

## HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

<b>SUBJECT:</b> VII-102 AUTHORIZATION FOR RELEASE OF HEALTH RECORDS	<b>POLICY #:</b> 1255
<b>APPROVED BY:</b> Aram. Messerlian (CHIEF PHYSICIAN I ANESTHESIOLOGY), Beryl Brooks (ADMR, COMP AMB HEALTH CARE CENTER), Leila Adriano (NURSE MANAGER)	<b>VERSION:</b> 1
<b>DATE APPROVED:</b> 06/28/2016	

**PURPOSE:** To provide guidelines for the appropriate handling of authorizations for release of information for the Ambulatory Surgery Center

**POLICY:** Disclosure of confidential information shall be made only upon receipt of a properly executed authorization signed by the patient or the patient’s legal representative, in order to ensure compliance with State law and HIPAA regulations, which mandate the protection of patient’s rights to confidential treatment of records pertaining to his/her care.

Release of information for Ambulatory Surgery Center patients will be made through the High Desert Regional Health Center’s Health Information Management Release of Information unit as per the MOU and per policy and procedure for authorization to release patient information.

Disclosure of information for the purpose of treatment, payment or operations does not require written authorization.

**PROCEDURE:**

1. All requests for copies of Ambulatory Surgery Center records will be processed by the High Desert Regional Health Center’s Health Information Management Release of Information unit in accordance with their policy.

<b>Original Date:</b> 07/07/2014
<b>Reviewed:</b> 07/21/2017
<b>Next Review Date:</b> 07/21/2020
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