

Restrictions on Uses and Disclosures of Protected Health Information

Policy:

Patients may request that certain uses and disclosures of their Protected Health Information be restricted if such use or disclosure is not otherwise required by law. If the use or disclosure is authorized under federal and state law, the Provider is not required to agree to the restriction and this Policy applies. If the use or disclosure is (a) required by law; or (b) not authorized under federal or state law without the patient's consent, this Policy does not apply.

Procedures:

1. Patients may request that uses and disclosures of their Protected Health Information be restricted for uses and disclosures (a) that are otherwise authorized by federal and state law (such as for treatment, payment and healthcare operations); and (b) the use or disclosure is not required by law.
2. Requests for restrictions of a use or disclosure of Protected Health Information pursuant to this Policy will be forwarded to the Privacy Officer, or his/her designee.
3. The Privacy Officer may, but is not required, to agree to the requested restriction unless the patient requests Protected Health Information not be shared with the patient's health insurance or third-party payer and the patient has personally paid in full the outstanding charge to which the Protected Health Information relates. All decisions on other restrictions will be made on a case-by-case basis.
4. If a requested restriction is agreed to by the Privacy Officer, the restriction will be applied to uses and disclosures after the effective date of the agreed upon restriction.
5. Either the patient or the Provider may revoke a restriction that was previously agreed to. If the Provider revokes the restriction, the patient will be notified, and the revocation will apply only to the Protected Health Information created or received after the effective date of the revocation.
6. Patients may also request that uses and disclosures for notification of next of kin and individuals involved in their care be restricted using the same procedures as outlined herein. Provider will agree to the requested restriction if required by law.
7. In the event the patient is incompetent as determined by his/her physician, this policy shall apply to requests for restriction made on behalf of the patient by the patient's personal representative.

Sample Form Denial of Request for Restriction

Patient/Requestor's Name

Address

Dear _____:

You previously requested that we refrain from certain uses and/or disclosures of your protected health information which are allowed by applicable federal and state law. After careful review we have determined that we are unable to accommodate your request as it would not be administratively feasible.

Please understand that we take the privacy and security of your protected health information extremely seriously. In accordance with HIPAA, we require staff to limit uses and disclosures of protected health information for non-treatment purposes to the minimum necessary to accomplish the intended purpose and staff are only allowed to access protected health information as needed to perform their job duties. We have processes in place to audit and monitor compliance with these policies and employees who violate these policies are subject to disciplinary action, up to and include termination.

Please also be aware that any third parties who receive your protected health information from us to perform a service on our behalf are required to sign a business associate agreement with us agreeing to comply with HIPAA. These obligations include refraining from using or disclosing your health information except as required or authorized by law and limiting their uses and disclosures of your health information to only the minimum amount necessary for the intended purpose.

Please do not hesitate to contact me if you have questions regarding this denial. You may also submit a complaint to the Office of Civil Rights for Health & Human Services regarding our handling of your request for restriction and decision to deny your request via _____.