

VALLEYCARE
**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
HEALTH INFORMATION MANAGEMENT SERVICES
POLICY & PROCEDURE**

**NUMBER: 1566
VERSION: 1**

SUBJECT/TITLE: HIMS - 102 AUTHORIZATION REQUESTS FROM PATIENTS AND OR INDEPENDENT VENDORS

POLICY: To Ensure compliance with all established statutes, codes and regulations as set by government laws pertaining to the Release of Patient Identifiable Medical Information for general patient, minors, and children placed in Foster Care, alcohol and drug abuse, psychiatric and/or confidential (PRM litigation) records to patients, healthcare facilities and independent vendors.

PURPOSE: To establish specific guidelines for the processing of Authorization requests for the reproducing of Medical Records to patients and or independent vendors, i.e., State Department of Social Services (DOSS), Division of Disability Evaluation (EDD), the Los Angeles County Department of Public Social Services (DPSS) and Photocopy services etc.

DEPARTMENTS: HEALTH INFORMATION MANAGEMENT SERVICES

DEFINITIONS: Reproduction (photocopying) of medical records.

PROCEDURE: Release of Information clerk will receive time stamped authorization.

Clerk will process Authorization requests within five (5) to fifteen (15) working days of receipt. These time frames will depend on the type of information requested as well as the availability of the medical chart.

Clerk will review each authorization for the following:

1. Specific type of request, general patient, minor, Foster Care, alcohol, drug abuse, psychiatric, various letters ad or x-rays.
2. Full name of patient, date of birth.
3. Copy of identification card and attach to Authorization.
4. Verify signature on Authorization versus identification card.
5. Patient's legal representative must bring copies of a legal document stipulation guardianship, conservatorship, beneficiary, executor of state etc.
6. Parental consent with parental identification.
7. Court Order signed and dated by a judge.
8. Health care provider name or facility name.
9. Specific types of medical information needed.

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10. Specific person or entity records are to be released to.

11. Expiration date of Authorization.

All incomplete requests are returned via county mail to the requestor with a detailed letter outlining the missing information.

Clerk will input all incoming requests into Hospital Information Systems, Quantim Correspondence.

Clerk will screen and identify all requests through Hospital Information Systems as trained.

Clerk will compile chart pull lists and pull chart along with loose filing if applicable.

Clerk will confirm that the signature on the authorization is verified with the patient consensual signature on the latest patient Consent within the medical record.

Clerk will complete quality assurance on each and every chart to confirm order and completeness of requested information. Verify documentation by reviewing the name, birth date and medical record number (MRUN) on the authorization request, chart cover and medical information in chart.

Clerk will flag and copy the specific medical information requested.

Upon completion of photocopying, authorization form will be filed under the miscellaneous tab for future reference. Hospital Information System (Quantim Correspondence) will be updated to reflect completion date.

References: JCAHO IM.2.2.1 – IM7.10.1, Title 22, 70749, 70751, 70551, California Healthcare Association Chapters 14, 15, 16, California Constitution: Article 1, section 1, “Individuals Right to Privacy”, California Code of Civil Procedure, section 282.6 “Confidentiality of the Medical Information Act”, Evidence code section 1158 “Written Release Requirements”, HIPAA laws.	
Approved by: Tillie Acosta (Medical Records Director I)	Date: 07/09/2010
Review Date: 07/09/2013	Revision Date:
Distribution: Health Information Management	
Original Date: 07/09/2010	