

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
HEALTH INFORMATION OPERATIONAL GUIDELINES

I. Uses and Disclosures: Family Members and Friends

A. POLICY

Rev. 07/01/2004

1. **Use and Disclosure:** The University of Florida may disclose to a family member or friend, protected health information that is directly relevant to that person's involvement in the care of the patient or the payment for care.
2. **Application:** If the patient is present and able to make decisions, reasonable efforts will be made to inform the patient in advance and allow the patient the opportunity to restrict the disclosure.
 - a) *In most cases, the Notice of Privacy Practices will serve as notification to patients.*
 - b) *The patient may also be informed, and consent obtained, verbally.*

B. DEFINITIONS

1. **Disclose:** To release, transfer, provide access to, or divulge in any manner, protected health information held by the University of Florida.
2. **Personal Representative:** A person acting on behalf of the patient who must be treated as the patient for the purposes of the privacy regulations. (See Verification of Identity and Authority for a list of appropriate personal representatives.)

C. PRIVACY REQUIREMENTS

1. **Patient's Rights:** If the patient is present and has exhibited the capacity to make health care decisions, the University must inform the patient in advance that relevant protected health information may be disclosed to a family member, close personal friend, or any other person identified by the patient who is directly involved with the patient's care or payment for care.
2. **Notification:** The University may use or disclose protected health information to notify a family member or another person responsible for the care of the patient, of the patient's location, general condition, or death.

D. PROCEDURES:

1. **Verify and document the identity** of persons acting on behalf of the patient with whom PHI will be discussed, their relationship to the patient, and their authority to receive information. (See Verification of Identity and Authority.)
 - a) *If appropriate, establish a method for uniquely identifying the family member or friend for use in telephone verification. (Password, unique number identifier, etc.)*
 - b) *After identification, health care professionals may discuss a patient's condition by telephone or in person with the identified family member or friend.*

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
HEALTH INFORMATION OPERATIONAL GUIDELINES

2. Use the “**minimum necessary rule**”, standard reasonable precautions, and professional judgment at all times to protect the patient’s privacy rights.
3. It is **permissible** to request that parents or legal guardians of minor children (patients) provide a written list of people with whom health information may be discussed and a suggested method for identifying them.

E. REFERENCES:

HIPAA: 45 CFR §164.510 (Uses and Disclosures: Opportunity to Object)

F. EXHIBITS: None