

# LOS ANGELES GENERAL MEDICAL CENTER POLICY

Subject: <b>CONFIDENTIALITY</b>	Original Issue Date: 7/11/75	Policy # <b>203</b>
	Supersedes: 8/23/19	Effective Date: 4/6/23
Policy Owner(s): Co-Chair, Ethics Resource Committee Executive Sponsor(s): Chief Medical Officer		
Departments Consulted: Health Information Management Information Services Office of Risk Management Ethics Resource Committee Fetal/Infant/Child Ethics Committee	Reviewed & Approved by: Attending Staff Association Executive Committee Senior Executive Officer	Approved by:  Chief Medical Officer
		Chief Executive Officer

## PURPOSE

To provide standards that preserve confidentiality of patients' health/medical records and information in accordance with federal and State regulations.

## POLICY

The Medical Center shall strictly enforce the patient's right to confidential treatment of all communications and documentation pertaining to his or her care.

All medical center staff shall preserve, protect, and maintain confidentiality of patient information. Unless otherwise specifically permitted under this policy, medical center staff shall not use or disclose confidential information without prior authorization.

Health Information Management is responsible for maintaining the custody of the patient/client health/medical records and is authorized direct the transfer of patient information by any means.

Protected health information shall **not** be released from custody without the written permission of the patient or legal representative in accordance with federal and State regulations and applicable Los Angeles County Department of Health Services policies.

Medical Center Staff should not directly or indirectly disclose, publish, communicate, or make available Confidential Information to any entity or person that does not have a need or the authority to know and use the Confidential Information, except as required for the Medical Center Staff to perform authorized job duties.

Under certain circumstances, legal requirements to disclose information may necessitate exceptions to this policy.

Discussions concerning patient care shall take place only between those individuals who are directly concerned with the care of the patient and for educational, academic and training purposes as delineated by the general consent or by specific consents. Confidential information shall not be discussed with others, including family members, except by the permission or request of the patient or surrogate/legal representative.

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The Medical Center shall strictly enforce the privacy standards afforded to individually identifiable patient information by ensuring patient appointment reminders and other communications are disclosed in a secure and confidential manner.

Notification to family members or guardians of minors are subject to consent requirements.

### **DEFINITION**

Protected Health Information (PHI) is any individual identifiable information derived by and or maintained or transmitted in any format, including oral statements by the facility about a patient. PHI includes billing and payment information.

### **PROCEDURE**

- The Medical Center workforce shall be oriented to policies and procedures pertaining to confidentiality privacy practices.
- Policies and procedures shall establish levels of access by Medical Center staff to information systems, patient data, and records in accordance with federal and State regulations and law.
- Personnel responsible for maintenance of medical record files, securing admission intake data, or the operation of automated data transmission shall receive continual training to ensure operational conformity with Medical Center policies on data security and confidentiality of patient information.
- PHI shall be maintained in a secure manner when outside the direct supervision of Health Information Management.
- Electronic processes that share data shall be reviewed and approved by Medical Center leadership in accordance with Los Angeles County Board of Supervisors mandates.
- Requests for research data from patients shall be processed by the Medical Center's Institutional Review Board.
- Patient information shall be made available to Medical Center staff as required for the purposes of peer review, utilization review, or other reviews/activities necessary for compliance with Attending Staff Bylaws, education and training requirements, or facility accreditation in compliance with federal, State, and local laws.
- Individual PHI shall only be discussed in areas where patient confidentiality can be ensured.
- Notices mailed to patients (e.g., appointment reminders, missed appointment follow-ups, abnormal test results, etc.) shall be in a sealed envelope or other secured method that does not reveal PHI.
- Notification to family members or guardians of minors are subject to consent requirements.

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**RESPONSIBILITY**

Administration  
Information Services  
Health Information Management  
Attending Staff  
Residents  
All Employees

**PROCEDURE DOCUMENTATION**

Attending Staff Manual  
Nursing Services & Education Generic Structure Standards  
Health Information Management Policy and Procedure Manual  
Departmental Policy and Procedure Manuals

**REFERENCES**

45 Code of Federal Regulations Parts 160 and 164  
California Code of Regulations, Title 22, Sections 70707, 70747, 70749  
California Code of Regulations, Title 8, Section 3204(c)(6)  
California Civil Code, Confidentiality of Medical Information Act  
California Healthcare Association Consent Manual  
DHS Policy #361, Confidentiality of Patient Medical Records and Information  
Medical Center Policy #203.2, Protected Health Information: Right of Individual to Agree or Object to the Use and Disclosure of  
Medical Center Policy #203.4, Protected Health Information: Right to Request Confidential Communications of  
Medical Center Policy # 205 Consent for Care  
Medical Center Policy #216.1, Privacy Practices Joint Notice Distribution  
Joint Commission Standards (Management of Information / Ethics, Rights, and Responsibilities)

**REVISION DATES**

April 1, 1995; October 20, 1998; April 9, 2002; June 22, 2004; September 25, 2008;  
January 13, 2015; August 23, 2019, April 6, 2023