

ELY AREA AMBULANCE SERVICE

Policy on Releasing PHI to Family Members and Others

Purpose

The Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) permits ELY AREA AMBULANCE SERVICE to release protected health information (“PHI”) about patients to family members, friends and others involved in the treatment of the patient or payment for that treatment. This policy outlines our procedures for releasing PHI to family members and others involved in our patients’ care.

Scope

This policy applies to all ELY AREA AMBULANCE SERVICE staff members who receive requests from family members, friends and others for PHI of patients of ELY AREA AMBULANCE SERVICE. This policy does not apply to formal requests from patients or their personal representatives for: access to PHI; amendment of PHI; restriction of PHI; accounting of disclosures of PHI; or confidential communications. This policy shall apply to requests for PHI from family members of the patient or others who do not qualify as the patient’s personal representative, but who are involved in the patient’s care or payment for that care.

Procedure

General Procedure for Releasing PHI to Family Members and Others

1. HIPAA permits ELY AREA AMBULANCE SERVICE staff members to release PHI that is directly relevant to the patient’s care or payment for care to family members, friends and others involved in a patient’s care, or payment for that care, whenever releasing PHI to that individual would be in the best interest of a patient. ELY AREA AMBULANCE SERVICE may also use or disclose PHI to notify family members or others about a patient’s location, general condition, or death.
2. If an individual other than the patient or the patient’s personal representative makes a request for PHI from an ELY AREA AMBULANCE SERVICE staff member, the staff member shall first determine whether the patient about whom the request pertains to is present, competent and able to make healthcare decisions.
3. If the patient is present, competent and able to make healthcare decisions, the staff member should obtain the patient’s agreement to share the requested PHI with the individual, or give the patient an opportunity to object. The staff member may ask the patient whether it is okay to talk to the individual and release PHI to them. Or, the staff member can simply infer from the circumstances that the patient does not object to sharing the information with the individual. For example, if the patient’s neighbor asks to ride along in the ambulance and the patient smiles, the staff member could infer that the patient is fine with the neighbor riding along and overhearing any PHI that is discussed. Or, if the staff member starts asking the patient about his or her medical history and the patient motions for a family member to come over, the staff member can infer that the patient wants the staff member to speak with the family member about his or her medical history.
4. If the patient is unavailable or unable to make medical decisions because of a physical or mental reason at the time of the request, then the staff member may only disclose PHI to the requestor if the requestor is involved with the patient’s treatment or payment for the patient’s treatment and the staff member believes that releasing PHI to the requestor is in the best interests of the patient. First, the staff member should ask the requestor what his or her relationship is to the patient. Then, the staff member should determine whether disclosure of PHI to the requestor would be in the best interest of the patient. In making this determination, the staff member should consider things such as:

- a. Who the requestor is and what the requestor's relationship is to the patient
 - b. Whether the requestor appears to have a legitimate interest in the patient's care or payment for that care
 - c. Whether the staff member believes that the patient would want that requestor to know the PHI or whether the patient would benefit from the requestor knowing the PHI
5. If the patient is deceased, a staff member may release relevant PHI to family members and others who were involved in the deceased patient's care prior to death or payment for care, unless doing so would be inconsistent with any prior expressed preference of the patient. The staff member should only disclose PHI that is relevant to the requestor's involvement with the patient's care prior to death or payment for that care.