

University of Colorado Health Sciences Center
HIPAA Policy

Policy:	4.3	Latest Revision: 02/26/03
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I. Purpose, Reference, and Responsibility

A. Purpose

The purpose of this policy is to identify the circumstances under which UCHSC personnel may disclose PHI to family members, etc., who are involved in the care of an individual, without an authorization by the individual.

B. Reference

45 C.F.R. § 164.510(b).

C. Responsibility

It is the responsibility of anyone who uses or discloses PHI to follow this policy if that person intends to disclose PHI directly relevant to a patient's care or payment related to health care to a family member, other relative, or a close personal friend of the patient, or any other person identified by the patient.

II. Applicability and Definitions

A. Applicability

This policy applies to the disclosure to an individual's family member, other relative, close personal friend, or any other person identified by the individual of PHI directly relevant to such person's involvement with the individual's care or payment related to health care without the need for an authorization from the individual.

B. Definitions

Protected Health Information (PHI)

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III. Policy

A. General

The UCHSC may use or disclose PHI to the following individuals and under the following circumstances and conditions without the need for a written and valid authorization from the patient whose PHI is being disclosed.

1. Under the circumstances identified in section 2(a) and 2(b) below the UCHSC may disclose to a family member, other relative, or a close personal friend of the patient, or any other person identified by the patient, the protected health information directly relevant to the person's involvement with the patient's care or payment related to the patient's health care.
2. The UCHSC may use or disclose PHI to notify or assist in the notification of a family member, a personal representative of the patient or another person responsible for the care of the patient, the patient's location, general condition, or death as long as such disclosure is consistent with the following:
 - a. Uses and disclosures with the patient present. If the patient is present and capable of making health care decisions, the UCHSC may use or disclose the PHI if it has:
 - 1) obtained the patient's agreement to do so;
 - 2) provided the patient with the opportunity to object and he/she does not; or,
 - 3) reasonably infers from the circumstances that the patient does not object.

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- b. Limited uses and disclosures when the patient is not present. If the patient is not present or is incapable of objecting or agreeing because of a medical condition or an emergency circumstance, the UCHSC may, in the exercise of professional judgment, determine whether the disclosure is in the best interests of the patient and, if so, disclose only the PHI that is directly relevant to the person's involvement with the patient's health care. For example, the UCHSC may use professional judgment and its experience with common practices to make reasonable inferences of the patient's best interest in allowing a person to act on behalf of the patient to pick up filled prescriptions, medical supplies, X-rays, or other forms of PHI.
 - c. Use and disclosure for disaster relief purposes. UCHSC may use or disclose PHI to a public or private entity authorized by law to assist in disaster relief efforts. For such a situation, the HIPAA Privacy Officer must be contacted before any such disclosure occurs.
3. The UCHSC may orally inform the patient of and obtain the patient's oral agreement or objection to a use or disclosure permitted by this policy.