

 HAWAII HEALTH SYSTEMS CORPORATION <i>"Quality Healthcare For All"</i>	Department: Quality Through Compliance	Policy No.: CMP 034A
	Issued by: Audit and Compliance Committee	Revision No.: Effective Date: September 19, 2013
POLICY	Subject: HIPAA Release of Facility Directory Information to Public and Press	Approved by:  HHSC Board of Directors By: Carol A. VanCamp Its: Secretary/Treasurer
		Supersedes Policy: Page: 1 of 3

Last Reviewed: August 19, 2013. Next Review: August 19, 2016

- I. **PURPOSE:** To define the permitted uses and disclosures of protected health information (PHI) for facility directories that requires an opportunity for the individual to agree or to object.
- II. **DEFINITIONS:**
Protected Health Information (PHI) – Any information identifiable to an individual including demographic information whether or not recorded in any form or medium that relates directly or indirectly to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present or future payment for the provision of health care to an individual. Protected health information may be communicated and/or maintained in oral, written or electronic means.
- III. **POLICY:**
 - A. Hawaii Health Systems Corporation (HHSC) will inform each individual of the following:
 1. Basic information including patient name, location, condition and religious preference may be included in the facility directory information, and;
 2. Directory information may be disclosed as follows:
 - a) Patient location and general condition may be disclosed to individuals who ask for the patient by name, and;
 - b) Patient's religious affiliation, name, general condition and location may be disclosed to members of the clergy.
 - B. Each individual will be given an opportunity to restrict or prohibit such releases.
 - C. An individual who objects to inclusion of his/her information in the facility directory shall be made a "No Information" patient.
 - D. Any release of protected health information (PHI) in excess of patient name, general condition, location or religious affiliation (for clergy) will require an authorization from the patient or the patient's personal representative.
 - E. Emergency circumstances:
 1. If the opportunity to object cannot practicably be provided because of the individual's incapacity or an emergency treatment circumstance, the HHSC may use or disclose directory information if such disclosure is:
 - a) Consistent with prior expressed preference of the individual if known, and;

- b) In the individual's best interest as determined by HHSC in the exercise of professional judgment.
 - 2. HHSC will inform the individual and provide an opportunity to object to uses and disclosures for directory purposes when it becomes practicable to do so.
- F. HHSC will automatically list the following types of patients (if known) as "No Info" until such time as the patient or the patient's personal representative is able to determine the patient's information status:
 - 1. Victims of crime
 - 2. Trauma victims
 - 3. Psychiatric patients
 - 4. VIPs (celebrities, foreign and U.S. dignitaries, local politicians)
 - 5. Minors who have consented to their own care
 - 6. Inmates (NOTE: Inmate status will be determined by the custodial law enforcement official.)
- G. Patient Information Status:
 - 1. Regular: HHSC may release patient's name, condition and/or location to those who ask for patient by name if the facility's consent to release to the public form has been signed by the patient or emergency circumstances apply.
 - 2. No Information: HHSC does not release any information or acknowledge that patient is at HHSC.
 - a) Sometimes people are already aware that the patient is at HHSC. If this is the case, just relay that there is "No Information". The operator inquiry system will not show the name.
 - b) News media requests for patient information will be handled as "limited" information except those noted as "No Information".
 - c) Before releasing "regular" information about the patient, permission must be obtained from the patient or the patient's personal representative.
- H. Patient Conditions: The following patient conditions shall be used:
 - 1. Undetermined: Patient awaiting physician and assessment.
 - 2. Good: Vital signs are stable and within normal limits. Patient is conscious and comfortable. Indicators are excellent.
 - 3. Fair: Vital signs are stable and within normal limits. Patient is conscious but may be uncomfortable. Indicators are favorable.
 - 4. Serious: Vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.
 - 5. Critical: Vital signs are unstable and not within normal limits. Patient may be unconscious. Indicators are unfavorable.
 - 6. After notification of next of kin--Expired: Under §512(g), the death of an individual can be reported to coroners, medical examiners, funeral directors as appropriate but remains PHI and is not public information.
 - 7. *A prognosis should never be given to the media or the public.*
- I. The following will be implemented in HHSC facilities:
 - 1. Release of Information to the General Public:
 - a) Patients will be informed of HHSC policy relating to directory information in the Privacy Notice. The patient will be asked from the Emergency Department and the Admission Department to consent to be placed in the directory by signing the

- facility's consent form about the release to the public information such as name, condition, and health care status.
- b) The original signed form in (1) above will be sent to the nursing floor to be incorporated as a part of the patient's medical record.
 - c) Patients who are being treated for forensic, spousal abuse, are in police custody or victims of a crime that has been reported to the police, are automatic "No Info" patients. With the concurrence of the police department or correctional facility administration, the "No Info" regarding these patients may be removed.
 - d) HHSC intake departments will explain to the patient what "No Info" means (i.e., no information to anyone including family and friends, no flower delivery and so on) prior to obtaining their signature to allow their name on the directory etc.
 - e) At any time if the patient changes his/her mind regarding the release of information to the public etc., the Admissions department will be notified by telephone and the nursing unit/floor will forward a new copy of the facility's consent form. The original amended form is to remain in patient's medical record.
2. Release to Clergy:
- a) HHSC may provide information to community clergy for visits unless otherwise stipulated by the patient.
 - b) Patients will be notified of this practice at the time of treatment by the intake departments of Admitting and/or Emergency Departments.
 - c) "No Info" patients will not be on any clergy list.
 - d) At any time, the patient may opt out of this practice by signing a written request for "No Info". This will be documented on the consent form that is given to the floor treating the patient.
 - e) Patients will be visited by the clerical group upon the patient's request which can be made at any time throughout the hospital visit i.e. Buddhist, Catholic, Protestant, or Jewish etc.
3. Release to Media:
- a) The Hospital Administrator or designee will be called prior to any Release of Information to the media.
 - b) HIPAA changes: Release to media only if patient has a regular or limited information status and the media has asked for the patient by name.
 - c) Release is limited to the same elements as that of general public: patient location (may not want to give out to media) and general condition.
 - d) Any additional information, including interviews and photographs will require a HIPAA-compliant authorization completed by the patient or the patient's personal representative.

J. HHSC Facilities shall implement procedures to operationalize this Policy.

IV. APPLICABILITY: This Policy applies to all HHSC facilities.

V. AUTHORITY: Standards for Privacy of Individually Identifiable Health Information (HIPAA), 45 CFR, Subtitle A, Subchapter C, Section 164.510(a); "Guidelines for Releasing Information on the Condition of Patients" American Hospital Association, November 8, 2001.

VI. ATTACHMENT: None