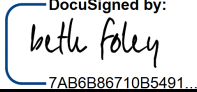


Emma Eccles Jones College of Education & Human Services

POLICY INFORMATION

Document # 116	Title: Use & Disclosure of PHI to Persons Involved in the Patient's Care, for Notification & Disaster Relief Purposes	Print Date: 11/15/2016
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I. POLICY STATEMENT

Each CEHS Health Care Component (HCC) should provide a patient with an opportunity to agree to, restrict or object to the disclosure of their PHI to family members or other persons identified by the patient, or for notification purposes.

II. DEFINITIONS

See HIPAA Privacy Policy 100

III. AUTHORITY AND RESPONSIBILITIES

CEHS has component units that are listed as a hybrid entity in accordance with USU's HIPAA Hybrid Covered Entity Declaration. Only the health care component/HCC (i.e., covered functions) of CEHS must comply with this policy. All references in this policy to "CEHS" shall be construed to refer only to the health care component of CEHS.

IV. PROCEDURES TO IMPLEMENT

- A. If the patient is present and has the capacity to make his or her own decisions, the HCC may disclose PHI to a family member, other relative or a close personal friend of the patient, or for notification purposes only if the HCC does one of the following:
- i. Obtains the patient's agreement in each encounter, orally or in writing, to disclose the patient's PHI to the individual (e.g., family member, friend, another person) that is present with the patient;
 - ii. Provides the individual with the opportunity to object to or restrict such disclosure, and the individual does not express any objections; or
 - iii. Reasonably infers from the circumstances, based on the exercise of professional judgment that the patient does not object to the disclosure. An example of this would include:
 - A patient brings their spouse or friend into the office when treatment is being discussed. In this case the HCC is not required to verify the identity of the individual involved in the patient's care. The patient's act of

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involving the other persons in his or her care is sufficient verification of their identity.

- iv. The HCC should not assume that an individual's agreement at one point in time to disclose PHI to a relative or friend applies to every visit or communication.

B. If the patient is not present or there are emergency circumstances:

- i. The HCC can only make limited disclosures of a patient's PHI when the patient is not present to be provided with the opportunity to agree or object to the use, or when objection cannot practicably be provided because of the patient's incapacity or emergent situation.
- ii. If the patient is not present, or the opportunity to agree or object to the use or disclosure cannot practicably be provided, the HCC may, in the exercise of professional judgment, determine whether the disclosure is in the best interest of the patient, and if so, disclose only the PHI that is directly relevant to the person's involvement with the patient's health care. Examples of this would include, but are not limited to:
 - Pick up of prescriptions,
 - Pick up of medical supplies,
 - Other similar forms of PHI

C. Use of PHI for Notification Purposes & Disaster Relief Purposes:

- i. Use and disclosure of PHI is allowed for disaster relief purposes. A HCC may use or disclose PHI to a public or private entity authorized by law or by its charter to assist in disaster relief efforts, for the purpose of coordinating with such organizations regarding the patient's location, general condition, or death.
- ii. In the case of disaster relief efforts, the HCC shall exercise professional judgment in the determining what PHI is pertinent to assist in notifications and disaster relief situations.

D. If the patient is deceased, the HCC may disclose to a family member, other relative, or a close personal friend of the patient, or any other person identified by the individual, who were involved in the patients care or payment for health care prior to the patient's death, PHI of the individual that is relevant to such person's involvement, unless doing so is inconsistent with any prior expressed preference of the patient that is known by the covered entity.

V. ATTACHMENTS

N/A

VI. REFERENCES

45 CFR 164.510(b)