PERMITTED DISCLOSURES OF HEALTH INFORMATION

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http://ozone.ohsu.edu/cc/hipaa/docs/disc.pdf

The following represents general rules for the disclosure of protected health information and does not address many more specific scenarios. This document does not replace existing OHSU policy and procedures pertaining to who is authorized to disclose health information (e.g., if HIS is responsible for the release of records for your area, then it may be HIS responsibility to address and respond to a request represented in this chart). Questions and comments can be directed to the Office of Information Privacy & Security at oips@ohsu.edu or ext. 4-0219. Note: These general rules do not apply to certain health information that receives additional protections. These include HIV, drug and alcohol, psychotherapy notes, mental health, and genetics information.

Use: The sharing, utilization, examination, or analysis of information within OHSU.
For permitted uses of protected health information, see: http://ozone.ohsu.edu/cc/hipaa/docs/nbuses.doc.

Disclosure: The release, transfer, provision of access to, or divulging in any other manner of information outside OHSU.

Covered Entity: The healthcare provider, health plan, or healthcare clearinghouse.

Health information may be used and disclosed without patient authorization as follows:

1. To the patient about themselves (You may ask that a request be in writing to assist in processing the request)

2. For OHSU treatment purposes (including the coordination of health care services with covered or non-covered entities, consultation between providers, and referrals from provider to provider)

3. For OHSU payment activities (including obtaining reimbursement for services rendered (this may involve disclosures to covered or non-covered entities (such as an auto insurer)), determination of eligibility or coverage, claims management, collection activities, and utilization review activities)

4. For OHSU health care operations (including quality improvement, outcomes analysis, disease management, training programs, teaching activities, medical review, OHSU legal services, audit functions, business planning, certification, credentialing, and accreditation activities)

5. To another health care provider for their treatment activities (Epic Care Everywhere, by contract meets this requirement; records are not available unless a share treatment relationship exists)

6. To another covered entity for the payment activities of the entity that receives the information

7. To another covered entity for the health care operations of the receiving entity, if both OHSU and the receiving covered entity has or had a relationship with the patient, the health information disclosed pertains to such relationship, and the disclosure is for one of the following activities:
   • Conducting quality assessment and improvement activities (including outcomes evaluation and development of clinical guidelines)
   • Case management or care coordination
   • Professional performance review, health plan performance, health care provider training,
accreditation, certification, licensing, or credentialing activities*

- Health care fraud and abuse detection or compliance

*This includes HEDIS reporting to private health plans

In the following situations health information may be disclosed without authorization, but the patient must be given an opportunity to agree or object

1. Facility directory information (inpatient specific) – Unless the patient opts-out, limited information may be disclosed to a person inquiring about a patient by name. The information that can be disclosed is limited to patient’s location in the facility and patient's condition described in general terms (e.g., good, fair, serious). See https://ohsu.ellucid.com/documents/view/301/?security=071153b621b15f64d96f9baae91f053e1be920ae for details.

2. To family, friends, or others identified by the patient – As long as the patient is given the opportunity to restrict the disclosure and they do not do so, health information may be disclosed to family, friends, or other identified individuals involved in the health care of a patient provided that the protected health information directly relates to the person's involvement in the health care of the patient or payment related to the patient's health care. See https://ohsu.ellucid.com/documents/view/290/?security=5d9745980be6cce207f5ca442946160b43006a8e for details.

In the following situations health information may be disclosed without patient authorization or the opportunity to agree or object. These disclosures are subject to the accounting of disclosures. See http://ozone.ohsu.edu/cc/hipaa/docs/ads.doc for further details.

1. As required by law
2. For public health purposes (i.e., mandated reports to state registries (immunizations, cancer, and trauma), vital statistics reports (i.e., birth and death certificates), newborn screenings, communicable disease reports (i.e., HIV, STD, and TB))
3. To the Food and Drug Administration for purposes related to the quality, safety, or effectiveness of a FDA regulated product or safety.
4. About victims of abuse, neglect, or domestic violence to the proper authority (including reports on child abuse, elder abuse, abuse of mentally ill or developmentally disabled)
5. For health oversight activities (including audits and inspections by federal and state agencies such as the Center for Medicare and Medicaid Services, the Department of Health & Human Services, OMPRO, etc)
6. For judicial or administrative proceedings under certain conditions (Note: certain documentation and assurances may be required for releases of health information in these situations. Please contact Health Information Services or the Office of Information Privacy & Security (OIPS) for details)
7. For law enforcement purposes (Certain additional requirements exist. If you are unaware of these details please contact Public Safety or OIPS
8. About decedents to Coroners, Medical Examiners, or Funeral Directors as required by law for each to carry out their duties with respect to the decedent
9. For cadaveric organ, eye or tissue donation and transplantation purposes
10. For human-subject research that receives a waiver of authorization by the IRB.
11. As necessary to avert a serious threat to health or safety of a person or the public
12. For certain specialized government functions (Contact OIPS for details)
13. As required by law for worker’s compensation purposes (http://www.ozone.ohsu.edu/cc/hipaa/docs/workcomp.doc)
Disclosures not covered in the previous sections require specific patient authorization.*
Some examples of disclosures that might require patient authorization include the following:

- Disclosures for life insurance purposes
- Disclosures for disability purposes
- Disclosures to schools (immunization records of minor students may be provided to schools with the oral permission of parents/legal guardian)
- Disclosures to attorneys
- Disclosures for marketing activities
- Disclosures to the OHSU Foundation for fundraising purposes (if more than patient demographics or dates of service will be used)
- Disclosures to employers
- Disclosures of health information for human-subject research activities

*Protected health information that is de-identified or part of a limited data set has separate guidelines and may be released in circumstances not represented on this chart. Contact OIPS for additional information.