

SUBJECT: Disclosing PHI as Required by Law

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EFFECTIVE DATE: Draft
REVIEWED/REVISED:

PURPOSE: This policy is designed to give guidance and ensure compliance with all relevant laws and regulations when using or disclosing protected health information.

Pursuant to the Health Insurance Portability and Accountability Act (HIPAA), Section 164.512(a), MHS and its affiliates will follow this policy regarding disclosure of protected health information (PHI) as required by law.

POLICY:

MHS and its affiliates may use or disclose protected health information to the extent that such use or disclosure is required by law and the use or disclosure complies with and is limited to the relevant requirements of such law.

1. If federal, state and/or local law require a use or disclosure of protected health information, the covered entity will use or disclose protected health information to the extent that the use or disclosure complies with such law and is limited to the requirements of such law.
2. MHS and its affiliates will refer to any specific policies and procedures to determine whether or not the MHS affiliate must obtain consent, authorization, or give the patient an opportunity to agree or object to use or disclose protected health information.
3. In the event that two or more laws or regulations governing the same use or disclosure conflict, the more restrictive laws or regulations will be complied followed.

PROCEDURE:

1. MHS and its affiliates may use or disclose protected health information to the event that such use or disclosure is required by law including, but not limited to:
 - (a) For public health activities required by law
 - (b) For disclosures about victims of abuse, neglect, or domestic violence
 - (c) In order to comply with a valid court order or subpoena
 - (d) To comply with law enforcement requests
 - (e) To avert a serious threat to public health or safety

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- (f) To comply with special government functions or requests
- 2. When disclosing protected health information in accordance with procedure #1, the MHS affiliate will follow the policies and procedures relating to the applicable policy.
- 3. Personnel receiving a request from an individual or entity for use or disclosure of protected health information will use appropriate resources to determine whether the requesting individual is a person whom the entity has a knowing relationship.
- 4. Personnel will follow appropriate policies and procedures for verifying the identity and authority of individuals requesting protected health information.
- 5. Once it is determined, that use or disclosure is appropriate, HIM/Medical Record personnel with appropriate access clearance will access the patient's protected health information using proper access and authorization procedures.
- 6. The requested protected health information will be delivered to the individual in a secure and confidential manner, such that the information cannot be accessed by employees or other persons who do not have appropriate access clearance to that information.
- 7. HIM/Medical Records personnel will appropriately document the request and delivery of the protected health information. The disclosure will be logged when required pursuant to the MHS Accounting for Disclosures policy.
- 8. In the event that the identity and legal authority of an individual or entity requesting protected health information cannot be verified, personnel will refrain from disclosing the requested information and report the case to the appropriate MHS affiliate Privacy Officer in a timely manner.
- 9. Knowledge of a violation or potential violation of this policy must be reported directly to the appropriate MHS affiliate Privacy Officer or to the Corporate Compliance Hotline.