

USE and DISCLOSURE OF PROTECTED HEALTH INFORMATION – OPPORTUNITY TO AGREE OR OBJECT

Policy: For certain types of use and disclosure of protected health information (PHI), the University will inform an Individual in advance of the use or disclosure and give the Individual an opportunity to prohibit or restrict the use or disclosure.

Rationale: To maintain compliance with Title 45 CFR Part 164.510, Opportunity to Agree or Object.

I. General Provisions:

1. The University does not maintain a directory of its clients or patients since there are no in-patient services available at the University.
2. The University may use or disclose PHI to notify, or assist in the notification of (including identifying or locating), a family member, a personal representative of the Individual, or another person responsible for the care of the Individual of the Individual's location, general condition, or death.

II. Specific Procedures:

1. Procedure to disclose PHI to a family member or a personal representative of an Individual.
 - a. If the Individual is present, and has the capacity to make health care decisions, a member of the HIPAA-Covered Component's staff will:
 - i. Inform the Individual of the need for the disclosure,
 - ii. Provide the Individual an opportunity to object or agree to the disclosure or reasonably infer from the circumstances that the Individual does not object.
 - iii. Note the agreement or objection in the Individual's file.
 - iv. If agreement, make the disclosure and note the information disclosed in the Individual's file.
 - b. If the Individual is not present or does not have the capacity to agree or object to the use or disclosure, a member of the HIPAA-Covered Component's staff will:
 - i. Exercise professional judgment to determine whether the disclosure is in the best interests of the Individual.
 - ii. Note the inferred agreement or objection in the Individual's file.
 - iii. If agreement, make the disclosure and note the information disclosed in the Individual's file.