about a person that is relevant and necessary to accomplish the lawful purposes of the agency. [Conn. Gen. Stat. § 4-193(e).] Upon written request, an agency must inform an individual whether it maintains personal data (including medical and mental health information) concerning him and must provide access to that information. [Id.] The state agency must respond to the request in writing and in a format that is understandable to the requestor. [Conn. Gen. Stat. § 4-193(f).]

Agencies must have procedures that allow a person to contest the accuracy, completeness or relevancy of his personal data, and must have procedures to have it corrected. [Conn. Gen. Stat. § 4-193(h).]

An agency may refuse to disclose medical, psychiatric or psychological data to a person if it determines that disclosure would be detrimental to that person, or that nondisclosure is otherwise required or permitted by law. [Conn. Gen. Stat. § 4-194.] The agency must advise the person of his right to seek judicial relief in response to

such a refusal. [*Id.*] The person has the right to request that a medical doctor be permitted to review the personal data to determine whether it should be disclosed. The agency must comply with the doctor's determination. [*Id.*]

### **3. Remedies and Penalties**

**Right to Sue.** A person has the right to file a civil action for equitable relief, such as an injunction, and for damages against an agency that violates these provisions. [Conn. Gen. Stat. § 4-197.] The court may award court costs and reasonable attorney's fees to a person who prevails in such an action. [*Id.*]

When an agency specifically refuses to disclose personal information because of potential endangerment under Section 4-194, the person may petition the superior court within 30 days of the denial for an order requiring the agency to disclose the requested data. [Conn. Gen. Stat. § 4-195.]

## **II. RESTRICTIONS ON DISCLOSURE**

### **A. Employers**

In general, an employer may not disclose individually identifiable information in the medical records of any employee without the written authorization of the employee. [Conn. Gen. Stat. § 31-128f.] There are a number of exceptions to this general rule. Disclosure without the employee's authorization is permitted to other persons employed by or affiliated with the employer; in response to an apparent medical emergency; to apprise the employee's physician of a medical condition of which the employee may not be aware; pursuant to subpoena, court order, summons, warrant, discovery or grand jury request; to comply with federal, state, or local laws or regulations, or where the information is disseminated pursuant to the terms of a collective bargaining agreement. [*Id.*]

With respect to authorizations to disclose medical records, an employer must inform the employee of his right to inspect and correct the information, his right to withhold the authorization, and the effect such withholding has on the employee. [*Id.*]

### **B. Government**

#### **1. Freedom of Information Act**

Medical files maintained by any public agency are exempt from disclosure under the state's Freedom of Information Act. [Conn. Gen. Stat. § 1-210(b)(2).]

#### **2. Department of Public Health**

All information, records of interviews, written reports, and statements, including data concerning a person's medical or emotional condition or history, procured by the Department of Public Health in connection with studies of morbidity and mortality, or pursuant to statutory reporting requirements are confidential and may be used solely for the purposes of medical or scientific research or for disease prevention and control. [Conn. Gen. Stat. § 19a-25.]

This information is not admissible as evidence in any action in any kind in any forum.

[*Id.*] Confidential medical information may not be disclosed except as may be necessary for the purpose of furthering the research project to which it relates. [*Id.*] The department may exchange personal data with other governmental agencies or private research organizations for the purpose of medical research provided that they do not further disclose the data. [*Id.*]

### **C. Health Care Professionals, Medical Care Centers, Pharmacies, and Pharmaceutical Companies**

Health care professionals, medical care centers, pharmacies, pharmaceutical companies and their contractors, agents and employees are prohibited from selling medical record information and from disclosing such information for marketing purposes without the prior written consent of the individual. [Conn. Gen. Stat. § 38a-988a.] “Medical-record information” is defined as information which: relates to the physical, mental or behavioral health condition, medical history or medical treatment of an individual or a member of the individual’s family; and which is obtained from a medical professional or institution, from a pharmacy or pharmacist, from the individual, or from the individual’s spouse, parent or legal guardian or from the provision of or payment for health care to or on behalf of an individual or a member of the individual’s family. [Conn. Gen. Stat. §§ 38a-988a; 38a-976 (defining “medical-record information”).] The term does not include information that does not identify the patient. [Conn. Gen. Stat. § 38a-976.] This restriction does not prohibit the transfer of individually identifiable medical record information to another as part of a sale or merger of a business. [Conn. Gen. Stat. § 38a-988a.]

