Policy CR-041

**Release of Information**

*Initially Approved: 09/22/15*

*Policy Topic: Health Services – Administration*

*Administering Office: Health Services*

*Approved: 10/21/15*

1. POLICY STATEMENT

WCU Health Services is required to protect the privacy and confidentiality of each patient by adhering to all HIPAA (Health Insurance Portability and Accountability Act of 1996) Standards. Except in life threatening emergencies, or unless required by federal, state, or local law(s), PHI (Protected Health Information) will not be released without a patient’s written consent.  Health Services does not allow patients to sign a “blanket” Release of Information form.  Authorization forms should be completed each time a patient requests new information to be released from their health record.

1. DEFINITIONS
2. Protected Health Information or PHI: Any information about health status, provision of health care, or payment for health care that can be linked to a specific individual.
3. Health Information Portability and Accountability Act or HIPAA: Part of federal regulations set forth to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and wellbeing.
4. Notice of Privacy: A notice of a Covered Entity’s privacy practices which must be given to each patient explaining the covered entity’s safeguards to maintain patient confidentiality and the patient’s right to privacy.
5. Release of Information or ROI: is a statement signed by the patient authorizing a contact person to release protected health information about the patient.
6. Electronic Health Record or EHR: An [electronic health record](https://www.healthit.gov/providers-professionals/learn-ehr-basics) (EHR) is a digital version of a patient’s paper chart. EHRs are real-time, patient-centered records that make information available instantly and securely to authorized users.
7. IMPLEMENTING PROCEDURES
* Patients will complete an Authorization to Release Medical Information for any and all requested transfer of PHI. Signed authorizations may be faxed, mailed or emailed for processing.
* Electronic Health Records (EHR) are accessed only by authorized individuals within WCU Health Services who have completed a Confidentiality and Security Agreement
* Authorizations will be logged within the patients’ medical record each time a new release is indicated using the transaction code PHI Disclosure the Authorization form will be scanned to the patient summary in the EHR.
* Records retentions according to
* Exceptions for releasing without patient authorization:
	+ Reporting of certain communicable diseases to the NC Department of Health and Human Services;
	+ Responding to a lawfully issued court order;
	+ Providing immunization records upon written or verbal request to state or local health departments, other colleges or universities, or the patient’s attending physician or designee.

**IV POLICY REVIEW**

This policy will be reviewed annually or upon mandated legal changes.

**V RELATED POLICIES, PROCEDURES or DOCUMENTS**

**Health Services Policies:**

ADMIN-007 Patient Rights and Responsibilities

CC – 102 Informed Consent

ADMIN -000 Privacy and Confidentiality

* HIPAA Policy

**Health Services Documents:**

Authorizations to Release Information

Confidentiality and Security Agreement

Required Employees to Sign

Notice of Privacy