

Restrictions on Uses and Disclosures of PHI

HIPAA Policy: Privacy 15

Summary: Describes to what extent individuals may request that disclosures of their PHI be limited

Affected Individuals: Individuals working in covered entities; faculty; staff; students

1.0 PURPOSE

The intent of this policy is to ensure that patients are given the right to request that the University of Mississippi Medical Center (UMMC) restrict its uses and disclosures of a patient's protected health information (PHI) for certain purposes.

2.0 SCOPE

The UMMC Request for Restrictions on Uses and Disclosures of PHI Policy applies to patient's requesting to restrict their PHI and UMMC employees accepting the requests.

3.0 STANDARDS

UMMC permits patients to request that restrictions be placed on his/her PHI that is used and disclosed by UMMC for the following purposes:

- To carry out treatment, payment and health care operations;
- To inform a person(s) directly involved in caring for the patient or directly responsible for payment related to the patient's healthcare services, of the patient's status; and
- To notify a person(s) responsible for the care of the patient, of the patient's location, general condition, or death.

UMMC is further required to agree to a request for restrictions when a patient makes the following request:

- A request from a patient, who paid for items and services in full, out of pocket, to restrict disclosures of PHI to health plans for payment purposes and disclosures to the health plan for purposes of health care operations.

The UMMC Office of Integrity and Compliance is responsible for receiving all such requests. With the exception of the aforementioned request which must be honored by UMMC, the Office of Integrity and Compliance and/or the treating provider will be responsible for making a decision to either accept or deny all other requests.

The UMMC Office of Integrity and Compliance will be responsible for reviewing the requests for restrictions on the use and disclosure of PHI for purposes of:

- Payment; and

Restrictions on Uses and Disclosures of PHI

HIPAA Policy: Privacy 15

- Healthcare operations.

The patient's treating provider will be responsible for reviewing requests for restrictions on the uses and disclosures of PHI for the purposes of:

- Treatment;
- Notification of person(s) responsible for the patient, of the patient's location, general condition or death; and
- Informing a person(s) directly involved in caring for the patient or directly responsible for payment related to the patient's healthcare services, of the patient's status.

Once a restriction is agreed to, UMMC and/or the treating provider is not required to notify the subsequent downstream provider. It is the patient's responsible to request the continuation of the restriction with the subsequent provider.

3.1 Denied Requests:

Instances where requests for restrictions will automatically be denied:

- Emergency Situations – During emergency situations, UMMC will use and/or disclose a patient's PHI that it has previously agreed to restrict. This includes releasing information to providers outside of UMMC who are treating the patient in an emergency situation. UMMC personnel must ask that the outside provider receiving such information to not further use or disclose the information.
- Hospital's Directory – The restrictions do not apply to the use of PHI in the hospital's facility directory, if the patient has already agreed to be included in the directory.
- Disclosures to the patient – UMMC will not restrict PHI disclosed by UMMC to the patient.
- A restriction cannot be applied to the use or disclosure of PHI for any of the following uses and disclosures, which are permitted or required under HIPAA:
 - Uses and disclosures that are required by law;
 - Uses and disclosures for public health activities;
 - Disclosures about victims of abuse, neglect, or domestic violence;
 - Uses and disclosures for health oversight activities;
 - Disclosures for judicial and administrative proceedings;
 - Disclosures for law enforcement purposes;
 - Uses and disclosures about decedents;
 - Uses and disclosures for cadaveric organ, eye or tissue donation purposes;
 - Uses and disclosures for research purposes;
 - Uses and disclosures to avert a serious threat to health or safety;
 - Uses and disclosures for specialized government functions; and
 - Disclosures for workers' compensation.

3.2 Handling Requests:

Restrictions on Uses and Disclosures of PHI

HIPAA Policy: Privacy 15

The following are procedures to be used in handling requests from patients for restrictions on the use and disclosure of their PHI.

The request must be in writing and must contain the following information:

- Name of the patient;
- Medical record number;
- A specific description of the information they wish UMMC to restrict;
- Dates of service to which the specific information pertains;
- For what type of uses and disclosures the restriction will apply, such as restrictions for payment purposes, treatment, etc.;
- For what reason they wish to restrict the information;
- An expiration date, if applicable;
- Signature of the patient making the request; and
- The date the request is being made.

These requests will be forwarded to the Office of Integrity and Compliance. The Office of Integrity and Compliance will then review the request. Based on the type of restriction being requested, either the Office of Integrity and Compliance or the treating provider will make a decision to agree or deny the request. UMMC will notify the patient in writing of the decision.

- The Office of Integrity and Compliance will place notation in the record and will notify other departments affected by the restrictions to which UMMC has agreed, such as Revenue Cycle when the request affects payment to the University Hospitals and Clinics (UHC).

3.3 Terminating Restrictions:

UMMC has the right to terminate any restriction to which it has agreed under the following circumstances:

- The patient agrees to or requests the termination in writing;
- The patient orally agrees to the termination and the oral agreement is documented; or
- UMMC informs the patient in writing that UMMC is terminating its agreement to a restriction. UMMC will apply this termination only to PHI that is created or received after it has informed the patient of the termination.

All requests to terminate any restrictions should be forwarded to the Office of Integrity and Compliance.

4.0 CONTACT INFORMATION

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HIPAA Policy: Privacy 15

For questions about the UMMC Request for Restrictions on Uses and Disclosures of PHI Policy or for more information, call the Office of Integrity and Compliance at 815-3944.