#### **Remedies and Penalties**

**Right to Sue.** A person whose medical record information is improperly sold or disclosed for marketing without his authorization in violation of this section may bring an action for equitable relief, damages or both. [Conn. Gen. Stat. § 38a-988a.] A person who violates these provisions is liable for double damages, costs and reasonable attorneys’ fees.

### **D. Hospitals Receiving State Aid**

Generally, a hospital that receives state aid may not disclose a patient’s hospital records to any person or entity without patient authorization. [Conn. Gen. Stat. § 4-104.] Records may be disclosed without authorization upon a subpoena or an order by a judge of the court. [*Id.*]

### **E. Insurance Entities, Including HMOs**

#### **1. Scope**

The Connecticut Insurance Information and Privacy Protection Act (IIPPA) applies to insurance entities including fee for service insurers, HMOs, insurance agents and insurance support organizations. [Conn. Gen. Stat. §§ 38a-175 (defining “health care center” as including HMOs); 38a-977 (detailing entities and persons covered); 38a-976 (defining “insurance institutions” as including health care centers).]

The Act covers “personal information,” including “medical record information,” which is gathered in connection with an insurance transaction. [Conn. Gen. Stat. § 38a-976 (defining “personal information”).] “Medical record information” is personal information that (1) relates to the physical, mental or behavioral health condition, medical history

or medical treatment of an individual or his family member, and (2) is obtained from a medical professional, medical care institution, pharmacy, pharmacist or an individual, the individual's spouse, parent or legal guardian, or from the provision of or payment for health care to or on behalf of the individual or his family. [Conn. Gen. Stat. § 38a-976 (defining "medical record information").] The Act does not apply to medical information that has had all personal identifiers removed. [Conn. Gen. Stat. § 38a-976(r).]

With respect to health insurance, the protections afforded by the Act extend to Connecticut residents who are the subject of the information collected, received or maintained in connection with insurance transactions and applicants, individuals or policyholders who engage in or seek to engage in insurance transactions. [Conn. Gen. Stat. § 38a-977.]

## 2. Requirements

### a. Authorizations for Obtaining Health Information from Others

If an insurance entity uses an authorization form to obtain health information in connection with an insurance transaction, the authorization form must conform to the requirements of the IIPPA. The authorization form must be written in plain language, specify the types of persons authorized to disclose information concerning the individual, specify the nature of the information authorized to be disclosed, identify who is authorized to receive the information and specify the purposes for which the information is collected. [Conn. Gen. Stat. § 38a-981.] The length of time the authorization remains valid varies with the purpose of obtaining the requested information. An authorization signed in support of an application for health insurance remains valid for 30 months while an authorization signed for the purpose of collecting information in connection with a claim for health benefits is effective for the term of coverage of the policy. [*Id.*]

### b. Disclosure Authorization Requirements and Exceptions

Generally, an insurance entity may not disclose medical information about a person that it collected or received in connection with an insurance transaction without that person's written authorization. [Conn. Gen. Stat. § 38a-988.] Authorizations submitted by those *other* than insurance entities must be in writing, signed and dated. [Conn. Gen. Stat. § 38a-988(a).] These authorizations are effective for one year. [*Id.*]

An insurance entity may not disclose information to another insurance entity pursuant to an authorization form unless the form meets the detailed requirements of the statute. [*Id.*] See Authorizations for Obtaining Health Information from Others, above.

The Act specifically prohibits insurance entities from selling medical record information or from disclosing this type of information for marketing purposes without the prior written consent of the subject of the information. [Conn. Gen. Stat. § 38a-988a.]

**Authorization exceptions.** There are numerous circumstances under which an insurance entity can disclose information without the individual's authorization including: verifying insurance coverage benefits; for the purpose of conducting business when the disclosure is reasonably necessary; to law enforcement agencies in order to prevent or prosecute fraud; in response to a facially valid search warrant or subpoena or other court order; and others. [Conn. Gen. Stat. § 38a-988.]

