COUNTY OF IMPERIAL DEPARTMENT OF BEHAVIORAL HEALTH SERVICES

POLICY AND PROCEDURE MANUAL

SUBJECT: Terminating Special Restrictions

on the Use and Disclosure of Protected Health Information

SECTION: Administration

REFERENCE: 45 C.F.R. Section 164.522(a)(2)

AUTHORITY: Behavioral Health Director

as the Local Mental Health Director and Alcohol and

Drug Administrator

PROCEDURE: 01-25

EFFECTIVE DATE: 6-14-04

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SUPERSEDES: 4-14-03

APPROVED BY:

PURPOSE:

To establish a procedure for terminating a special restriction(s) on the uses and disclosures of protected

health information (PHI).

SCOPE:

The information in this document applies to all members of the workforce which includes employees, contract employees, volunteers, and trainees, etc., granted access to protected health information (PHI).

NOTES:

Section 164.522 of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) grants individuals the right to request restrictions on the use and disclosure of protected health information. That is, an individual may request that ICBHS voluntarily agree not to use or disclose PHI in a way that the law would otherwise allow. An example of a restriction that may be honored includes not disclosing the individual's PHI to family members. Or, an individual may request that we not inform their doctor that he or she is seeking a second opinion.

ICBHS may choose not to agree to the requested restriction(s). If ICBHS does agree to the requested restrictions, it shall be bound by them.

Section 164.522(a)(2) of the HIPAA Privacy Rule provides for ICBHS to terminate its agreement to a restriction if: (1) the individual agrees to, or requests the termination in writing; or, (2) orally agrees to the termination and the oral agreement is documented; or (3) ICBHS informs the individual that it is terminating the agreement.

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DEFINITIONS:

Health Care Operations: Activities related to covered functions that include: Quality assessment and improvement activities; insurance-related activities; administrative functions including legal service; auditing functions; fraud investigations; business planning and development; business management and general; and administrative activities.

HIPAA: Health Insurance Portability and Accountability Act. The federal law passed in 1996 that provides national standards for health information.

<u>Individual:</u> Under HIPAA, individual means the person who is the subject of PHI. In this procedure, the term "client" is used to refer to the individual.

<u>Payment:</u> Activities undertaken by a provider to obtain reimbursement for the provision of health care.

Protected Health Information (PHI): Individually identifiable information relating to past, present, or future physical or mental health condition of an individual, provision of health care to an individual, or the past, present, or future payment for health care provided to an individual transmitted or maintained in any form or medium including oral, written, or electronic communication.

Treatment: Treatment refers to the provision, coordination, or management of an individual's health care or related services by one or more health care providers, including the coordination or management of health care by a health care provider with a third party consultation between health care providers relating to the individual; or the referral of an individual for health care from one health care provider to another.

<u>Use:</u> With respect to individually identifiable health information, the sharing, employment, application, utilization, examination, or analysis of such information within ICBHS.

Workforce: Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for the covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. In this procedure, the term "employee" will be used to refer to a member of the workforce.

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PROCEDURE:

PERSON RESPONSIBLE

Client

ICBHS

ICBHS Staff Receiving the Request

Privacy Officer

ACTION:

- 1. Requests to terminate an agreement to a restriction either:
 - a. in writing; or
 - b. orally, and the oral agreement is documented in the client's chart.

Go to step 3.

2. Decides to terminate the agreement to a restriction and informs the client in writing. Go to step 4.

Note: Any PHI created or received after the termination will not be restricted. However, any PHI created or received before the termination will remain subject to the restriction.

- 3. Refers the client, or the written request to the privacy officer.
- 4. Reviews the client's request or ICBHS' decision with the program manager.
- 5. Documents the termination on a Termination of Special Restriction/Terminacion De Restriccion Especial form and routes the form as follows:

Original: Client Canary: Chart

Pink : Privacy Officer

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ICBHS (cont.)

6. Retains all documentation relating to requests for termination of special restriction on the use and/ or disclosure of the client's PHI for six (6) years from the date of its creation or the date it was last in effect, whichever is later, or such longer period required by state law or other federal law.

It is ICBHS' records retention policy that all records be kept a minimum of seven (7) years from the date of discharge, except for minors, whose records shall be kept at least one (1) year after the minor has reached the age of eighteen (18), but in no case less than seven years.

Forms used in this procedure:

Termination Of Special Restrictions ICBHS 00-41 Terminacion De Restriccion Especial ICBHS 00-55