

# HIPAA CONFIDENTIALITY OF PATIENT INFORMATION

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## **OBJECTIVE**

To provide guidelines for access, use and disclosure of patient information, and to protect the confidentiality of patient information in accordance with federal and state requirements.

## **SCOPE**

This policy applies to all new and prospective employees, current employees, physicians, residents, volunteers, affiliated students, vendors and contractors of University Health System, Inc. (UHS) and UHS Ventures, Inc. (UHSV). This policy applies to physicians and other independent practitioners pursuant to 45 CFR § 164.501 regarding organized healthcare arrangements.

## **RESPONSIBILITY**

The HIPAA Privacy Officer is responsible for administering this policy. Supervisors and department managers are responsible for the drafting of procedures required to implement this policy and should review this policy with employees on an annual basis.

## **PATIENT INFORMATION**

For purposes of this policy, Patient Information means medical records, verbal discussion regarding patients, billing information or any other information, maintained by UHS, UHSV, or any other entity covered by this policy whether in electronic, paper or other form which identifies the patient or may be used to identify the patient.

## **POLICY STATEMENT**

Patient Information, including medical records and billing records, is privileged and confidential and is used to facilitate patient care, research and education. Medical and billing records are the property of UHS and/or UHSV. Patient Information is required to be maintained in a safe and secure way to protect the patient's privacy and confidentiality. When Patient Information is discarded, it should be shredded or discarded in a manner which assures that the information may not be used to identify any patient.

Patient information must be available to those involved in the patient's care. However, such information may only be accessed on a need-to-know basis. Need-to-know is defined as the minimum use, disclosure or access necessary for one to adequately perform one's specific patient care or other responsibilities. All other access is prohibited unless authorization is obtained from the patient or unless otherwise permitted by state or federal law.

Original medical records are not permitted to leave the campus except under specific court order.

Effective: April 1, 2003

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## PROCEDURE

### A. Treatment, Payment and Operations

The following describes the major functions and associated personnel for which use and disclosure of patient information is permitted, and provides general guidelines for the use of this information.

#### 1. Patient Care

Patient information is available only to physicians and other health care professionals on a need-to-know basis and only to the extent that the physician and other health care professionals are involved in the care of the patient. Patient records are requested by following established Medical Record Department procedures.

The following describes some of the personnel who may access patient records for use in patient care:

- (a) Practitioners (Physicians, Nurse Practitioners, Physicians Assistants): Practitioners may access records of patients if they are or were involved in the patient's care.
- (b) Medical Residents: Medical Residents may access the records of patients if they are or were involved in the patient's care.
- (c) Students Involved in Medical Higher Education

Access to medical records by students or those who are participants in an approved rotation at the hospital from a medical or professional school is allowed. Such review is allowed to the extent that these students are participating in the care of the patient, with the knowledge and approval of patient's physician, and under applicable guidelines in force for the activities of the particular students at the hospital. Access to students must be relevant to the specific educational experience or rotation of the student as defined by guidelines and requirements governing the student's rotation/activities.

- (d) Other Healthcare Personnel: Other healthcare personnel including, but not limited to, nurses, pharmacists, dietitians, therapists, social service, care management and other allied health professionals may have access to information pertaining to patients in whose care they are directly involved. Such access must be relevant to their specific job function as defined in the applicable job description.

#### 2. Administrative Functions Involving Payment and Operations

Patient information may be used and disclosed for administrative functions involving payment and operations, including but not limited to:

- Compliance, Accreditation and Licensing
- Risk Management
- Third-party reviewers, including third-party payors
- Quality Assurance / Quality Control
- Credentialing
- Care Management
- Medical Records
- Other UHS administrative functions involved in payment and operations
- Registration, Billing and Patient Access Management Activities
- Information Services

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Each such individual shall be allowed access only as is relevant to his/her specific job function as defined by the applicable job description.

Requests for records for such purposes should be forwarded to the Medical Records Department.

3. Conferences/Educational Activities/Teaching/Residents

Medical records may be available for presentation at conferences and medical staff rounds. In general, these records must be signed out of the Medical Records Department in accordance with policies of the Medical Records Department. Such use may require approval of the Institutional Review Board. Unauthorized photocopying of medical records is prohibited.

B. Other Disclosures

Certain disclosures may be made for activities other than treatment, payment and operations as outlined under section A above. All such disclosures should generally be coordinated through Medical Records.

C. Incomplete Medical Records

Incomplete medical records are not to leave the Medical Records Department except for the purpose of direct patient care or except as approved on a case-by-case basis.

D. Questions Regarding Use and Disclosure of Information

Questions regarding use and/or disclosure of any medical information should be directed to Medical Records, the Privacy Officer or the Office of General Counsel.

E. Sanctions

Violations of this policy will result in disciplinary action up to and including termination, in accordance with UHS or any other applicable Human Resources Policies and Procedures.

Effective April 2003