### c. Notification Requirements

The insurance entity must provide to all applicants and policyholders written notice of its information practices. [Conn. Gen. Stat. § 38a-979.] The insurance entity has the option of providing a detailed notice or an abbreviated notice. The abbreviated notice must advise the individual that (1) personal information may be collected from persons other than the individual proposed for coverage, (2) such information as well as other personal information collected by the insurance entity may in certain circumstances be disclosed to third parties without authorization, (3) a right of access and correction exists with respect to all personal information collected, and (4) that a detailed notice of information practices must be furnished to the individual upon request. [*Id.*]

### 3. Remedies and Penalties

**Right to Sue.** A person whose information is disclosed in violation of these provisions has a statutory right to bring a civil action for actual damages sustained as a result of the disclosure. [Conn. Gen. Stat. § 38a-995.] In such an action, the court may award costs and reasonable attorney's fees to the prevailing party. [*Id.*] A person whose medical record information is improperly sold or disclosed for marketing without his authorization may bring an action for equitable relief, damages or both. [Conn. Gen. Stat. § 38a-988a.]

**Fines and Penalties.** The Insurance Commissioner may hold hearings and may impose administrative remedies, including, in the case of intentional violations, monetary fines. [Conn. Gen. Stat. §§ 38a-990 through 38a-993.] A cease and desist order and fine not to exceed \$2,000 per violation or \$20,000 for multiple negligent violations may be imposed. [Conn. Gen. Stat. § 38a-993.] For intentional violations of the restrictions on selling and marketing medical record information, the Commissioner may impose a cease and desist order and fine not to exceed \$20,000 per violation or \$100,000 for multiple violations. [*Id.*] Any person who knowingly *and* willfully obtains information concerning an individual from an insurance entity under false pretenses is subject to a fine not to exceed \$10,000. [Conn. Gen. Stat. §§ 38a-997.]

### F. Nursing Home Facilities and Chronic Disease Hospitals

Any person admitted as a patient to a nursing home facility or chronic disease hospital must be assured confidential treatment of his personal and medical records. The patient may approve or refuse the release of these records to any individual outside the facility, except in the case of his transfer to another health care institution or as required by law or third-party payment contract. [Conn. Gen. Stat. § 19a-550.]

#### Remedies and Penalties

**Right to sue.** A facility that negligently deprives a patient of his right is liable to the patient in a private cause of action for injuries suffered as a result of such deprivation. Willful or reckless disregard of a patient's right may result in punitive damages. The patient also may bring an action for any other type of relief permitted by law, including injunctive and declaratory relief. [*Id.*]

### G. Pharmacists

A pharmacist may not reveal any records about pharmaceutical services rendered to a patient without the patient's written or oral consent. [Conn. Gen. Stat. § 20-626.] When oral consent is given it must be noted in the pharmacist's records. [*Id.*] A

patient's pharmaceutical information may be disclosed without the patient's consent to: the patient; the prescribing practitioner; third party payors who pay claims on behalf of the patient; any governmental agency with statutory authority to review the information; any person or agency pursuant to subpoena; and to anyone with a written contract with a pharmacy to access the pharmacy's database provided the information accessed is limited to data which does not identify specific individuals. [*Id.*]

### **III. PRIVILEGES**

Connecticut recognizes a number of health care provider-patient privileges, which prohibit a health care provider from disclosing communications made by or to a patient relating to his diagnosis and treatment. [Conn. Gen. Stat. §§ 52-146c (psychologist-patient); 52-146d through 52-146j (psychiatrist-patient); 52-146k (battered women's or sexual assault counselor-victim); 52-146o (physician-patient); 52-146p (marital and family therapist); 52-146(q) (social worker); 52-146(s) (professional counselor).]

