

Office of Compliance Programs

PRIVACY POLICY AND PROCEDURES

LSU Health Sciences Center New Orleans

Date Effective: April 14, 2003

Policy #: 2100.17

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Patient Information Policy

Use or Disclosure of Protected Health Information For Facility Directory Purposes

SCOPE:

All Louisiana State University (LSU) System health care facilities and providers including, but not limited to hospitals, physician practices, clinics, schools, etc. on the LSU Health Sciences Center New Orleans Academic Campus.

Nota Bene: All LSU System health care facilities and providers including, but not limited to hospitals, physician clinics, schools, etc. on the LSU Health Sciences Center New Orleans Academic Campus, are referred to in this policy as LSUHSC-NO.

PURPOSE:

To provide guidance to the health care facilities and providers affiliated with LSUHSC-NO on the requirements of the Health Insurance Portability and Accountability Act, Standards for Privacy of Individually Identifiable Health Information (HIPAA Privacy Regulations), for using a patient's Protected Health Information in a facility's directory.

POLICY:

All LSUHSC-NO health care facilities and providers must provide patients with the opportunity to agree to or prohibit the use or disclosure of their Protected Health Information in a facility's directory.

DEFINITIONS:

Protected Health Information (sometimes referred to as "PHI") – for purposes of this policy means individually identifiable health information, that relates to the past, present or future health care services provided to an individual. Examples of Protected Health Information include medical and billing records of the patient.

For the purposes of the definition of "Designated Record Set":

- The term "record" means any item, collection, or grouping of information that includes PHI and is maintained, collected, used or disseminated by or for LSUHSC-NO.
- The term "record" also includes patient information originated by another health care provider and used by LSUHSC-NO to make decisions about a patient.
- The "term" record includes tracings, photographs, videotapes, digital and other images that may be recorded to document care of the patient.

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Designated Record Set – is a group of records maintained by or for LSUHSC-NO that are:

- The medical records and billing records about individuals maintained by or for LSUHSC- NO ; or
- Any records used, in whole or part, by or for the LSUHSC- NO to make decisions about individuals.
- Any record that meets this definition of Designated Record Set which are held by a HIPAA Business Associate of LSUHSC- NO are part of LSUHSC- NO's Designated Record Set.

PROCEDURE:

- 1.0 The patient or personal representative must be given an opportunity to object to being listed in LSUHSC-NO directory at the time of admission or service.
- 1.1. LSUHSC-NO must take the following steps before including any of a patient's PHI in LSUHSC-NO's directory:
 - 1.1.1. Inform the patient of LSUHSC-NO's policies regarding its directory, if any; and
 - 1.1.2. Provide the patient with an opportunity to not be included in LSUHSC-NO's directory listing or to restrict some or all of their PHI that LSUHSC- NO desires to include in the directory.
 - 1.1.3. If a patient does not orally or in writing object to his or her PHI being listed in LSUHSC-NO directory, the facility may include the following PHI in its facility directory:
 - The patient's name;
 - The patient's location in the facility;
 - The patient's condition described in general terms that do not communicate specific medical information about the individual (e.g., "fair", "good", "critical", etc.);
 - The patient's religious affiliation;
 - 1.1.4. If a patient does not orally or in writing object to his or her PHI being listed in the LSUHSC-NO directory, the facility may disclose for directory purposes such information:
 - To members of the clergy and
 - Except for religious affiliation information, to persons other than members of the clergy who ask for the patient by name;
- 2.0 The information described above may be disclosed to members of the clergy whether or not the clergy asks for the patient by name. In addition, the patient's religion may be made available to members of the clergy.
- 3.0 The form included as Attachment A may be used to document the patient's preference to permit or prohibit inclusion of PHI in LSUHSC- NO directory. A notation may be made in LSUHSC-NO's computer system or any other means of documentation may be used in lieu of using Attachment A.

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4.0 Emergency Situations:

4.1. Emergency situations may arise in which the patient is not able to be given the opportunity to object to being listed in LSUHSC-NO's directory.

4.1.1. If the opportunity to object to being listed in LSUHSC- NO directory cannot practically be provided because of the patient's incapacity or an emergency treatment circumstance, LSUHSC- NO may list the patient in the facility's directory if the listing is:

- Consistent with a prior expressed preference of the patient, if any, known to LSUHSC-NO; and
- In the patient's best interest as determined by LSUHSC-NO in the exercise of professional judgment.

4.1.2. When it becomes practical to do so, LSUHSC- NO must inform the patient of the PHI included in LSUHSC-NO directory, to whom such PHI may be disclosed, and must at that point provide the patient with an opportunity to object to being listed in LSUHSC-NO directory.

REFERENCE:

45 C.F.R .§164.510