



Institutional Handbook of Operating Procedures Policy 09.02.07	
Section: Clinical Policies	Responsible Vice President: EVP and CEO Health Systems
Subject: Patient Information	Responsible Entity: Health Information Management

I. Title

Use and Disclosure of Inpatient Protected Health Information (PHI)

II. Policy

Inpatient [PHI](#) may only be used or disclosed in a manner that ensures and protects inpatient privacy and confidentiality.

PHI may be used on the patient care units by authorized UTMB personnel for [treatment](#), [payment](#) and [health care operation](#) purposes.

UTMB respects the diverse cultural needs, preferences, and expectations of the patients and families it serves to the extent reasonably possible while appropriately managing available resources and without compromising the quality of health care delivered.

III. PHI located in Patient Care Units

Nurse Managers are responsible for the security and management of hardcopy medical records located in their assigned patient care unit.

Current and old hardcopy medical records should remain in the patient care unit in the immediate work area of the nurses' station in order to ensure access by UTMB personnel involved in the direct care of the patient during their admission. Upon discharge, all current and old hardcopy records must be returned to the Department of Health Information Management (HIM).

Non-UTMB personnel (such as health insurance and worker's compensation representatives) who require access to inpatient PHI for utilization review or continued stay review must work with both Patient Placement Center (PPC) Utilization Review personnel and HIM to access hardcopy and electronic medical records (EMR).

All other non-UTMB personnel, including non-UTMB health care providers and patients' family and friends, are not allowed to access inpatient PHI without proper [authorization](#) from the patient or their designated representative (a process managed by HIM). Accordingly, all non-UTMB personnel requesting the disclosure of PHI on patient care units should be directed to HIM or the PPC.

IV. Procedures

Disclosure of PHI from an Inpatient's Medical Record for Treatment, Payment, or as Required by Law

PHI may be disclosed for treatment purposes (such as discharge planning and continuity of care), payment purposes (such as continued stay reviews and worker's compensation reviews), and as required

by law (such as to the Medical Examiner and to the courts for involuntary commitment hearings) by authorized employees as detailed below.

When disclosing PHI, the following guidelines must always be followed:

1. Limit disclosure to the minimum necessary;
2. Verify that documentation pertains only to a specified patient;
3. Ensure the patient's name is documented on each page;
4. Ensure copies are legible; and
5. Reassemble the paper medical record correctly.

If the PHI to be disclosed is in hardcopy paper format, authorized employees may copy the information themselves or contact and deliver the hardcopy medical record to HIM, specifying the information to copied, and then pick up the copies when ready.

If the PHI to be disclosed is in the EMR, authorized employees may print the PHI themselves as follows:

1. Discharge Planning/Continuity of Care

Authorized employees from the Departments of **Care Management** and **Nursing** and contracted eligibility vendors may copy/print and disclose PHI for discharge planning/continuity of care purposes.

A notation should be made in the progress notes (by UTMB employees) or Invision (by contracted eligibility vendors) documenting that a disclosure occurred, the specific information that was disclosed, to whom it was disclosed, and the purpose of the disclosure.

2. Payment

Authorized employees from the **Admitting Department** may copy/print and disclose PHI for payment purposes.

A notation should be made on a copy of the Social Security Administration form documenting that a disclosure occurred, the specific information that was disclosed, to whom it was disclosed, and the purpose of the disclosure.

3. Involuntary Court Commitment

Authorized employees from the **Department of Psychiatry** may copy/print and disclose PHI to the court when UTMB is requesting involuntary court commitment.

Copies of commitment documents must be placed in the patient's medical record documenting that a disclosure occurred, the specific information that was disclosed, to whom it was disclosed, and the purpose of the disclosure.

Disclosure of Inpatient PHI for Other Purposes

Disclosure of an inpatient's PHI for reasons other than treatment, payment or as required by law to a medical examiner or the courts for an involuntary commitment proceeding is under the authority of HIM.

1. As a general rule, incomplete inpatient PHI is not disclosed until the patient is discharged and the record is completed. An exception to this general rule may be made upon approval from the patient's physician.

2. Only information deemed necessary by HIM and the physician to meet the purpose of a request will be disclosed.

V. Related UTMB Policies and Procedures

[IHOP - 06.02.00 - Maintaining Patient Confidentiality through the Appropriate Use and Disclosure of PHI](#)

VI. Dates Approved or Amended

<i>Originated: 08/01/08</i>	
<i>Reviewed with Changes</i>	<i>Reviewed without Changes</i>
12/08/11	10/14/2016
	01/13/2020

VIII. Contact Information

Health Information Management
(409) 772-1918