### **IV. CONDITION-SPECIFIC REQUIREMENTS**

#### **A. Birth Defects**

Connecticut maintains a birth defects surveillance program to monitor the frequency and types of birth defects. [Conn. Gen. Stat. § 19a-56a.] The Commissioner of Public Health must establish a system to collect information regarding birth defects and other adverse reproductive outcomes. [*Id.*] The Commissioner may not use any patient identifying information contained in hospital discharge records to which he may have access for any use that is not related to the monitoring system. [Conn. Gen. Stat. §§ 19a-56a; 19a-56b.] All patient identifying information collected must remain confidential. [Conn. Gen. Stat. § 19a-56b.] Access to such information is limited to the Department of Public Health and other persons who have a valid scientific interest and qualifications and who are engaged in demographic, epidemiologic or other similar studies related to health. In addition, prior to receiving any identifiable information the person must agree, in writing, to maintain confidentiality as prescribed in this section. The commissioner must maintain an accurate record of all persons who are given access to the information in the system. [*Id.*]

#### **Remedies and Penalties**

Any person who, in violation of a written agreement to maintain confidentiality, discloses any information provided pursuant to this section, or who uses information provided pursuant to this section in a manner other than that approved by the department, may be denied further access to any confidential information maintained by the program.

#### **B. HIV/AIDS**

A person who receives confidential HIV-related information may not disclose or be compelled to disclose that information without the subject's authorization except in limited circumstances. [Conn. Gen. Stat. § 19a-583.] Disclosure without the subject's authorization is permitted to: health officers when disclosure is mandated or authorized by law; a health care provider to provide treatment to the subject or the

subject's child; those who, in the course of their professional duties have had a significant exposure to HIV infection; and others. [*Id.*] A statement must accompany each disclosure, advising individuals to whom disclosure is authorized by this statute that they are prohibited from further disclosing the information. [Conn. Gen. Stat. § 19a-585.] With a few specified exceptions, a record of all disclosures must be placed in the medical record. [*Id.*]

### **Remedies and Penalties**

**Right to Sue.** A person has a civil right of action for damages against a person who willfully violates these provisions. [Conn. Gen. Stat. § 19a-590.] In such a suit, damages are to be assessed in an amount sufficient to compensate an individual for the injuries he sustained as a result of the violation. [*Id.*]

## **C. Drug Abuse**

Connecticut maintains programs to treat individuals, who are alcohol dependent, drug dependent or intoxicated as defined by Conn. Gen. Stat. § 680. [Conn. Gen. Stat. § 673.] Treatment facilities and hospital may not disclose or allow the disclosure of information that identifies alcohol or drug dependent individuals. [Conn. Gen. Stat. §§ 17a-688.] Information regarding the treatment of an alcohol dependent, drug dependent or intoxicated minor may not be disclosed to the minor's parent or guardian. [*Id.*] The Commissioner of Public Health may disclose alcohol and drug related treatment information to researchers as long as no patient identifying information is released. [*Id.*]

## **D. Genetic Test Results**

An employer, employment agency or a labor organization may not request or require genetic information from an employee, person applying for employment, or a labor organization member or otherwise discriminate against an individual on the basis of genetic information. [Conn. Gen. Stat. § 46a-60.]

## **E. Mental Health**

All communications and records of communications relating to diagnosis or treatment of a patient's mental condition between a patient and a psychiatrist are confidential. [Conn. Gen. Stat. §§ 52-146d; 52-146e.] Except as expressly provided by statute, no person may disclose or transmit any communications and records that identify a patient to anyone else without the patient's consent. [Conn. Gen. Stat. § 52-146e.]

The consent must specify to whom the information is to be disclosed and to what use it will be put. [*Id.*] Future treatment generally cannot be conditioned on the patient's signing a consent to disclose his mental health information. [*Id.*] The patient may withdraw the consent at any time, in writing addressed to the person or office in which the original consent was filed. [*Id.*]

Disclosure without the patient's consent may be made: to others involved in the diagnosis or treatment of the patient; when the psychiatrist determines there is a substantial risk of imminent physical injury by the patient to himself or others; as necessary to place the patient in a mental health facility; to a limited extent, to collect fees; and in other situations. [Conn. Gen. Stat. § 52-146f.]

A person engaged in research may have access to patient identifying mental health records where needed for research if the research plan is submitted to and approved by the director of the mental health facility. [Conn. Gen. Stat. § 52-146g.] Records containing identifiable data may not be removed from the mental health facility. [*Id.*]

#### **Remedies and Penalties**

**Right to sue.** A person aggrieved by a violation of these provisions may petition the superior court for appropriate relief, including temporary and permanent injunctions. [Conn. Gen. Stat. § 52-146i.] Such a petition is privileged with respect to assignment for trial. Additionally, a person who is injured may bring a civil action against those who violate these provisions. [*Id.*]