Applicability: UW Medicine

Policy Title: Use & Disclosure of Protected Health Information for Involvement in Individual’s Care and Notification

Policy Number: PP-15

Superseded Policy(ies) or Entity Policy: N/A

Date Established: January 9, 2003

Date Effective: December 14, 2015


Next Review Date: December 14, 2018

PURPOSE AND SCOPE
This policy describes the circumstances under which protected health information (PHI) may be disclosed to assist in the patient’s care or to notify a family member, personal representative or other person responsible for the care of the patient.

This policy is applicable to all UW Medicine entities.

POLICY PRINCIPLES/STATEMENT
See POLICY.

DEFINITIONS
See UW Medicine Compliance Policy: PP-00 Glossary of Terms.

POLICY

I. Assistance with care or payment.

If the disclosure is made in accordance with section III below, and the patient has not instructed UW Medicine in writing to not make the disclosure, then UW Medicine workforce members may disclose to the patient’s immediate family members (including a patient's state registered domestic partner), a personal representative, or any other
individual with whom the patient is known to have a close personal relationship, only the PHI which is directly relevant to the individual’s involvement with the:

A. Treatment and care of the patient; or

B. Payment related to the patient’s healthcare.

II. Notification.

If the use or disclosure is made in accordance with section III below, a UW Medicine workforce member may use or disclose PHI to notify, or assist in the notification of (including identifying or locating) the patient’s immediate family members (including a patient's state registered domestic partner), a personal representative or others responsible for the patient’s care, of the location, general condition, or death of the patient.

III. Use or disclosure of PHI as described in sections I and II above is conditioned on one of the following situations:

A. When the patient agrees to the use or disclosure.

B. When the patient is given an opportunity to agree or object and does not object to the use or disclosure.

C. When the patient is not present or is incapacitated, or the circumstances are emergent, and the workforce member has determined, based upon professional judgment or good medical practice, that the use or disclosure is in the best interest of the patient.

D. When the patient is deceased and a personal representative of the deceased patient exercises all of the deceased patient’s rights. If there is no personal representative, or upon discharge of the personal representative, a deceased patient’s rights may be exercised by persons who would have been authorized to make healthcare decisions for the deceased patient when the patient was living.
Use & Disclosure of PHI for Involvement in Patient's Care and Notification Decision Tree

1. Is the person requesting the information involved in the patient's treatment & care or payment?
   - Yes
   - No

2. Is the information directly relevant to the patient's treatment & care or payment?
   - Yes
   - No

3. The patient is not available:
   - Use professional judgment & common practice. For example, allowing someone to pick up x-rays or prescriptions.

4. Is the patient available to indicate their wishes?
   - Yes
   - No

5. The patient is not available:
   - Use professional judgment & common practice. For example, allowing someone to pick up x-rays or prescriptions.

6. Has the patient agreed to the disclosure, or been given the chance to object?
   - Yes
   - No

7. Emergency or incapacitated patient:
   - Use professional judgment. Release only information that is directly related to the person's involvement with the patient's treatment or payment, and when the disclosure is in the best interest of the patient.

8. Judgment and common practice

9. Patient agrees, or doesn't object

10. No disclosure is allowed.

11. No disclosure is allowed.
IV. Summary of Relevant Requirements Use & Disclosure of PHI for Involvement in Patient's Care and Notification Table

