LAC+USC MEDICAL CENTER POLICY

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Subject: PROTECTED HEALTH INFORMATION: RIGHT TO REQUEST RESTRICTION ON THE		Issue Date:	4/14/03	203.3			
		Supersedes:	Effective Date:				
USES AND DISLOSURES OF	11/08/16		11/21/22				
Departments Consulted:	Reviewed & Approved by: Attending Staff Association Executive Committee Senior Executive Council		Approved by:				
Privacy Committee			(Signature on File)				
Health Information Management			Chief Medical Officer				
Ethics Resource Committee			(Signature on File)				
			Chief Executive Officer				

<u>PURPOSE</u>

To establish a policy pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA Privacy Rule) to ensure a patient's right to request restrictions on the use and disclosure of his or her protected health information.

POLICY

LAC+USC Medical Center shall allow a patient to request a restriction on the use and disclosure of his or her protected health information (PHI).

DEFINITIONS

Protected Health

Information (PHI) Individually identifiable information relating to past, present, or future physical or mental health or condition of an individual, provision of health care to an individual, or the past, present, or future payment for health care provided to an individual.

PROCEDURE

- The Medical Center shall permit a patient to request to restrict the use and disclosure of protected health information for treatment, payment and health care operations purposes, disclosure to those involved in the individual's care or payment for such individual's care, and for notification purposes. The patient must complete and submit the *Patient's Request for Restriction of Use and Disclosure of Health Information* form (Attachment A).
- The Medical Center is not required to agree to the individual's request for restriction.
- If the Medical Center agrees to such a restriction, the Medical Center may not use or disclose protected health information in violation of such restriction, unless as specified within this policy.
- The Medical Center will notify the individual in writing as to whether or not the restriction request was approved or denied using the *Response to Request for Special Restriction on Use of Disclosure of Protected Health Information* form (Attachment B).

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- The Medical Center is not required to abide by the agreed upon restriction in the following situation(s):
 - If the patient who requested the restriction is in need of emergency treatment and the restricted PHI is needed to provide the emergency treatment;
 - If restricted PHI is disclosed to a health care provider for emergency treatment, the Medical Center will request that such health care provider not use or disclose the information to any other person.
- If the Medical Center agrees to a patient's requested restriction, the restriction does not apply to the following uses and disclosures:
 - To the Secretary of the Department of Health and Human Services to investigate or determine the Medical Center's compliance with the HIPAA Privacy Rule;
 - Facility directories;
 - Instances for which an authorization or opportunity to agree or object is not required, such as judicial and administrative purposes; health oversight; research; law enforcement; public health; to avert a serious threat to health and safety, cadaveric organ, eye, or tissue donation; decedents; Workers' Compensation; victims of abuse, neglect, or domestic violence; specialized government functions; or as required by law.
- The Medical Center may terminate its agreement to a restriction in the following situations:
 - The patient agrees to or requests the termination in writing;
 - The patient orally agrees to the termination and the oral agreement is documented;
 - The Medical Center informs the patient that it is terminating its agreement to a restriction. Such termination is only effective with respect to Protected Health Information created or received after it has so informed the patient.
- The Medical Center will retain all documents created or completed under this policy for a period of at least six (6) years from the date of its creation or the date when it was last in effect, whichever is later.

REFERENCES

45 Code of Federal Regulations § 164.522(a) DHS Policy No. 361.5, "Right to Request Restriction on the Uses and Disclosures of PHI"

ATTACHMENTS

Attachment A: DHS "Patient's Request For Restriction On The Use And Disclosure Of Protected Health Information"

Attachment B: "Response To Request For Special Restriction On Use And Disclosure Of Protected Health Information

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