

**HIPAA PRIVACY RULE: PATIENT REQUESTS TO RESTRICT
USES/DISCLOSURES OF PROTECTED HEALTH INFORMATION**

POLICY:

A. USC Obligations If Patient Requests Restrictions on Uses and Disclosures of Protected Health Information¹

Under the HIPAA privacy regulations, a patient has a right to request that USC² restrict its use or disclosure of the patient's Protected Health Information in certain situations as described below.

USC will consider requested restrictions. However, except in the limited circumstances described below, USC has no obligation to agree to any such request, nor is it required to cite a reason for refusing to do so. Because of the administrative difficulties involved in implementing requests for restrictions, as a general policy, USC does not agree to such restrictions.

B. Patient Right to Request Restrictions in Certain Situations

The HIPAA privacy regulations recognize the right of patients to request restrictions of USC's use and disclosure of their Protected Health Information in the following circumstances:

1. To carry out treatment, payment or health care operations;
2. To the patient's family member, other relative, close personal friend, or any other persons who might otherwise receive disclosures of

¹ Protected Health Information is defined as identifiable information that relates to the individual's past, present or future physical or mental health condition or to payment for health care.

² For purposes of the HIPAA Privacy Rule, USC includes those entities that comprise Keck Medicine of USC, including but not limited to, USC Norris Cancer Hospital, Keck Hospital of USC, USC's employed physicians, nurses and other clinical personnel, those units of USC that provide clinical services within the Keck School of Medicine, School of Pharmacy, the Herman Ostrow School of Dentistry, Physical and Occupational Therapy as well as USC Care Medical Group, affiliated medical foundations of Keck and their physicians, nurses and clinical personnel, USC Verdugo Hills Hospital, its nurses and other clinical personnel, Verdugo Radiology Medical Group, Verdugo Hills Anesthesia, and Chandnish K. Ahluwalia, M.D., Inc. and those units that support clinical and clinical research functions, including the Offices of the General Counsel, Audit and Compliance.

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Protected Health Information where directly relevant to such person's involvement with the patient's health care or to payment related to the patient's health care;

3. To notify, or assist in the notification of (including identifying or locating), a patient's family member, personal representative or other person responsible for the patient's health care, about the patient's location, general condition or death;
4. To make reasonable determinations regarding limited uses and disclosures when the individual is not present;³
5. To public or private entities authorized to assist in disaster relief efforts, in order to notify or assist in the notification of (including identifying or locating), a patient's family member, personal representative or other person responsible for the patient's health care, about the patient's location, general condition or death.

C. Required Accommodations

USC is required to comply with the patient's request for a restriction if:

1. The disclosure is to a health plan for purposes of carrying out payment or health care operations (and is not for the purposes of carrying out treatment) and is not otherwise required by law; and
2. The Protected Health Information pertains solely to a health care item or service for which the health care provider involved has been paid out of pocket in full.

PROCEDURES:

A. Procedure for Requesting Restrictions on Uses and Disclosures of Protected

³ If the individual is not present for, or the opportunity to agree or object to the use or disclosure cannot practicably be provided because of the individual's incapacity or an emergency circumstance, USC providers may, in the exercise of professional judgment, determine whether the disclosure is in the best interests of the individual and, if so, disclose only the protected health information that is directly relevant to the person's involvement with the individual's health care. A USC provider may use professional judgment and its experience with common practice to make reasonable inferences of the individual's best interest in allowing a person to act on behalf of the individual to pick up filled prescriptions, medical supplies, X-rays, or other similar forms of protected health information.

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Health Information

1. All requests for restrictions must be submitted in writing by the patient to the Department Clinic Manager or the Health Information Management Office.
2. USC only will consider requests for restrictions on uses and disclosures of Protected Health Information in limited circumstances and as determined on a case-by-case basis. No restrictions will be accepted without prior written agreement among the patient and the patient's health care provider.

B. Procedure for Accepting Patient Request for Restrictions

1. If USC has agreed to restrict the use or disclosure of Protected Health Information pursuant to a patient's written request, such restriction should be maintained in the record of the patient and a copy should be provided to all relevant individuals that would be responsible for implementing the restriction.
2. Notwithstanding the above, USC is nonetheless permitted to use or disclose the restricted Protected Health Information in violation of such restriction if:
 - a. The patient who requested the restriction needs emergency treatment and the restricted Protected Health Information is needed to provide the emergency treatment. USC may use the restricted Protected Health Information, or may disclose such information to a health care provider, to provide such treatment to the patient, provided that USC request that such health care provider not further use or disclose such Protected Health Information; or
 - b. Such use or disclosure is required to be disclosed to the Director, Office for Civil Rights of the U.S. Department of Health and Human Services in order to investigate or determine USC's compliance with the Privacy Rule; or
 - c. Such use or disclosure is permitted or required under USC HIPAA Policy GEN - 103 (relating to uses and disclosures based on public policy which do not require a patient's authorization).

3. The Health Information Management Department or the Department Clinic Manager should confirm that the patient understands any limitations on USC's implementation of the restriction.

C. Grounds for Terminating a Restriction

If USC has agreed to any restrictions on the use or disclosure of Protected Health Information pursuant to the above, USC may terminate its agreement to restrict its use or disclosure of such Protected Health Information, if one of the following grounds for termination exists:

1. The patient agrees to or requests the termination in writing;
2. The patient orally agrees to the termination and the oral agreement is documented contemporaneously in writing; or
3. USC informs the patient that it is terminating its agreement to restrict uses and disclosures of Protected Health Information. (USC is not required to tell the patient why it is terminating the agreement.) However, this method of termination is only effective with respect to Protected Health Information created or received after USC has so informed the patient about the termination.

D. Documentation

The Department Clinic Manager or the Health Information Management Office that has agreed to any restrictions set forth in this policy shall document such restrictions in the patient's medical record. Documentation regarding termination of such restrictions also should be maintained in the patient's record and in any applicable USC billing system, as appropriate.

Responsible Office:

Office of Compliance

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