<table>
<thead>
<tr>
<th>Patient is present and has the capacity to make healthcare decisions</th>
<th>Family Member or Friend</th>
<th>Other Persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relevant PHI may be disclosed if the healthcare professional does one of the following:</td>
<td>Relevant PHI may be disclosed if the healthcare professional does one of the following:</td>
<td></td>
</tr>
<tr>
<td>1. Obtains the patient’s agreement. 2. Gives the patient an opportunity to object and the patient does not object. 3. Decides from the circumstances, based on professional judgment that the patient does not object to the disclosure.</td>
<td>1. Obtains the patient’s agreement. 2. Gives the patient the opportunity to object and the patient does not object. 3. Decides from the circumstances, based on professional judgment that the patient does not object to the disclosure.</td>
<td></td>
</tr>
<tr>
<td>Disclosure may be made in person, over the phone or in writing.</td>
<td>Disclosure may be made in person, over the phone or in writing.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Patient is not present or is incapacitated</th>
<th>Healthcare professional may disclose relevant PHI if s/he believes it is in the patient’s best interest, based on his/her professional judgment.</th>
<th>Healthcare professional may disclose relevant PHI if s/he is reasonably sure that the patient has involved the person in the patient’s care AND believes the disclosure is in the patient’s best interest, based on his/her professional judgment. Healthcare professional may share only the PHI that is directly relevant to the person’s involvement with the individual’s care or payment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disclosure may be made in person, over the phone or in writing.</td>
<td>Disclosure may be made in person, over the phone or in writing.</td>
<td></td>
</tr>
<tr>
<td>Healthcare professional may use professional judgment and experience to decide if it is in the patient’s best interest to allow someone to pick up filled prescriptions, medical supplies, X-rays or other similar forms of health information for the patient.</td>
<td>Healthcare professional may use professional judgment and experience to decide if it is in the patient’s best interest to allow someone to pick up filled prescriptions, medical supplies, X-rays or other similar forms of health information for the patient.</td>
<td></td>
</tr>
</tbody>
</table>
V.  **Prescriptions.**

UW Medicine workforce members use professional judgment and experience with common practice in allowing a person to act on behalf of the individual to pick up filled prescriptions, medical supplies, X-rays or other similar forms of PHI.

VI.  **Disaster relief.**

A UW Medicine workforce member may use or disclose PHI to an organization authorized to assist in disaster relief efforts, for purposes of coordinating with the organization on the notifications described in section II above. Under such circumstances, patients will be given an opportunity to agree or object. Such agreements or objections will be honored as long as the UW Medicine healthcare professional, in the exercise of his/her professional judgment, determines that such an agreement or objection to use or disclose PHI will not interfere with the ability to respond to the emergency situation. When the patient is not present or is incapacitated or deceased, follow Section III items 3 and 4.

VII.  **Human Immunodeficiency Virus (HIV) testing and sexually transmitted diseases (STD).**

Heightened standards of confidentiality are required when using or disclosing PHI pertaining to HIV testing or STDs. See UW Medicine Compliance Policy: **PP-08 Use & Disclosure of Protected Health Information Requiring Authorization**.

Individuals who believe that they have been placed at risk for acquiring HIV or an STD, and seek disclosure of another’s PHI, must contact the appropriate public health officer.

**REGULATORY/LEGISLATION/REFERENCES**
- 45 CFR Part 160 and 164; Section 164.510(b) – Uses/Disclosures for Involvement in the Individual’s Care & Notification
- RCW 70.02.200(1)(b) – Disclosure without patient's authorization—Permitted and mandatory disclosures

**Cross References**
- Policy & Procedure Manual, King County Division of Medical Examiner
- Guide for Cooperation for Physicians, Hospitals, Press, Radio & Television in the State of Washington
- Office for Civil Rights (OCR) Guidance for Healthcare Providers and Consumers on the HIPAA Privacy Rule and Communications with a Patient’s Family, Friends, or Others Involved in the Patient’s Care:
  http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/familyfriends.html

**PROCEDURE ADDENDUM(s) REFERENCES/LINKS**
- UW Medicine Compliance Policy: PP-00 Glossary of Terms
- UW Medicine Compliance Policy: PP-08 Use & Disclosure of Protected Health Information Requiring Authorization
ROLES AND RESPONSIBILITIES
Defined within POLICY.

AUTHORITIES

<table>
<thead>
<tr>
<th>Custodian</th>
<th>Responsible Officer</th>
<th>Implementation Officer</th>
<th>Administrative Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
</tr>
<tr>
<td>Author</td>
<td>Owner</td>
<td>Auditor</td>
<td>Endorser</td>
</tr>
<tr>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Executive Compliance Committee</td>
</tr>
</tbody>
</table>

APPROVALS

UW Privacy Official
Johnese M. Spisso, Chief Health System Officer,
UW Medicine & Vice President for Medical Affairs, UW